

Chicago Center for Psychoanalysis

PO Box 6095

Evanston, Il 60204-6095

Record of Supervised Psychoanalyses

Candidate: _____ Date: _____

First Supervised Psychoanalysis

Initials of analysand _____ Date psychoanalysis began _____

Is this case ongoing? Yes ___ No ___

Number of sessions per week: Initially: _____ Currently: _____ Total number of sessions to date: _____

Supervisor: _____

Address: _____

Frequency of supervisory sessions:

Initially _____ Currently: _____

Total number of supervisory sessions to date on this case _____ If supervision has ended, date: _____

I have completed the required number of analytic and supervisory hours for this case: Yes _____ Not yet _____

Second Supervised Psychoanalysis

Initials of analysand _____ Date psychoanalysis began _____

Is this case ongoing? Yes ___ No ___

Number of sessions per week: Initially: _____ Currently: _____ Total number of sessions to date: _____

Supervisor: _____

Address: _____

Frequency of supervisory sessions:

Initially _____ Currently: _____

Total number of supervisory sessions to date on this case _____ If supervision has ended,
date: _____

*I have completed the required number of analytic and supervisory hours for this case: Yes
_____ Not yet _____*

Third Supervised Psychoanalysis

Initials of analyst _____ Date psychoanalysis began _____

Is this case ongoing? Yes ____ No ____

Number of sessions per week: Initially: _____ Currently: _____ Total number of sessions to
date: _____

Supervisor: _____

Address: _____

Frequency of supervisory sessions:

Initially _____ Currently: _____

Total number of supervisory sessions to date on this case _____ If supervision has ended,
date: _____

*I have completed the required number of analytic and supervisory hours for this case: Yes
_____ Not yet _____*

*Submit this form in electronic copy to tkalven@ccpsa.org and in hard copy to Toulia Kalven, Chicago Center for
Psychoanalysis at the above PO Box address. Please submit a second hard copy to Adina Keesom, Progression
Chair, 708 Church St #243, Evanston, IL 60201. The completed form will be viewed by the Progression Chair and
your assigned Progression Mentor and will be saved in your file.*

