

**Infant-Parent Training Institute
Infant Observation Course Application**

1430 Main Street, Waltham, MA 02451

781-693-5652

dwalker@jfcsboston.org

Name _____

Last

First

Mailing Address _____

Street

Apt.

City

State

Zip

Home phone _____

e-mail address _____

Work Phone _____

Current Employer and / or Private Practice _____

Please list any professional licensure:

Where did you hear about the Infant-Parent Training Institute?

Please describe your interest and expectations for the Infant Observation Course.

Please describe your experience relevant to the Infant Observation Course.

Signature

Date

Please send completed application with resume and \$50 application fee (checks payable to JF&CS) to Deborah Walker, Administrative Coordinator, Infant-Parent Training Institute.