



Postdoctoral Clinical Scholar Fellowship Application Instructions

Application Items — Submit all of the required documents in one package:

- 1. The completed Postdoctoral Clinical Scholar Fellowship Application.
- 2. Cover letter Explain why you are applying for this fellowship and how you feel it fits in with your career plans.
- 3. Curriculum Vitae Include information about your clinical training experiences, employment and education history, as well as any publications, presentations and professional affiliations.
- 4. Official Graduate Transcripts.
- 5. Three Letters of Recommendation from individuals who have direct, evaluative knowledge of your clinical performance. Recommendations should be e-mailed directly from the recommender. At least one letter must be from a clinical supervisor. *Please see Guidelines for Postdoctoral Clinical Scholar Fellowship Letters of Recommendation*.

Send application documents in one package to:

Kristen Catuara
Assistant Director of Administration, Education Programs
The Family Institute at Northwestern University
kcatuara@family-institute.org

(847) 733-4300, ext. 399 (847) 733-0390 (fax)

Applications for the Postdoctoral Clinical Scholar Fellowship will be accepted beginning **October 15**, **2020** and completed applications are due by **January 15**, **2021**. An application is considered to be complete when all required application documents have been received by The Family Institute at Northwestern University. Applications received after this date may not be considered for the current year. After the application has been reviewed, qualified candidates will be invited for an interview. All applicants will be notified by letter of the faculty's decision as quickly as possible.

The Family Institute at Northwestern University actively seeks applicants from underrepresented racial and ethnic groups so that our body of students, fellows, faculty and staff will more closely reflect the diversity of American society. Furthermore, The Family Institute is committed to broad inclusiveness and affording equal opportunity to all without regard to age, gender, race, ethnicity, national origin, religion, socioeconomic background, sexual orientation or physical ability.

Below are the application materials for the Postdoctoral Fellowship. Please follow the instructions below and send all materials on or before **January 15**, **2021** to the email address listed above.

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Clinical Scholar Postdoctoral Fellowship Application

APPLICANT INFORMATION
Full Name
Degree
Where did you complete your degree?
What program did you complete?
If you completed a psychology program, was the program APA approved? Yes No
Where did you complete your internship? (if applicable)
Was your internship APA approved? (if applicable)
CURRENT EMPLOYMENT INFORMATION
Place of Employment
Street Address
City/State/Zip
Business Phone
Supervisor's Name Title

Applications accepted from October 15, 2020 - January 15, 2021



BACKGROUND INFORMATION (OPTIONAL)

If you do not wish to provide this optional information, please check the box "I do not wish to answer."

GENDER IDENTIFICATION	ETHNICITY IDENTIFICATION	RACE IDENTIFICATION
Female Male Other: I do not wish to answer	Are you Hispanic or Latino/a? A person of Cuban, Mexican, Chicano/a, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. Yes No Other:	Check all that apply: American Indian/Alaska Native Asian Black/African American Native Hawaiian/Pacific Islander White Other (Please specify): I do not wish to answer

GRADUATE TRAINING

Please list all the schools at which you had completed graduate and postgraduate level coursework. An official, sealed transcript should be submitted from each school.

SCHOOL	DATES	TYPE OF DEGREE AWARDED	MAJOR/TOPIC OF STUDY



FAMILY THERAPY TRAINING EXPERIENCES

List all seminars, workshops and other training in family therapy in chronological order, most recent first. If you have more items to list than this space allows, please include them in a separate document and attach it to this form.

SPONSORING AGENCY OR INSTITUTION	DATES	PRESENTER	PROGRAM OR TOPIC

PROFESSIONAL REFERENCES

Please list below all people who will provide your references. Three are required, but you may submit one additional reference. Forms with guidelines are enclosed for you to distribute to referrers.

RELATIONSHIP	ADDRESS	EMAIL ADDRESS
	RELATIONSHIP	RELATIONSHIP ADDRESS



STATEMENTS OF PURPOSE

Please answer the following questions on a separate sheet of paper.

Use no more than one half page for each answer.

- 1. What clinical specialties do you hope to develop in your career?
- 2. What do you hope to achieve by participating in the Postdoctoral Clinical Scholar Fellowship Program at The Family Institute?
- 3. Please discuss your motivation for applying for this program, highlighting any life and family experience that led you to a professional career in family therapy.
- 4. Please discuss your most valued achievements and your hopes for your career after the program.

ADDITIONAL INFORMATION

ADDITIONAL INFORMATION	
ease add below any other information you think the Admissions Committee should know in considering the application.	
How did you hear about the Postdoctoral Clinical Scholar F	Fellowship?
The Family Institute at Northwestern University does not finits entrance requirements. The Institute, therefore, reserves. It is the policy of The Family Institute that any trainee sharmly Institute. The Institute is committed to broad inclusively without regard to age, gender, race, ethnicity, national origin orientation or physical ability.	the right to refuse admission to any applicant. all have equal access to the resources of The iveness and affording equal opportunity to all
I certify that all statements made in this application for a Fellowship Program at The Family Institute at Northwester documents submitted in support of this application become	n University are correct, and I realize that all
Applicant's Signature	Date



Guidelines for Postdoctoral Clinical Scholar Fellowship Letters of Recommendation

Applicant

Please write your name in the space below and distribute this form to each person who will provide a reference for you.

To whom it may concern:	
has submitted your	name as a reference in connection with an
application for admission to the Postdoctoral Clinical Scholar	Fellowship Program at The Family Institute
at Northwestern University.	

We would appreciate if you would provide the information requested below before **January 15**, **2021**. Please be advised that, under current law, the applicant may ask to read the reference. Please use your own stationery for your letter of recommendation.

- 1. What is or was your relationship to the applicant? Between what dates did this relationship exist? In what context have you observed the applicant's clinical performance?
- 2. Describe how the applicant functions as a therapist, including both strengths and weaknesses.
- 3. How does the applicant relate to colleagues? To supervisors?
- 4. Evaluate the applicant's ability to profit from a systemically informed clinical training program, i.e., his/her potential to become an independent researcher and clinician.

Thank you for your candid appraisal of the applicant; your comments will be an important factor in the admissions decision. Recommendations should be e-mailed directly from the recommender.

Please send recommendations to:

Kristen Catuara
Assistant Director of Administration, Education Programs
The Family Institute at Northwestern University
kcatuara@family-institute.org

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