PART I: NAME OF APPLICANT

Name__________________________________________________________________________________________________________________

PART II: PRACTITIONER CERTIFICATION

Year you were certified as Practitioner:__________________Your Primary Trainer:________________________________________________

Expected date of completion:___________________________

PART III: STATEMENT OF PRIMARY TRAINER MENTORSHIP

I _______________________________________, approve and endorse that  __________________________________________

Name of Trainer Name of Applicant

be admitted to the Practitioner Applicant for Trainer Process (PAT). We understand that this process requires us to work togeth-

er, and to schedule regular and routine consultation sessions.

The PAT process requires a minimum of three years of progressively responsible training and education in psychodrama,
sociometry and group psychotherapy. The PAT will: 1) Offer a minimum of 144 hours of training workshops over three to five

years; 2) Receive direct consultation with the Primary Trainer: 48 hours of consultation for the first 144 hours of required train-
ing workshops and will receive a minimum ratio of 1 consultation hour to 8 training hours for training workshops offered over

the minimum required number of training workshop hours; 3) Take responsibility for informing their students that workshops

are offered for credit and that they can receive a maximum 160 hours of training credit from all PATS; and 4) Obtain 100 hours

of Professional Development.

Together we have developed a plan for the next year. Attached is a one to two page narrative of the PAT’s intention to obtain

professional development, offer training workshops and receive consultation over the next year. The narrative consists of three

sections: I. Professional Development, II. Training Workshops, and III. Consultation. The professional development section con-
sists of two paragraphs. The first paragraph is an assessment of the PAT’s current skills, knowledge and abilities to function as
a TEP. The second paragraph states the skills, knowledge and abilities that the PAT plans to acquire over the three years and
when and where the PAT will acquire them. The second section contains the training workshops that the PAT plans to offer in
the coming year including where and when they will be offered, and the topics for the workshops. The final section will be a
brief description of the PAT’s intentions for receiving consultation.

It is the responsibility of both parties to meet with each other regularly and routinely. It is the responsibility of the PAT to keep
a record of all training hours offered for credit, and the responsibility of the Primary Trainer to verify that all documents sub-
tered to the Board are accurate.

We have reviewed this application to enter the certification process for Trainer, Educator, Practitioner. We, the undersigned, have
agreed to the training plan we have attached. We verify that all the information it contains is accurate, to the best of our knowl-
dge. We understand that the Board of Examiners reserves the right to verify any information contained in the application.

_______________________________________ ____________ ________________________________ _____________
SIGNATURE OF TRAINER DATE SIGNATURE OF APPLICANT DATE