

EMDRIA® CREDIT POLICY AND PROCEDURE MANUAL

5806 Mesa Drive, Suite 360
Austin, Texas 78731
Website: www.emdria.org

Tel: (512) 451-5200
Fax: (512) 451-5256
Email:
info@emdria.org

How to Use This Manual

This manual is designed to serve as both a guide to the application process and an ongoing reference tool. It is organized into sections directly relating to the various applications. Each section moves through an application, question by question, providing background explanations as necessary. We hope that you find the manual helpful. We expect policies to change from time to time. EMDRIA Credit Providers will be notified by email when revisions are made. Please check the EMDRIA website to download the most recent EMDRIA Credit Policy and Procedure Manual to assure that you are fully informed of current policies.

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PROVIDER APPLICATION OVERVIEW

The Provider Application is designed to communicate to EMDRIA how the Provider will handle administrative and organizational aspects with regard to all programs offered through the Provider.

For individual providers, not all questions will apply equally and some questions may not apply at all. If this is the case, a brief explanation will be sufficient.

All standards are based on current EMDRIA policies. Your answers to the questions should focus on how you will handle various administrative and organizational aspects. We expect you to tell us how you will perform certain actions or functions in order to meet current EMDRIA Policies. Applications are assessed on the basis of thoroughness in addressing the standards with respect to the length and complexity of programs organized and administered through the Provider.

WHO MAY APPLY

Both organizations and individuals may apply to become providers. All applicants must be willing and able to follow current EMDRIA policies. EMDRIA Regional Coordinators can apply for Credit Provider status for their EMDRIA Regional Meetings. There are no applications fees for EMDRIA Special Interest Groups (SIG) or Regional Meeting Credit Providers.

APPLICATION PROCEDURE

The Provider application, including all supporting documents and non-refundable \$100 application fee should be emailed to hoye@emdria.org

If you are not able to email, please mail or fax to:

EMDR International Association
5806 Mesa Drive, Suite 360
Austin, Texas 78731
Fax: 512-451-5256

Please be sure to answer all questions on the Provider Application. If you have questions call EMDRIA at (866) 451-5200.

APPROVAL PROCESS

Provider applications are reviewed by EMDRIA staff for thoroughness in answering administrative and organizational set up procedures. All applications receive a written response as to their final status.

Provider approval does not guarantee approval for any specific program. In order for programs to receive EMDRIA Credit, a Program Application and supporting documents must be submitted. Program Applications are peer reviewed for consistency and adherence to EMDRIA policies.

INCOMPLETE APPLICATIONS

If an application does not contain sufficient material, applicants will be notified about what is needed in order to complete the Provider application process.

DENIAL OF APPLICATION

Applicants who cannot clearly document that they meet the guidelines in the Provider application (as defined in this manual) will be denied approval. A written statement of reasons for denial will be mailed to the applicant. An applicant denied approval may appeal the decision.

APPEALS

Appeals must be filed within 60 days of receipt of the denial letter. See page 12 for instructions on the appeal process.

ADMINISTRATIVE HOLD

If the Provider fails to act in accordance with EMDRIA policies regarding administrative and/or organizational functions of the program, the Provider's approval status may be placed on "Administrative Hold". The hold status will remain in effect until the Provider can assure EMDRIA that necessary changes have been implemented.

During the Administrative Hold period, a Provider may not submit Program Applications. The problems that can cause a Provider to be placed on Administrative Hold normally involve the program application and/or follow-up reporting process. If corrective action is not taken to resolve administrative problems, Provider status will be revoked.

If a Provider has been placed on Administrative Hold, the provider may not be allowed to renew through the established Provider Renewal process. Instead, the provider will be required to reapply using the initial Provider Application process.

REVOCAION OF APPROVAL

EMDRIA may revoke a Provider's approval if the Provider continues to sponsor programs that do not meet EMDRIA's standards. Upon notification of failure to meet EMDRIA's standards, the Provider has 10 days to remedy or Approval is revoked.

If a Provider's status is revoked, that revocation of approval will extend to any program that has received approval but has not yet begun. The Provider is responsible for notifying attendees in advance that the program is no longer approved for EMDRIA Credit. Participants will be able to receive credit for programs that have commenced prior to notice of revocation.

Providers may not offer programs that appear to represent, in part or in whole, training in EMDR without first securing EMDRIA Approval for that program. If a Provider sponsors a program that appears to represent training in EMDR but does not meet EMDRIA standards for training in EMDR, the process for Revocation of Approval will commence. During this process, the Provider may not represent itself as an EMDRIA.

PROVIDER APPLICATION GUIDE

APPLICANT

Use the legal name of the organization or individual, not the person completing the application. This will be used as the official Approved Provider name.

To make changes to the Provider's contact information, please use the Change of Information Form that is included in this manual.

PROVIDER TYPES

Applicants can apply for status as an EMDRIA Credit Provider using one of the four types below:

Organization – Any group of individuals formed for the purpose of conducting educational programs, who are dedicated to performing administrative duties, and functions as a means of providing objective overview of the content of programs held.

Individual – A single person or group of not more than two people that form for the purpose of conducting educational programs and performing administrative duties. Individual providers do not usually possess an intrinsic method of objectivity, such as a committee dedicated to content or instructor review.

Regional Coordinator/Meeting – Any person or group of people who have applied for and been approved as an EMDRIA Regional Coordinator.

Special Interest Group (SIG) – These professionals share a common interest (e.g. client population, theoretical orientation, specific target problems, clinical setting) and represent an EMDRIA SIG

PROGRAM DEVELOPER/SELECTOR

This person is responsible for ensuring that Program content adheres to EMDRIA policies. If the Provider will not be developing programs on their own, then they will be selecting instructors to present programs that are of interest to the Provider. If Program Developer/Selector is not an EMDRIA Certified Therapist, the Provider must have the program independently reviewed by an EMDRIA Certified Therapist prior to submission of each program to ensure that programs meet the EMDRIA standards as stated in the EMDRIA Credit Policies and Procedures Manual.

PROGRAM ADMINISTRATOR

This person is responsible for ensuring that the Provider adheres to EMDRIA policies, as they relate to the administration of the programs that are offered.

PERSON RESPONSIBLE FOR RECORDS

This person is the key contact for information regarding program records, whether by EMDRIA or attendees. The record storage site listed is presumed to be the primary storage site for all program records.

SPECIALTY AREA/PRIMARY THEORETICAL APPROACH TO EMDR (IF ANY)

If the Provider plans to focus on a particular area of specialty, or theoretical approach, please list the area or approach in this area. This is not meant to limit the scope of programs offered, but to give EMDRIA insight into your organizational approach to overall program development and/or selection.

Program Selection and Development

CURRICULUM CONTENT

Providers are expected to select or develop programs which comply with current EMDRIA policies. Programs are also expected to demonstrate a direct benefit to the client as a consumer. A central concern is that programs address the needs of EMDR trained clinicians and offer opportunities to improve or expand their knowledge and skills that directly relate to the professional practice of EMDR.

PROGRAM DEVELOPMENT/SELECTION

In this section, please provide information on either the Program Developer or the person who will have the primary responsibility of choosing programs.

GOALS AND OBJECTIVES

Goals and Objectives – These should relate to continuing education for EMDR trained professionals. Avoiding Conflict of Interest Program should be designed to educate the participant and not to market or sell a particular service or product.

PROGRAM INSTRUCTORS/PRESENTERS

Criteria – Providers are expected to select instructors who are competent in conveying information and knowledgeable in teaching certain subjects. Review of a presenter's prior teaching experience, evaluations, publications, and references are all means of assessing their qualifications. Presenters are expected to have sufficient expertise to provide instruction in areas that are within their training and scope of practice. Individual providers should list the resources available to them in reviewing instructor qualifications for areas outside of their specialty or expertise.

Teaching Methods – It is recommended that lectures be supplemented with discussion, case review, role playing, video examples and/or small group exercises. Handouts and/or slides are recommended.

PROVIDER APPLICATION GUIDE

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Administration

GENERAL ORGANIZATION

Well-administered programs are essential to maintaining high quality programs. Therefore, Providers should have a clear administrative structure with a designated administrator responsible for programs. The administrator must be aware of current EMDRIA policies.

Lines of administrative responsibility should be clearly established to insure compliance with EMDRIA policies, even in the event of administrative staff changes.

Providers are expected to demonstrate that they have the sufficient administrative ability, resources and budget to develop and implement programs and maintain required documentation. It is recognized that there will be differences in size and complexity of administration for Providers. However, financial resources must be adequate to support all program costs.

GENERAL MONITORING

Monitoring of Program Content and Applications - Providers are expected to select or develop programs which comply with current EMDRIA policies, and are responsible for all program applications submitted to EMDRIA for approval, including programs developed by the presenter. Providers who are not EMDRIA Certified therapists must have a review process for program selection, content, and application that includes an EMDRIA Certified therapist and is independent from the presenter. Promotional Materials must include the words "(Provider Name) maintains responsibility for this program and its content in accordance with EMDRIA standards."

