

The College of Pastoral Supervision & Psychotherapy, Inc.

P.O. Box 162, 432 West 47th Street, Suite-2 West, New York, NY 10036. Phone: (212) 307-1573

Reverend Raymond J. Lawrence, Jr.
General Secretary

Reverend Jim Gebhart
President

National Clinical Training Seminar (NCTS) October 23-24, 2006

Venue: **Carmel Retreat**
1071 Ramapo Valley Rd.
Mahwah, NJ 07430

Contact: Francine Angel, Coordinator
Tel. No. (212-305-5817)
Fax No. (212-305-5666)
E-mail: FRA9010@nyp.org

Dates: October 23, 24, 2006 (Monday and Tuesday)
Arrival: 10.00 a.m.-10.30 a.m. for registration on October 23rd, 2006
Lunch: 12:30 p.m.
Departure: 2:00 p.m. on Tuesday

Cost: \$100.00 (single) includes registration, one night stay and four meals
\$90.00 (double) includes registration, one night stay and four means
Day use of facilities: \$50.00 (includes all meals)

(A non-refundable deposit of \$15.00 will be applied
towards your balance) To **expedite** registration, please pay balance upon arrival. (For those who
can please mail the entire cost for the seminar)

The deadline for submission of registration is October 6, 2006.

(This is **critical** because the retreat center will charge us based upon those who have registered)

The Rev. Francine Angel
Department of Pastoral Care
The Presbyterian Hospital (PH-1)
622 W. 168 Street
New York, NY 10032

The College of Pastoral Supervision and Psychotherapy, Inc.

NATIONAL CLINICAL TRAINING SEMINAR

October 23-24, 2006

REGISTRATION FORM

Name: _____

Address: _____

Tel. Nos. (Work) _____ (Home) _____ (Fax) _____

E-mail Address: _____

Kindly check the following: Registration fee: \$15.00 (Non-refundable deposit)
 1 night stay \$100.00 single/\$90.00 double

Please check: Chaplain Intern/Resident Pastoral Counselor Supervisor-in Training
Psychotherapist Diplomate Clinical Chaplain

I enclose herewith my check for the total of \$ _____ being my payment for the above.

Signature: _____

_____ Date: _____

N.B. The deadline for submission of registration forms is Friday 10/06//06. Registrations after the deadline will present problems of room assignment. Making changes upon arrival will result in problems for the facility; so please plan to stay for the entire seminar.

Mail registration form and check (**made out to "CPSP"**) to:

The Rev. Francine Angel
Department of Pastoral Care
The Presbyterian Hospital – PH-1
622, W. 168th Street
New York, NY 10032

**National Clinical Training Seminar (NCTS)
October 23-24, 2006
Mahwah, New Jersey**

PROGRAM SCHEDULE

Date	Time	Program
10/23	10:00-10:30 A.M.	Registration/Continental Breakfast
Mon.	10:30-11:00	Welcome/Introductions/Orientation
	11:00-12:30	Theme: “ Attachment: The Work of John Bowlby ” Presenter: The Rev. Dr. David Franzen
	12:30-1:30	Lunch
	1:30-2:20	Case Presentations
	2:20-3:10	Case Presentations
	3:10-3:50	Tea Break
	3:50-4:40	Case Presentations
	4:45-5:15	Reports from Presenters
	6:00-7:00	Dinner
	8:00-9:30	Group Relations Seminar (Tavistock Model) Consultant - Raymond J. Lawrence
	9:30	Social Hour
10/24	8:00 -9:00	Breakfast
Tues.	9:15-10:45	Part II: “ Separation: Anxiety and Anger ” Presenter: The Rev. Dr. David Franzen
	10:45-11:35	Case Presentations
	11:35-12:25	Case Presentations
	12:30-1:30	Lunch
	1:30-2:00	*Final Gathering /reports from presenters/evaluation

50 minutes time slots have been scheduled for Case Presentations

***Please** remain until the end of the seminar.