



**SELF-LOVE RECOVERY INSTITUTE**  
Promoting Personal and  
Professional Development

**SELF-LOVE RECOVERY PRACTITIONER CERTIFICATION (SLRPC) APPLICATION**

**Personal Information**

1. Full Name:
2. Physical Address:
3. Mailing Address:
4. Cell Phone:
5. Work Phone:
6. Home Phone:
7. Email Address:
8. Date of birth:
9. Education History:
10. Degree(s):

**Cover Letter** – Please address the below questions in a cover letter, written to Ross Rosenberg:

1. Why do you want to be in this program?
2. What are your short-term and long-term goals with the SLRPC?
3. What elements of your past education would apply to the SLRPC Program?
4. What trainings or instructional programs have you completed that apply to the SLRPC Program?
5. What license(s) and certification(s) do you possess, and how would they enhance the Program?
6. Have you read the *Human Magnet Syndrome*, and if so, what impact has it had on your life?
7. Are you familiar with Ross's Self-Love Deficit Disorder and Codependency Cure material? If so, what do you think of them?
8. What is your coaching or psychotherapy experience?
9. Have you had structured supervision before? If so, how has it enhanced you professionally?
10. Do you personally relate to Ross's work? If so, please explain.
11. Do you consider yourself to be Self-Love Deficient (codependent)? If so, please explain the worst of it, and where you are now?
12. What is your personal history in counseling/psychotherapy?
13. Are you open to seeking psychotherapy if recommended by Ross Rosenberg?
14. Can you commit to at least one year of the SLRPC program?