Instructor Monitoring – This question refers to ongoing instructors and long-term performance, not initial selection criteria or one-time guest lecturers. Individual providers, where the provider is the only instructor to be used for programs, should have some means of independent peer assessment.

Program Evaluation – Providers are expected to obtain feedback on Programs offered regarding quality of instruction, instructor's knowledge and expertise, usefulness of knowledge for participants, and fulfillment of educational objectives. A summary or copies of these evaluations will be submitted to EMDRIA within 45 days of the programs completion. Providers may develop their own program evaluation, or they may use the evaluation form developed by EMDRIA. Regardless of which form is used, a sample must accompany the application.

Evaluation Feedback – This data should be used to improve program and instructional quality. Individual providers should demonstrate how they will maintain objectivity throughout the evaluation process. If you have access to colleagues or organizations that can assist you in areas outside your expertise, please include them in your explanation.

RECORD KEEPING

The Provider shall be required to maintain attendance records for three (3) years for each program. Acceptable documentation of participation shall include attendance rosters, sign-in and sign-out sheets, and completed program evaluation forms.

ETHICAL COMPLAINTS

This question concerns the process the Provider will use when investigating any variety of ethical complaints that should arise.

EQUAL OPPORTUNITY

Organizational – The assumption is that the Provider has an equal opportunity policy and that you do not engage in discriminatory behavior.

Curriculum – There are many ways of addressing issues of cultural diversity within a curriculum. This question addresses implementation rather than policy. The following list is not meant to be definitive, but rather a place to begin:

- Does the program development or selection process include individuals from a variety of religious/cultural/race, age, gender or sexual orientations?
- Are instructors required to maintain an awareness of and sensitivity to the issues of these varied groups? Do you actively recruit instructors representative of (or competent by training or research to address issues of) race, cultural background, immigrant status, age, sexual orientation or religion?
- Does your marketing encourage participation by all people interested in the field? Do you look for opportunities to encourage ethnic minority participation?
- Does your program evaluation process invite feedback in this area?

EQUAL ACCESS

Facilities must accommodate and be accessible according to standards of the Americans with Disabilities Act. This criterion includes access to restrooms, parking spaces, overnight rooms, and meeting rooms.

Your answer should address how you determine whether a facility will meet the needs of your attendees and how you plan to accommodate those with special needs.

PROGRAM APPLICATION OVERVIEW

Providers must submit a Program Application for each program held, even if the program has been previously approved for EMDRIA Credits.

WHO MAY APPLY

Only EMDRIA Approved Providers may submit Program Applications.

APPLICATION PROCEDURE

The Program Application including all supporting documents and non-refundable application fee should be emailed to lhoye@emdria.org.

If you are not able to email, please mail or fax to:

EMDR International Association
5806 Mesa Drive, Suite 360
Austin, Texas 78731
Fax: 512-451-5256

CHANGE OF INFORMATION

If there have been any changes to basic information (address, staff, phone or fax number, primary record storage site), a Change of Information form can be submitted.

WHEN TO APPLY

Providers can expect a decision from the Standards & Training Committee in 45 days after EMDRIA receives the complete Program Application. If the Application requires revisions, you can expect a response in 15 days after EMDRIA receives the revisions. If you submit an event that has 4-10 program applications, please allow 90 days for the review process. If an event is submitted with more than 10 program applications, please allow at least 120 days for the review process. If you would like your brochure to indicate "Approved for EMDRIA Credits", please allow sufficient time for the entire review process.

APPROVAL PROCESS

Applications are submitted to EMDRIA where they are reviewed. All applications will receive a written response as to their final status. Provider approval does not guarantee approval for any specific program.

INCOMPLETE APPLICATIONS

If a Program Application does not contain sufficient material for the review process, you will be notified about the status of the application, and the material needed to complete the review process. Applications using outdated forms will be returned. The review process will be delayed until the necessary information has been received.

DENIAL OF APPLICATION

Program Applications that do not meet current EMDRIA Policies will be denied. A written statement of the reason(s) for denial will be mailed to the Provider, including specific recommendation for resubmission. Denied Program applications may appeal the decision. If the decision is not appealed, an applicant must wait at least 60 days from the date of the final notification of denial before re-submitting a substantial revision of the denied program.

APPEALS

Appeals must be submitted within 60 days of the date listed on the denial letter. See page 12 for instructions on the appeal process.

PROGRAM APPLICATION GUIDE

PROVIDER INFORMATION

This information must reflect the information from your approved provider application. Any changes to your basic provider application must be made, in writing, using the Change of Information form. Be sure to include the name and contact information for the person who can respond to questions about the programs content or requests for clarification.

PROGRAM INFORMATION

Program Title – is the official title of the workshop that will be used in advertising materials.

Program Fee – refers to the fee charged for each attendee when no discount is offered.

Program Description – describes the program's content. Please limit the description to 50 words.

Program Date(s) and Time(s) – refers to the anticipated program date (month/day/year) as well as the start-end hours. For e.g.: June 18, 20XX from 9am – 5pm.

Total Instructional Time – Credit hours must directly relate to actual hours of instruction. EMDRIA Credits will not be offered for programs less than one (1) hour in length. For programs longer than one (1) hour, all breaks **over 15 minutes** must be subtracted when calculating the total instructional time for the program application. EMDRIA Credits will be approved in whole or half-hours units.

EMDR Training & Program Level –Participants must be made aware of the required level of EMDR Training level in the promotional materials as follows:

1) No EMDR Training Required – These programs are appropriate for and open to all clinicians, including those with no prior EMDR Training. The content of such programs should enhance the EMDR related skills of clinicians and should not attempt to teach EMDR specific procedures to clinicians with no prior EMDR training.

2) Partial EMDR Training Required – These programs are appropriate for clinicians who are at least partially trained in EMDR. The content of such programs should enhance the skills of clinicians in the basic eight phase protocol.

3) Full EMDR Training Required – These programs are only appropriate for clinicians who are fully trained in EMDR. The content of such programs should enhance the EMDR related skills of clinicians. Examples include: using EMDR with special client populations; increasing skill in the use of cognitive interweaves or resource development; or modifications to the standard EMDR protocol phases 1, 2, 7 or 8.

EMDR Training & EMDRIA Credits – Completion of an EMDRIA Approved Basic EMDR Training is

considered the fundamental knowledge base required in order to understand and apply the EMDR protocol. Although the contents of some programs may be appropriate for clinicians with no prior EMDR training or for partially trained EMDR clinicians, **only those who have completed the full Basic EMDR Training can receive EMDRIA Credits** (continuing education units in EMDR) by attending a program that has been approved for EMDRIA Credits.

1) If offering a program that is open to clinicians with no prior EMDR training or to those who are only partially trained in EMDR, be sure that all promotional materials and advertisements list the (minimum) level of EMDR training that is required for program attendees. Be sure that those attendees with no EMDR training and partial EMDR training understand that they are not eligible to receive EMDRIA Credits.

2) If offering a program that is only open to clinicians who are fully trained in EMDR, be sure that all promotional materials and advertisements state that proof of completion of an EMDRIA Approved Basic EMDR Training (in its entirety) is required for attendees to register. Only participants who are fully trained in EMDR can receive EMDRIA Credits upon completion of the program.

PRESENTER/INSTRUCTOR INFORMATION

For programs with more than presenter, one individual must be identified as the primary instructor. The primary instructor is responsible for the overall program material and ensuring that its presentation conforms to the stated goals and objectives.

Program Material

PROGRAM CONTENT REQUIREMENTS

EMDRIA policies require that programs be pertinent to the theory, practice, and methodology of EMDR and enable mental health professionals to provide better care to the consumer. EMDRIA examines program content to ensure that they meet current policies and has nothing by which to judge other than the materials submitted. Materials must clearly demonstrate how the program meets the requirements.

Please Note: EMDRIA does not bear any responsibility for copyright infringement by presenters since these presenters are not EMDRIA employees. If EMDRIA involved itself in an attempt to monitor or control copyright compliance, it would

PROGRAM APPLICATION GUIDE – continued

likely become liable for violations. Copyright infringement can result in serious monetary consequences. The Provider and/or presenter, not EMDRIA, is solely responsible for obtaining written permission before using copyrighted materials as part of a program. The only exception is that relatively brief quotes may be used – not entire pages – and then the source must be identified.

EMDRIA Definition of EMDR – All programs submitted for EMDRIA Credit approval must demonstrate consistency with the EMDRIA Definition of EMDR. Please refer to pages 16-18 of this manual for the full definition. In Phases 3–6, standardized steps must be followed to achieve fidelity to the method. In the other 4 phases there is more than one way to achieve the objectives of each phase.

If your material is a deviation from the EMDRIA Definition of EMDR, you must submit empirical research supporting its effectiveness. This research will be reviewed by the EMDRIA Research Committee prior to review by the Standards and Training Committee.

Combining EMDR with other Modalities – Programs which combine EMDR with another modality must clearly indicate how this combination will occur and where in the 8-phase approach of EMDR the other modality will fit. To illustrate how it works, you must submit a minimum of one case example. The case example must include the following:

- 1) Literature Review
- 2) Introduction of the case
- 3) Presenting problems
- 4) Client history
- 5) Assessment
- 6) Case conceptualization
- 7) Course of treatment, including assessment of progress and outcome
- 8) Discussion of treatment implications
- 9) Recommendations
- 10) References

Case Consultation versus Pre-Determined Case Consultation – Any case discussions for which EMDRIA Credits are to be earned must meet the following standards, and will not be considered Consultation towards EMDRIA Certification.

For “consultation” to be granted EMDRIA Credits within a given workshop it needs to be:

- A) Cases that are part of the predetermined curriculum
- B) A method to clarify or highlight a teaching point
- C) Inclusive of specific “objectives” for that portion of the timeline

D) Not a period of responding to clinician’s needs in regards to specific individual cases
Programs that offer extended periods of discussion of participants’ case material which do not meet the above standards will not be granted EMDRIA Credits for that portion of their program.

EMDR Training & Program Level – Be sure that the program’s content is consistent with the required level of EMDR training for participants. Please refer to page 6 of this manual for specific details.

PROGRAM APPLICATION REQUIREMENTS

When submitting your program application for EMDRIA Credits, be sure to submit the following information along with the application itself. EMDRIA may request additional materials if your documentation is insufficient for the review.

Program Abstract – This is a detailed description of the full content of the program. This should accurately reflect what information will be presented during the program.

Program Objectives – This portion addresses the intent of the program’s content. The program objectives consist of what the instructor expects the participants to learn as a result of attending the program.

Program Content – Provide an outline of your program content that clarifies how your objectives will be met.

Program Timeline – This is the outline and time schedule for the entire length of the program. It is important to know the time spent on individual blocks of material. The program content should be broken down into either half-hour or hour long segments including any breaks and/or lunch, if taken.

Program Handouts – Any handout materials that will be dispersed to program participants are now required for the application review process. Handout materials that are not in their final form (incomplete, under revision, or rough drafts) will be accepted for the review process. If no handouts are available at the time of application, you must provide sufficient documentation of your content to demonstrate how each of your program objectives will be met. EMDRIA may request further materials if your handouts and/or documentation are insufficient for our review.”

PROGRAM APPLICATION GUIDE – continued

CURRICULUM VITA

A curriculum vita can be any document listing education, training, scope of practice or licensure, experience, workshops, presentations and/or papers to support competence in the subject matter that the instructor will be presenting. If a program has more than one instructor, curriculum vitas for all instructors must be included.

PROMOTIONAL MATERIALS

Promotional materials must include the following information:

- 1) ADA Statement: “This workshop is held in facilities which are in compliance with the Americans with Disabilities Act. Please contact (insert name & number) if special accommodations are required.”
- 2) If you plan to advertise your program prior to receiving official notification regarding the program’s approval for EMDRIA Credits, please be sure to advertise that an “Application for EMDRIA Credits is under review”.
- 3) The required level of EMDR training. **Please do not refer to Part 1 & 2 Training OR Level 1 & 2 Training** because not all EMDRIA Approved training programs use these descriptive terms. If the program is open to Partially Trained EMDR clinicians then please advertise as “Partial Completion of an EMDRIA Approved Basic EMDR Training is required. Those attendees with only partial training are not eligible to receive EMDRIA Credits.” If the program is open only to Fully Trained clinicians then please advertise as “Full Completion of an EMDRIA Approved Basic EMDR Training is required”.
- 4) Promotional Materials must include the words “(Provider Name) maintains responsibility for this program and its content in accordance with EMDRIA Standards”

CONFERENCES/TRAINING EVENTS

A conference/training event is defined as a single event or program consisting of a series of presentations. Each of those presentations cannot be less than an hour in length. The program application for a conference/training event consists of one application for the entire event, in addition to submitting an abstract, objective, timeline, and curriculum vita for each presentation seeking EMDRIA Credits. Documentation procedures for attendance monitoring, program evaluations and other administrative details that apply to the entire conference should be submitted. Promotional advertising materials should be submitted as well. The fee for the conference/training event application is \$10 plus \$15.00 per EMDR presentation, - not to exceed \$100.00.

Each presentation within a conference/training event must meet EMDRIA criteria as described above in order for an attendee to receive credit. For example: a conference/training event program is submitted for a certain number of EMDRIA Credits. Upon review, not all are approved. In order for an attendee to receive EMDRIA Credit, he or she can only select from the presentations that are approved.

Variable credit can be granted based on the total number of presentations a participant attends within a conference. Credit cannot be granted for any single presentation that is not attended in full.

Evaluation Process

PROGRAM EVALUATION

A program evaluation must be submitted with the program application. This is a subjective evaluation regarding the presentation of the program and must include questions concerning the instructor’s knowledge of the material and whether the stated program goals were actually presented. If you are planning to use the EMDRIA supplied sample program evaluation, please enclose a copy with the application.

Administration

PROGRAM MONITORING

It is expected the Provider will actively monitor attendance, to include departure and return of attendees during lunch breaks. To earn credit for a program less than or equal to fifteen (15) hours in length, 100% physical attendance is required. For programs longer than fifteen (15) hours and occurring over four (4) separate, non-contiguous days or longer, a minimum of 80% physical attendance is required for EMDRIA Credit. Partial EMDRIA Credit (meaning anything less than the number of hours the program is approved for) cannot be granted to a participant.

Program Documents – Samples of the program evaluation, attendance-reporting list, and attendance certificate that you will use for the program must be submitted with the program application. If you have submitted these forms with a previous application, and the forms have not changed, you may state that the forms are “on file with EMDRIA”. If you decide to change the forms after the application has been submitted, you must send one copy of the forms to be used, with a cover letter, to EMDRIA.

PROGRAM APPLICATION GUIDE – continued

PARTICIPANT CERTIFICATES

Certificates should include the EMDRIA approved program number. This allows the attendee, as well as EMDRIA to readily identify the program as approved. Remember that the name and license number, the program title and the program date are also required to be present on the certificate. Only participants with full EMDRIA Approved Basic Training may receive an EMDRIA Credit certificate of completion for the program.

PROGRAMS REQUIRING REVISIONS

When your application requires revisions, please address the questions and/or comments of the Standards and Training Review Committee by revising your application in the relevant section(s). Please resubmit each document for which revisions, additions, or clarifications have been requested. Please clearly identify your revisions in brackets, preferably in a different color.

If a program is requesting 6 credit hours or less, applicants have 30 days to make the necessary changes. Programs requesting more than 6 credit hours have 45 days to submit the changes. If the applicant does not submit the changes in time, the program application will be denied and applicants will need to submit another program application.

PROGRAM FOLLOW-UP REPORTS

PROGRAM FOLLOW-UP REPORT

One copy is to be signed and returned to EMDRIA within 45 days of the completion of the approved program. A copy should be made for your files. All inquiries as to the status of program credit will be referred to the Provider as they are responsible for issuing EMDRIA Credit certificates of completion.

FOLLOWING THE PROGRAM, THE PROVIDER MUST FURNISH EMDRIA WITH:

1. *Attendance List*: The attendance list must include the Provider name, the Program number, and the program date in order to allow EMDRIA to positively identify the program. It is the Provider's responsibility to clearly identify all that attend their programs. The attendees must be listed by name and license number, and whether they have previously completed an EMDRIA Approved Basic Training Program. If the Program is authorized for variable credit (conferences), please list the number of hours each attendee received. Only legible lists will be accepted for reporting purposes. If we can't identify the attendees, we can't verify attendance. The attendee list must be a single list of attendees with license numbers and notation of which attendees are fully trained in EMDR. If you submit a sign-in/sign-out sheet, it must be legibly printed. If the instructor is qualified to receive EMDRIA Credit for teaching this program, the instructor's name must appear on the attendee list, and the regulated fee must be paid. The no-partial credit rule applies to instructors who are part of a multi-instructor program. Instructors fulfill the same attendance requirements as enrollees to earn EMDRIA Credit.

2. *Summary Report or Copies of Program Evaluations*: If you have 30 or fewer participants, you can submit copies of the evaluations. If you have more than 30 participants, we ask that you submit a summary report. A summary report is a one or two page synopsis of the program evaluation responses. The summary may be a simple statistical summary for scaled program evaluations.

PROGRAM CANCELLATIONS

If a Program is cancelled, you must notify EMDRIA within 45 days of the scheduled end date for the program. The letter or email of notification must include the program title and EMDRIA Program Approval number.

PROVIDER RECORD KEEPING

Provider records containing Program attendance, evaluations and EMDRIA Credit verification must be kept in order as required by EMDRIA Policies. EMDRIA may conduct audits of the administrative portions of programs which includes record keeping, as well as audits of program content and presentation, to assure compliance.

KEY TERMS

PROGRAM MATERIALS

This refers to the content related material that is submitted along with the program application itself. EMDRIA may request additional materials if your documentation is insufficient for the review.

A traditional application consists of the following:

Program Abstract – This is a detailed description of the full content of the program. This should accurately reflect what information will be presented during the program.

Program Objectives – This portion addresses the intent of the program's content. The program objectives consist of what the instructor expects the participants to learn as a result of attending the program.

Program Content – Provide an outline of your program content that clarifies how each of your objectives will be met.

Program Timeline – This is the outline and time schedule for the entire length of the program. It is important to know the time spent on individual blocks of material. The program content should be broken down into either half-hour or hour long segments including any breaks and/or lunch, if taken.

Curriculum Vita for Instructor(s) – A curriculum vita can be any document listing education, training, scope of practice or licensure, experience, and workshops, presentations or papers to support competence in the subject matter that the instructor will be presenting. If a program has more than one instructor, curriculum vitas for all instructors must be included.

Program Advertisements – Promotional materials must include the following information:

1) ADA Statement: "This workshop is held in facilities which are in compliance with the Americans with Disabilities Act. Please contact (insert name & number) if special accommodations are required."

2) If you plan to advertise your program prior to receiving official notification regarding the program's approval for EMDRIA Credits, please be sure to advertise that an "Application for EMDRIA Credits is under review".

3) The required level of EMDR training. **Please do not refer to Part 1 & 2 Training OR Level 1 & 2 Training** because not all EMDRIA Approved training programs use these descriptive terms. If the program is open to Partially Trained EMDR clinicians then please advertise as "Partial Completion of an EMDRIA Approved Basic EMDR Training is required. Those attendees with only partial training are not eligible to receive EMDRIA Credits" If the program is open only to Fully Trained

Clinicians then please advertise as "Full Completion of an EMDRIA Approved Basic EMDR Training is required".

4) Promotional Materials must include the words "(Provider Name) maintains responsibility for this program and its content in accordance with EMDRIA Standards"

Program Handouts – Any handout materials that will be dispersed to program participants are now required for the application review process. Handout materials that are not in their final form (incomplete, under revision, or rough drafts) will be accepted for the review process. If no handouts are available at the time of application, you must provide sufficient documentation of your content to demonstrate how each of your program objectives will be met. EMDRIA may request additional materials if your handouts and/or documentation are insufficient for the review.

ADDITIONAL TERMS

Appeals – When an application has been denied and the submission of additional information and/or explanation has not been sufficient to gain approval, a formal written appeal may be made to the EMDRIA to contest the basis for denial. Appeals must be submitted within 60 days of the date listed on the denial letter. Appeal letters should state the reason for denial and should include specific information, evidence or supporting documentation as to why/how the applicant believes the Program is consistent with EMDRIA Policies.

Program Developer – This person is responsible for ensuring that Program content adheres to EMDRIA Policies.

Program Administrator – This person is responsible for ensuring that the Provider adheres to EMDRIA Policies, as they relate to the administration of the program offered.

Presenter/Instructor – The primary presenter or instructor is responsible for the overall program material and ensuring that its presentation conforms to the stated goals and objectives.

APPEALS PROCESS

EMDRIA will accept appeals for program denials. Appeals must be made in writing and specifically address the grounds for the decision.

PROVIDER APPEALS

Appeals for Provider applications that were denied for not meeting EMDRIA standards must be in writing. Your letter requesting an appeal must contain the following:

1. A full explanation as to how you feel you or your organization does, in fact, meet the stated and regulated standards.
2. Specifically address each section of the application that did not meet the standard.

EMDRIA staff will review the appeal. You be notified about the appeal results within 30 days of receiving your appeal. If you decide not to appeal a Provider denial, you will need to wait at least 6 months before submitting a new Provider application.

PROGRAM APPEALS

Appeals for Program applications that were denied for not meeting EMDRIA policies must be in writing. If you decide not to appeal a Program denial, you will need to wait at least 60 days before submitting a new application for the denied program. Your letter requesting an appeal must contain the following:

A full explanation as to how your program meets the stated and regulated standards.

1. Specifically address each section of the application that did not meet the standard.

The Appeal will be reviewed by the Standards & Training committee appeal review team; you will be notified of the results within 30 days. The appeal review team shall consist of the chair(s) of the Standards & Training committee and two members of the original review team, and two other experienced members of the Standards & Training committee. The other two members shall be appointed by the Executive Director based on: seniority on the Standards & Training; willingness to serve; and not previously involved in the decision.

If you wish to challenge the decision on this appeal, you must submit your request in writing within 30 days of receiving the denial. That letter must contain a full explanation of your reason for the second appeal.

Your second appeal will be reviewed by EMDRIA staff and forwarded with any amplifying information deemed relevant to the Chair of the Board of Directors.

Other considerations:

If the Executive Director of EMDRIA believes that the decision of the initial review team conflicts with Board Policy and could be harmful to EMDRIA, the Executive Director shall meet with the review team and express his/her concerns. If there is no agreement, the Executive Director shall take the issue to the appeals review team of the Standards and Training committee. If there is no agreement, the Executive Director shall present the issue to the Board of Directors of EMDRIA.

For questions regarding the appeal process, the review of appeals or other related issues, please contact EMDRIA at 866-451-5200.

PROVIDER AND PROGRAM RENEWAL

PROVIDER RENEWAL

Provider status is granted approval for a two year period. Approximately 60 days prior to your Provider renewal due date, you will receive a renewal reminder letter and renewal form to confirm the current Provider contact information. Providers who do not complete the renewal process, are granted a 90 day grace period. After the initial 90 day grace period, Providers will automatically be considered “inactive”. The Provider renewal process includes:

1. Completing the Provider Renewal Form
2. Submitting a \$100 renewal fee

If any changes have occurred in Provider status, please be sure to submit these changes to EMDRIA so that current information is on file in our office. Please be aware that EMDRIA reserves the right to request additional information necessary to renew the Provider’s status.

PREVIOUSLY APPROVED PROGRAMS

Once a program is approved for EMDRIA Credits, it is approved for 2 (two) years from the original approval date. As long as there is no change in the program content, Providers should submit the following information in order to be considered for EMDRIA Credit approval:

- 1) Program application
- 2) Non-Refundable \$25 application fee
- 3) Timeline
- 4) Program Advertisement

If Program content is changed in any way that would affect the core material or instruction, Providers must submit a new Program application.

Program renewal status will be based on the Provider’s standing, as well as the standing of the program that is seeking EMDRIA Credits. EMDRIA reserves the right to request any other information necessary to issue EMDRIA Credit approval including the completion of the full Program application, in the event of substantial policy changes.

PROMOTIONAL MATERIALS

Providers may not claim or imply EMDRIA Credit approval for programs unless they have been approved. While promotional materials may state that a Provider has submitted a program application for EMDRIA Credits, the statement cannot imply the outcome of that application process.

Use of Provider status on promotional materials cannot imply blanket approval of programs offered by the Provider. Organizations or individuals may identify themselves as an Approved EMDRIA Provider as long as blanket approval is not implied or easily inferred and the Provider is in active standing.

Promotional materials must include the following information:

1) ADA Statement: "This workshop is held in facilities which are in compliance with the Americans with Disabilities Act. Please contact (insert name & number) if special accommodations are required."

2) If you plan to advertise your program prior to receiving official notification regarding the program's approval for EMDRIA Credits, please be sure to advertise that an "Application for EMDRIA Credits is under review".

3) The required level of EMDR training. **Please do not refer to Part 1 & 2 Training OR Level 1 & 2 Training** because not all EMDRIA Approved training programs use these descriptive terms. If the program is open to Partially Trained EMDR clinicians then please advertise as "Partial Completion of an EMDRIA Approved Basic EMDR Training is required. Those attendees with only partial training are not eligible to receive EMDRIA Credits." If the program is open only to Fully Trained clinicians then please advertise as "Full Completion of an EMDRIA Approved Basic EMDR Training is required".

4) Promotional Materials must include the words "(Provider Name) maintains responsibility for this program and its content in accordance with EMDRIA Standards"

DISTANCE LEARNING OVERVIEW

TELE-COURSE PROGRAMS

EMDRIA will recognize Live (Real Time) Tele-Courses for the EMDRIA Credit program review process. Tele-Course applicants will complete the regular **EMDRIA Credit Program Application** and the 1 page **Tele-Course Form** when submitting applications for EMDRIA Credits.

New Program Applications

EMDRIA Credit Providers who send in a new Tele-Course program application for EMDRIA Credit approval will go through the same review process as those who submit on-site program applications for EMDRIA Credits. The only additional form that will be required for Tele-Courses is the **Tele-Course Form**.

Previously Approved Programs

Previously approved EMDRIA Credit program applications will be subject to review by the Standards & Training Committee. These providers will also be required to submit the **Tele-Course Form**.

DISTANCE LEARNING PROGRAMS

EMDRIA is now reviewing Distance Learning Program applications for EMDRIA Credits. Providers must complete the **Distance Learning Program Application** when submitting distance learning programs for EMDRIA approval. Be sure to refer back to the Program Application Guide pages 6-8 for details on program content requirements.

DISTANCE LEARNING REQUIREMENTS

When submitting distance learning applications, be sure to include the following documents:

Program Abstract – This is a detailed description of the full content of the distance learning program. This should accurately reflect what information will be presented during the program.

Program Objectives – This portion addresses the intent of the program's content. The program objectives consist of what the instructor expects the participants to learn as a result of completing this distance learning program.

Curriculum Vita for Instructor(s) – A curriculum vita can be any document listing education, training, scope of practice or licensure, experience, workshops, and presentations or papers to support competence in the subject matter that the instructor will be presenting. If a program has more than one instructor, curriculum vitas for all instructors must be included.

Program Advertisements – Promotional materials must include the following information:

1) The required level of EMDR training. **Please do not refer to Part 1 & 2 Training OR Level 1 & 2 Training** because not all EMDRIA Approved training programs use these descriptive terms. If the program is open to Partially Trained EMDR clinicians then please advertise as "Partial Completion of an EMDRIA Approved Basic EMDR Training is required. Those attendees with only partial training are not eligible to receive EMDRIA Credits." If the program is open to Fully Trained clinicians then please advertise as "Full Completion of an EMDRIA Approved Basic EMDR Training is required".

2) Equipment that will be needed in order to complete the distance learning program

3) Information on the post-test requirement in order to receive EMDRIA Credits,

Program Materials – Submit all of the materials and instructions that participants will receive upon registering for the distance learning program.

Post-Test & Answer Key – Testing will be required for all individuals who complete distance learning programs. Be sure to include a copy of the Post-Test that will be used to evaluate participant progress. Explain the rationale used to determine the number of Post-Test questions. Be sure to explain the procedure used to determine the number of EMDRIA Credits that will be awarded upon passing the test.

A Post-Test is essential in evaluating the effectiveness of the delivery of the Distance Learning Program and the amount of knowledge gained by attendees. The number of Post-Test questions in most programs should be directly related to the length of the program. For programs using time as the measuring unit of length (e.g., video or audio tape), the Post-Test for a 12-hour video program should consist of a minimum of 60 questions (5 questions per instructional hour). For programs that cannot be measured in units of time (e.g., a journal article or book), the number of Post-Test questions should be dependent on the length of the article or book (i.e. number of pages, chapters) or a similar criteria.

DISTANCE LEARNING OVERVIEW

- continued

In order to measure the level of knowledge gained upon completion of distance learning programs, participants must obtain a specific passing score on the Post-Test in order to receive EMDRIA Credits. A passing score of 75% is suggested. If a different percentage is determined for passing, explain the rationale. The EMDRIA Credit Provider may wish to allow participants who do not obtain the required passing score, to retake the examination.

Participant Evaluation Form – Be sure to include a sample of the participant evaluation form that will be distributed to those who register for the distance learning program. This form should evaluate (at the very minimum) whether the learning objectives were met and the overall effectiveness of the distance learning program.

Distance Learning Method – Describe any equipment needed (such as audio tape player, video player or computer) in order to complete the distance learning program.

Participant Verification System – Explain the verification method and/or ID system that will be used to confirm the attendance and identity of each participant and that the individual completed the program's Post-Test. Examples of verification methods are passwords for Internet programs, notarized letter or signed statement for Self-Paced programs.

DISTANCE LEARNING FOLLOW UP REPORTS

Distance Learning Programs that are approved by EMDRIA will be granted approval for a 1 year period which begins upon the date that the program is approved. Follow Up reports for Distance Learning programs must be submitted 2 times a year. These dates will be outlined in the letter of approval for distance learning programs that are awarded EMDRIA Credits. Distance Learning Follow Up Reports include the following information:

1. *Participant List*: The participant list must include your approved provider name, the distance learning program number, and should accompany the distance learning program follow up report form. A full attendee listing includes name, license number, whether they have completed an EMDRIA Approved Basic Training Program, address and telephone number for each individual who completed the distance learning program.

2. *Distance Learning Program Evaluations*: If you have 30 or fewer participants, you can submit copies of the evaluations. If you have more than 30 participants, we ask that you submit a summary

report. A summary report is a one or two page synopsis of the program evaluation responses. The summary may be a simple statistical summary for scaled program evaluations.

3. *Participant Test Grade*: Each participant who completes a distance learning program and is awarded EMDRIA Credits must complete and pass a test. Be sure to include the participants name, the passing grade that is required and the grade that each individual received.

EMDRIA Definition of Eye Movement Desensitization and Reprocessing (EMDR)

All EMDRIA Credit program applications must demonstrate consistency with EMDRIA's Definition of EMDR.

Global definition

EMDR is a scientifically validated integrative psychotherapy. It is a phase-oriented approach to treatment, including a uniquely combined protocol, within a standardized procedure, grounded in the theoretical foundation of the Adaptive Information Processing model. It is based on the philosophy that human beings are capable under appropriate conditions of naturally moving toward greater health and integration. EMDR is used to resolve disturbing emotional material secondary to traumatic or disturbing events, as well as a means of potentiating positive emotional states, in order to facilitate natural growth and healing processes.

I. Purpose of Definition

The purpose of this definition is to serve as the foundation for the development and implementation of policies in all EMDRIA's programs in the service of its mission. This definition is intended to support consistency in EMDR training, standards, credentialing, continuing education, and clinical application while fostering the further evolution of EMDR through a judicious balance of innovation and research. This definition also provides a clear and common frame of reference for EMDR clinicians, consumers, researchers, the media and the general public.

II. Foundational Sources and Principles for Evolution

Francine Shapiro, Ph.D. developed EMDR based on clinical observation, controlled research, feedback from clinicians whom she had trained and previous scholarly and scientific studies of information processing. The original source of EMDR is derived from the work of Shapiro as it is described in her writings (Shapiro, 2001). Shapiro made clear that she is committed to the development of EMDR in a way that balances clinical observations and proposed innovations with independent empirical validation in well designed and executed scientific studies. Previously held and newly proposed elements of EMDR procedure or theory that cannot be validated must give way to those that can.

III. Aim of EMDR

In the broadest sense, EMDR is intended to alleviate human suffering and assist individuals and human society to fulfill their potential for development while minimizing risks of harm in its application. For the client, the aim of EMDR treatment is to achieve the most profound and comprehensive treatment effects in the shortest period of time, while maintaining client stability within a balanced family and social system.

IV. Framework

EMDR is an approach to psychotherapy that is comprised of principles, procedures and protocols. It is not a simple technique characterized primarily by the use of eye movements. EMDR is founded on the premise that each person has both an innate tendency to move toward health and wholeness, and the inner capacity to achieve it. EMDR is grounded in psychological science and is informed by both psychological theory and research on the brain.

EMDR integrates elements from both psychological theories (e.g. affect, attachment, behavior, bioinformational processing, cognitive, humanistic, family systems, psychodynamic and somatic) and psychotherapies (e.g., body-based, cognitive-behavioral, interpersonal, person-centered, and psychodynamic) into a standardized set of procedures and clinical protocols. Research on how the brain processes information and generates consciousness also informs the evolution of EMDR theory and procedure.

EMDRIA Definition of Eye Movement Desensitization and Reprocessing (EMDR) -continued

V. Hypotheses of the EMDR Model

The Adaptive Information Processing model is the theoretical foundation of the EMDR approach. It is based on the following hypotheses:

1. Within each person is a physiological information processing system through which new experiences and information are normally processed to an adaptive state.
2. Information is stored in memory networks that contain related thoughts, images, audio or olfactory memories, emotions and bodily sensations.
3. Memory networks are organized around the earliest related event.
4. Traumatic experiences and persistent unmet interpersonal needs during crucial periods in development can produce blockages in the capacity of the adaptive information processing system to resolve distressing or traumatic events.
5. When information stored in memory networks related to a distressing or traumatic experience is not fully processed, it gives rise to dysfunctional reactions.
6. The result of adaptive processing is learning, relief of emotional distress, and the availability of adaptive responses and understanding.
7. Information processing is facilitated by specific types of bilateral sensory stimulation. Based on observational and experimental data, Shapiro has referred to this stimulation as bilateral stimulation (Shapiro, 1995) and dual attention stimulation (Shapiro, 2001).
8. Alternating, left-right, visual, audio and tactile stimulation when combined with the other specific procedural steps used in EMDR enhance information processing.
9. Specific, focused strategies for sufficiently stimulating access to dysfunctionally stored information (and in some cases, adaptive information) generally need to be combined with bilateral stimulation in order to produce adaptive information processing.
10. EMDR procedures foster a state of balanced or dual attention between internally accessed information and within external bilateral stimulation. In this state the client experiences simultaneously the distressing memory and the present context.
11. The combination of EMDR procedures and bilateral stimulation results in decreasing the vividness of disturbing memory images and related affect, facilitating access to more adaptive information and forging new associations and between memory networks.

VI. Method

EMDR uses specific psychotherapeutic procedures to 1) access existing information, 2) introduce new information, 3) facilitate information processing and 4) inhibit accessing of information (Lipke, 1999). Unique to EMDR are both the specific procedural steps used to access and process information, and the ways in which sensory stimulation is incorporated into well-defined treatment procedures and protocols, which are intended to create states of balanced or dual attention to facilitate information processing.

EMDR is used within an 8-phase approach to trauma treatment (Shapiro, 1995, 2001) in order to insure sufficient client stabilization and reevaluation before, during and after the processing of distressing and traumatic memories and associated stimuli. In Phases 3 – 6, standardized steps must be followed to achieve fidelity to the method. In the other 4 phases there is more than one way to achieve the objectives of each phase. However, as it is a process, not a technique, it unfolds according to the needs and resources of the individual client in the context of the therapeutic relationship. Therefore, different elements may be emphasized or utilized differently depending on the unique needs of the particular client.

EMDRIA Definition of Eye Movement Desensitization and Reprocessing (EMDR) -continued

VI. Method (continued)

To achieve comprehensive treatment effects a three-pronged basic treatment protocol is used to first address past events. After adaptive resolution of past events, current stimuli still capable of evoking distress are processed. Finally future situations are processed to prepare for possible or likely circumstances.

VII. Fidelity in application through training and observation

It is central to EMDR that positive results from its application derive from the interaction between clinician, method and client. Therefore graduate education in a mental health field (e.g., clinical psychology, psychiatry, social work, counseling, or marriage and family therapy) leading to eligibility for licensure, certification or registration, along with supervised training, are considered essential to achieve optimal results. Meta-analytic research (Maxfield & Hyer, 2002) indicates that degree of fidelity to the published EMDR procedures is highly correlated with the outcome of EMDR procedures. Evidence of fidelity in procedure and appropriateness of protocol is considered central to both research and clinical application of EMDR.

References

Lipke, H. (1999). *EMDR and psychotherapy integration: theoretical and clinical suggestions with focus on traumatic stress*. Boca Raton: CRC Press.

Maxfield, L., & Hyer, L. (2002). The relationship between efficacy and methodology in the treatment of PTSD with EMDR. *Journal of Clinical Psychology*.

Shapiro, F. (1995). *Eye Movement Desensitization and Reprocessing, Basic Principles, Protocols and Procedures*. (1st ed.) New York: The Guilford Press.

Shapiro, F. (2001). *Eye Movement Desensitization and Reprocessing, Basic Principles, Protocols and Procedures*. (2nd ed.) New York: The Guilford Press.

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EMDR International Association
5806 Mesa Drive, Suite 360
Austin, Texas 78731
Tel: (512) 451-5200
Fax: (512) 451-5256

Provider Application For EMDRIA® Credit

Provider Applications are reviewed for overall administrative & organizational set-up. Please allow at least 20 days for the review process.

Applicant is an: Organization Individual Regional Meeting EMDRIA SIG

Name: _____		
Mailing Address: _____ _____		
City: _____	State: _____	Zip: _____
Phone: _____	Fax: _____	Email: _____

Program Developer/Selector*:

Name: _____	Title: _____
Phone: _____	Email: _____
*If Program Developer/Selector is not an EMDRIA Certified Therapist please indicate the EMDRIA Certified Therapist who will review the program prior to submission of program to be sure it meets the EMDRIA standards as stated in the EMDRIA Credit Policies and Procedures Manual	
Name: _____	Title: _____
Phone: _____	Email: _____

Program Administrator:

Name: _____	Title: _____
Phone: _____	Email: _____

Person Responsible for Program Records:

Name: _____		
Records Storage Address: _____ _____		
City: _____	State: _____	Zip: _____
Phone: _____	Fax: _____	Email: _____

Specialty Area/Primary Theoretical Approach to EMDR (if any):

PROGRAM SELECTION AND DEVELOPMENT

A Provider's educational program is based on stated educational goals, and it should clearly contribute to the continuing education of mental health professionals in the area of practice, theory, methodology and research in EMDR.

A. Curriculum Content

1. *How will you assure that program materials contribute to clinical/research knowledge in the use of EMDR and comply with current EMDRIA polices?*

B. Program Development and/or Selection

1. *What are the qualifications of the person responsible for the program development and/or selection? Please enclose a curriculum vita and any other information you think would be helpful.
If Program Developer/Selector is not an EMDRIA Certified Therapist please indicate the EMDRIA Certified Therapist who will review the program prior to submission to be sure it meets the EMDRIA standards as appear in the EC Policies and Procedures Manual.*
2. *If you are not EMDRIA Certified, describe your review process for program selection, content, and application that includes an EMDRIA Certified therapist and is independent from the presenter of a specific program..*

C. Goals and Objectives

1. *Overall - what are the goals and objectives of the programs you intend to hold?*
2. *How do you plan to maintain balance and objectivity with programs so that presentations do not predominantly reflect the commercial view of the presenter, the provider organization, and/or anyone providing financial assistance to the organization or presenter?*

D. Program Instructors/Presenters

1. *What criteria do you plan to use when selecting programs and presenters?*
2. *How do you encourage the use of innovative and interesting teaching methods?*

ADMINISTRATION

A Provider's capacity includes sufficient resources for program monitoring and record keeping, and clearly delineated assignment of responsibility for complying with EMDRIA™ Training and Standards policies.

A. General Organization

1. How will your programs be organized and administered?

2. How will your programs be funded? Tuition Fees Other (please explain)

B. General Monitoring

1. How will you monitor and evaluate each instructors' experience, knowledge level, and teaching ability?

2. Please enclose examples of program evaluations you will use for your programs. At a minimum, these evaluations should cover instructor's knowledge and teaching ability, and whether the program was both consistent with and met its stated objectives.

3. How will evaluation & feedback be incorporated into your curriculum development process? (if applicable)

C. Record Keeping

1. How will you comply with EMDRIA's record keeping requirements?

hard copy disk micro-fiche other (please explain below)

2. Will the full three years of records be stored on-site or off? If off-site, where?

D. Ethical Complaints

1. *How do you plan to investigate and handle complaints of an ethical or quality control nature in the event they should arise?*

E. Equal Opportunity

1. *How do you plan to create a supportive environment regardless of an individual's sexual orientation, gender, race/culture or religious background?*

2. *How will your programs address the issues of cultural diversity?*

F. Equal Access

1. *How will you determine that the facilities you use are accessible according to the Americans with Disabilities Act?*

2. *Your promotional materials must include a statement on how to request reasonable accommodations for those with disabilities (ADA – Americans with Disabilities statement). How do you plan to provide reasonable accommodations?*

AUTHORIZATION

I certify, on behalf of _____, that the preceding statements are true, and I understand that any false statements may result in denial or revocation of approval. Our organization agrees to comply with all EMDRIA Training and Standards policies. In addition, our organization agrees to maintain the highest ethical standards as stated in the various mental health practitioners' Code of Ethics and Code of Conduct. Finally, our organization agrees to fulfill the spirit of all standards relating to equal opportunity and equal access.

Program Developer Signature (type in name if electronically submitted) Date

And/or

Program Administrator Signature (type in name if electronically submitted) Date

PAYMENT

The Provider Application Fee in the amount of \$100.00, made payable to the EMDR International Association, must accompany the application, including all attachments.

Regional Meetings and EMDRIA Special Interest Groups (SIG) are exempt from the \$100 fee

- Check Here if Regional Meeting or EMDRIA SIG
- Check enclosed Visa MasterCard

Credit Card Number: _____ Exp. Date: _____

Name as it appears on card: _____

Signature: _____

NOTE: Completion of this form does not constitute EMDRIA approved provider status. If granted, your status as an approved provider will become effective on the date set forth in the notification of approval letter.

CHECKLIST

Be sure to submit all of the following:

- Completed Application
- Application Fee
- CV of Program Developer/Selector
- Sample of Program Evaluation



EMDR International Association
 5806 Mesa Drive, Suite 360
 Austin, Texas 78731
 Tel: (512) 451-5200
 Fax: (512) 451-5256

**Program Application
 For EMDRIA® Credit**

Program Applications are reviewed by the Standards & Training Committee. Please allow at least 45 days for the initial review process. If revisions are required, please allow for 15 additional days after receipt of revisions.

EMDRIA Approved Credit Provider Information

Provider Name: _____	
Provider #: _____	Phone: _____
Contact person (for questions concerning program content): _____	
Contact's Phone: _____	Contact's Email: _____

Program Information:

Program Title: _____	
Program Fee: _____	Discount available? _____
Program Description (limit to 50 words): _____	

Program Date(s): _____	Program Time(s): _____
No. of Credit Hours Requested for Total Instruction Time: _____	
<small>(see pg 8 of the Manual to see how to calculate credit hours)</small>	
Program Site Address: _____	Phone: _____

City: _____	State: _____ Zip: _____

<p>EMDR Training & Program Level: <i>(Should be clearly stated in your Promotional Materials/Brochure and Registration process)</i></p> <p>No EMDR Training Required [See Note 1]</p> <p><input type="checkbox"/> Partial EMDR Training Required [See Note 2]</p> <p><input type="checkbox"/> Full Basic Training Required [See Note 3]</p>

<p>Target Audience:</p> <p><input type="checkbox"/> Non-EMDR Trained</p> <p><input type="checkbox"/> Licensed Clinicians <input type="checkbox"/> Partially EMDR Trained</p> <p><input type="checkbox"/> General Public <input type="checkbox"/> Fully EMDR Trained</p> <p><input type="checkbox"/> Other _____</p>
--

****Has this program been approved for EMDRIA Credits within the previous 2 years? YES NO**
If you checked "Yes" please provide the Date of the Program and the EMDRIA Credit Approval Number
DATE: _____ **EMDRIA Credit Program Approval Number:** _____ - _____

- Program application
- Non-Refundable \$25 application fee
- Timeline
- Program Advertisement

EMDRIA®

Primary Instructor Information

Name: _____		Phone: _____	
Address: _____		Email: _____	
City: _____	State: _____	Zip: _____	

Person Responsible for Program Registration

Name: _____		Phone: _____	
Address: _____		Email: _____	
City: _____	State: _____	Zip: _____	

FIDELITY TO EMDRIA DEFINITION OF EMDR

Program Fidelity (Please check one and include required documentation if applicable)

- The content of this program is consistent with the EMDRIA Definition of EMDR, and fidelity to phases 3-6 is maintained.
- The content of this program deviates from the EMDRIA Definition of EMDR. *Empirical research supporting the effectiveness of this method is included with this application.* I understand this research will first be reviewed by the EMDRIA Research Committee prior to program review by the Standards and Training Committee.

EMDRIA Providers who are not EMDRIA Certified clinicians, please provide the name of the EMDRIA Certified clinician who reviewed this program for fidelity: **NAME:** _____

PROGRAM MATERIAL

Program material will be pertinent, accurate, and will be consistent with the Policies and Procedures for EMDRIA Credit Programs. [See Notes 4, 5, 6, 7, and 8]

CHECKLIST OF REQUIRED DOCUMENTS – All NEW program applications must submit the following

- Completed Program Application with fee**
- Program Abstract
- Program Objectives
- Program Content [See Note 6]
- Program Timeline**
(Outline of content in half-hour or hour long segments including 15 minute breaks & lunch, if taken)
- Curriculum vitas for all instructors
- Evaluation Form [See Note 10]
- Copy of all promotional program materials [See Notes 7 & 8]**
- Handouts [See Note 9]

**These are the required items for Previously Approved Programs

APPLICATION FEE

Enclose a non-refundable \$25.00 Program Application Fee. (Conference/Training Events fee is \$10.00 plus \$15.00 per program, not to exceed \$100.00) Make checks payable to the EMDR International Association. The fee must accompany this application in order to begin the program application review process.

Regional Meeting and EMDRIA SIG program applications are exempt from the \$25 fee

- Check Here if Regional Meeting or EMDRIA SIG Check here if Conference/Training Event
 Check enclosed Visa MasterCard

Credit Card Number: _____ Exp. Date: _____

Name as it appears on card: _____

Signature: _____

Note: Completion of this form does **not** constitute EMDRIA-approved program status. If granted, program approval will become **effective on the date set forth in the Notification of Approval letter.**

AUTHORIZATION

I certify that the preceding statements and the enclosed documents are true, and I understand that any false statements may result in revocation of program and/or provider approval. I understand that I am responsible for maintaining all standards outlined in the Provider Application and that this program may be subject to an administrative audit.

EMDRIA Credit Provider

(type in name if electronically submitted)

Date

REFERENCE NOTES

[Note 1] NO EMDR TRAINING REQUIRED

These programs are appropriate for and open to all clinicians, including those with no prior EMDR Training. The content of such programs should enhance the EMDR related skills of clinicians and should not attempt to teach EMDR specific procedures to clinicians with no prior EMDR training.

[Note 2] PARTIAL EMDR TRAINING REQUIRED

These programs are appropriate for clinicians who are at least partially trained in EMDR. The content of such programs should enhance the skills of clinicians in the basic eight phase protocol.

[Note 3] FULL EMDR TRAINING REQUIRED

These programs are only appropriate for clinicians who are fully trained in EMDR. The content of such programs should enhance the EMDR related skills of clinicians. Examples include: using EMDR with special client populations; increasing skill in the use of cognitive interweaves or resource development; or modifications to the standard EMDR protocol phases 1, 2, 7 or 8.

[Note 4] EMDRIA DEFINITION OF EMDR

All programs submitted for EMDRIA Credit approval must demonstrate consistency with EMDRIA's Definition of EMDR. Please refer to the "EMDRIA Credits Policy & Procedure Manual Addendum" for additional details and for EMDRIA's Definition of EMDR. In Phases 3 – 6, standardized steps must be followed to achieve fidelity to the method. In the other 4 phases there is more than one way to achieve the objectives of each phase. If your material is a deviation from the EMDRIA Definition of EMDR, submit empirical research supporting its effectiveness.

[Note 5] COMBINING EMDR WITH OTHER MODALITIES - see page 7 of EC Manual

Programs which combine EMDR with another modality must clearly indicate how this combination will occur and where in the 8-phase approach of EMDR the other modality will fit. To illustrate how it works, you must submit a minimum of one case example.

[Note 6] PROGRAM CONTENT

Provide an outline of your program content that clarifies how each of your objectives will be met.

[Note 7] EMDR TRAINING & EMDRIA CREDITS

Completion of an EMDRIA Approved Basic EMDR Training is considered the fundamental knowledge base required in order to understand and apply the EMDR protocol. Although the contents of some EMDRIA Approved programs may be appropriate for clinicians with no prior EMDR training or for partially trained EMDR clinicians, only those who have completed the full Basic EMDR Training can receive EMDRIA Credits (continuing education units in EMDR) by attending a program that has been approved for EMDRIA Credits.

If offering a program that is open to clinicians with no prior EMDR training or to those who are only partially trained in EMDR, be sure that all promotional materials and advertisements list the (minimum) level of EMDR training that is required for program attendees. Be sure that Non EMDR Trained and Partially EMDR Trained program attendees understand that they are not eligible to receive EMDRIA Credits upon completion of the program.

If offering a program that is only open to clinicians who are fully trained in EMDR, be sure that all promotional materials and advertisements state that proof of completion of an EMDRIA Approved Basic EMDR Training (in its entirety) is required for attendees to register. Only participants with full EMDRIA Approved Basic Training will receive an EMDRIA Credits certificate of completion for the program.

[Note 8] PROMOTIONAL REQUIREMENTS

Promotional materials must include the following information:

- 1) Include the ADA Statement: "This workshop is held in facilities which are in compliance with the Americans with Disabilities Act. Please contact _____ if special accommodations are required."
- 2) If you plan to advertise your program prior to receiving official notification regarding the program's approval for a certain number of EMDRIA Credits, please be sure to advertise that "Application for EMDRIA Credits is under review".
- 3) List the required level of EMDR training. **Please do not refer to Part 1 or 2 or Level 1 or 2 Training** because not all EMDRIA Approved training programs use these descriptive terms. If the program is open to Partially Trained EMDR clinicians then please advertise as "Partial Completion of an EMDRIA Approved Basic EMDR Training is required. Those attendees with only partial training are not eligible to receive EMDRIA Credits." If the program is open only to Fully Trained clinicians then please advertise as "Full Completion of an EMDRIA Approved Basic EMDR Training is required".
- 4) Promotional Materials must include the words "(Provider Name) maintains responsibility for this program and its content in accordance with EMDRIA Standards"

[Note 9] Program handouts – see page 6 of EC Manual

Any handout materials that will be dispersed to program participants are now required for the application review process. Handout materials that are not in their final form (incomplete, under revision, or rough drafts) will be accepted for the review process. If no handouts are available at the time of application, you must provide sufficient documentation of your content to demonstrate how each of your program objectives will be met. EMDRIA may request further materials if your handouts and/or documentation are insufficient for our review.

[Note 10] Program Evaluations – see page 9 of EC Manual

This is a subjective evaluation regarding the presentation of the program and must include questions concerning the instructor's knowledge of the material and whether the stated program goals were actually presented. If you are planning to use the EMDRIA supplied sample program evaluation, please enclose a copy with the application.



EMDR International Association
5806 Mesa Drive, Suite 360
Austin, Texas 78731
Tel: (866) 451-5200
Fax: (512) 451-5256
Website: www.emdria.org
Email: info@emdria.org

Program Follow-up Report

Below is a list of record keeping and administrative requirements that are the responsibility of the Provider upon completion of an EMDRIA® Credit approved program.

1. Within 45 days of the program ending, the Provider must submit to EMDRIA® the following: A list of attendee names, license, and whether they have completed an EMDRIA Approved Basic Training Program (required for them to be granted credits)
 - A list of attendee names, license, and whether they have completed an EMDRIA Approved Basic Training Program (required for them to be granted credits)
 - Attendee sign in/out sheets (be sure to include attendee's name & signature both in/out of program)
 - A summary report or copies of the program evaluations (If you have 30 or fewer participants, you can submit copies of the evaluations. If you have more than 30 participants, please submit a summary report.)
2. Within 45 days of the program ending, the Provider must furnish the program attendees with a certificate of attendance that meets the regulated requirements.
3. Attendance records for this program, including attendance sheets and completed program evaluations, must be maintained for three years.

Please use this form when submitting your Follow-up Report. Be sure to fill in the appropriate information as requested below and attach the following:

- A list of attendee names, license, and whether they have completed an EMDRIA Approved Basic EMDR Training Program (required for them to be granted credits)*
- Attendee sign in/out sheets*
- Program evaluations (or evaluation summary)*

Program Title

Presenter(s)

Program date(s)

Program Approval Number

As an EMDRIA Credit Provider, I understand that failure to comply with these record keeping requirements will result in a delay of approving future programs.

Provider Signature

Date



EMDR International Association
5806 Mesa Drive, Suite 360

Austin, Texas 78731
Tel: (512) 451-5200
Fax: (512) 451-5256

**Distance Learning
 Program Application
 For EMDRIA® Credit**

Program Applications are reviewed by the Standards & Training Committee. Please allow at least 45 days for the initial review process. If revisions are required, please allow for 15 additional days after receipt of revisions.

EMDRIA Approved Credit Provider Info:

Provider Name: _____	
Provider #: _____	Phone: _____
Contact person (for questions concerning program content): _____	
Contact's Phone: _____	Contact's Email: _____

Distance Learning Program Information:

Program Title: _____ _____	
Program Fee: _____	Discount available? _____
Program Description (limit to 50 words): _____ _____ _____ _____ _____	
Number of EMDRIA Credits requested for this DL Program: _____	

<p>EMDR Training & Program Level: <i>(Should be clearly stated in your Promotional Materials/Brochure and registration process)</i></p> <p><input type="checkbox"/> No EMDR Training Required [See Note 1]</p> <p><input type="checkbox"/> Partial EMDR Training Required [See Note 2]</p> <p><input type="checkbox"/> Full Basic Training Required [See Note 3]</p>	<p>Target Audience:</p> <p><input type="checkbox"/> Non-EMDR Trained</p> <p><input type="checkbox"/> Licensed Clinicians <input type="checkbox"/> Partially EMDR Trained</p> <p><input type="checkbox"/> General Public <input type="checkbox"/> Fully EMDR Trained</p> <p><input type="checkbox"/> Other _____</p>
---	--

Distance Learning Instructor Information:

Name: _____	Phone: _____
Address: _____	Fax: _____
City: _____	State: _____ Zip: _____

FIDELITY TO EMDRIA DEFINITION OF EMDR

Program Fidelity (Please check one and include required documentation if applicable)

- The content of this program is consistent with the EMDRIA Definition of EMDR, and fidelity to phases 3-6 is maintained.
- The content of this program deviates from the EMDRIA Definition of EMDR. *Empirical research supporting the effectiveness of this method is included with this application.* I understand this research will first be reviewed by the EMDRIA Research Committee prior to program review by the Standards and Training Committee.

EMDRIA Providers who are not EMDRIA Certified clinicians, please provide the name of the EMDRIA Certified clinician who reviewed this program for fidelity: **NAME:** _____

PROGRAM MATERIAL

Program material will be pertinent, accurate, and will be consistent with the Policies and Procedures for EMDRIA Credit Programs. [See Notes 4, 5 & 6]

CHECKLIST OF REQUIRED DOCUMENTS

- Completed Distance Learning Program Application with fee
- Program Abstract
- Program Objectives
- Curriculum vitas for **all** instructors
- Post-Test and Answer Key
- Program Evaluation for participants
- Copy of all promotional program materials [See Notes 6 & 7]
- Copy of the materials that participants will receive upon registering for the program

APPLICATION FEE

Enclose a non-refundable \$25.00 Program Application Fee. Make checks payable to the EMDR International Association. The fee must accompany this application in order to begin the program application review process.

- Check enclosed Visa Master Card

Credit Card Number: _____ Exp. Date: _____

Name as it appears on card: _____

Signature: _____

Note: Completion of this form does **not** constitute EMDRIA-approved program status. If granted, program approval will become **effective on the date set forth in the Notification of Approval letter.**

EMDRIA®

AUTHORIZATION

I certify that the preceding statements and the enclosed documents are true, and I understand that any false statements may result in revocation of program and/or provider approval. I understand that I am responsible for maintaining all standards outlined in the Provider Application and that this program may be subject to an administrative audit. I understand that, if approved to offer EMDRIA Credits, this DL Program will be granted approval for a 1-year period.

EMDRIA Credit Provider (type in name if electronically submitted) _____ Date _____

Please be sure to respond to the questions listed below as thoroughly as possible.

1. What Distance Learning method will be used? (Please check all that apply)
 - Audio Cassette
 - Video Cassette
 - CD-Rom/Video Disc
 - On-Line Internet
 - Publication (Book/Journal Article)
 - Other (Specify) _____

2. Attach a copy of the program materials (i.e. syllabus, video) that participants will receive once they register for this Distance Learning Program. If the program is based on a widely available publication, you will not need to submit a copy.

3. Describe any equipment needed (such as audio tape player, video player or computer) for Distance Learning program. Provide a sample of the promotional materials used to inform potential participants of equipment needs.

4. Attach a copy of the Post-Test that will be used to evaluate participant progress. Explain the rationale used to determine the number of Post-Test questions. **[See Note 8]**

5. What is the passing score that participants must attain in order to receive EMDRIA Credits? If applicable, explain the rationale. **[See Note 9]**

6. Explain the procedure used to determine the number of EMDRIA Credits that will be awarded upon passing the Post-Test. **[See Note 10]**

7. Explain the verification method and/or ID system that will be used to confirm the attendance and identity of each participant and that the individual completed the program's Post-Test. **[See Note 11]**

REFERENCE NOTES

[Note 1] NO EMDR TRAINING REQUIRED

These programs are appropriate for and open to all clinicians, including those with no prior EMDR Training. The content of such programs should enhance the EMDR related skills of clinicians and should not attempt to teach EMDR specific procedures to clinicians with no prior EMDR training.

[Note 2] PARTIAL EMDR TRAINING REQUIRED

These programs are appropriate for clinicians who are at least partially trained in EMDR. The content of such programs should enhance the skills of clinicians in the basic eight phase protocol.

[Note 3] FULL EMDR TRAINING REQUIRED

These programs are only appropriate for clinicians who are fully trained in EMDR. The content of such programs should enhance the EMDR related skills of clinicians. Examples include: using EMDR with special client populations; increasing skill in the use of cognitive interweaves or resource development; or modifications to the standard EMDR protocol phases 1, 2, 7 or 8.

[Note 4] EMDRIA DEFINITION OF EMDR

All programs submitted for EMDRIA Credit approval must demonstrate consistency with EMDRIA's Definition of EMDR. Please refer to the "EMDRIA Credits Policy & Procedure Manual Addendum" for additional details and for EMDRIA's Definition of EMDR. In Phases 3–6, standardized steps must be followed to achieve fidelity to the method. In the other 4 phases there is more than one way to achieve the objectives of each phase. If your material is a deviation from the EMDRIA Definition of EMDR, submit empirical research supporting its effectiveness.

[Note 5] COMBINING EMDR WITH OTHER MODALITIES - see page 7 of EC Manual

Programs which combine EMDR with another modality must clearly indicate how this combination will occur and where in the 8-phase approach of EMDR the other modality will fit. To illustrate how it works, you must submit a minimum of one case example.

[Note 6] EMDR TRAINING & EMDRIA CREDITS

Completion of an EMDRIA Approved Basic EMDR Training is considered the fundamental knowledge base required in order to understand and apply the EMDR protocol. Although the contents of some EMDRIA Approved programs may be appropriate for clinicians with no prior EMDR training or for partially trained EMDR clinicians, only those who have completed the full Basic EMDR Training can receive EMDRIA Credits (continuing education units in EMDR) by completing a program that has been approved for EMDRIA Credits.

If offering a program that is open to clinicians with no prior EMDR training or to those who are only partially trained in EMDR, be sure that all promotional materials and advertisements list the (minimum) level of EMDR training that is required for program participants. Be sure that Non EMDR Trained and Partially EMDR Trained participants understand that they are not eligible to receive EMDRIA Credits upon completion of the program.

If offering a program that is only open to clinicians who are fully trained in EMDR, be sure that all promotional materials and advertisements state that proof of completion of an EMDRIA Approved Basic EMDR Training (in its entirety) is required. Only participants with full EMDRIA Approved Basic Training can receive an EMDRIA Credits certificate of completion for the program.

[Note 7] PROMOTIONAL REQUIREMENTS

- 1) Special equipment needs and testing requirements should be communicated to potential participants.
- 2) List the required level of EMDR training. **Please do not refer to Part 1 or 2 or Level 1 or 2 Training** because not all EMDRIA Approved training programs use these descriptive terms. If the program is open to Partially Trained EMDR clinicians then please advertise as "Partial Completion of an EMDRIA Approved Basic EMDR Training is required. Those attendees with only partial training are not eligible to receive EMDRIA Credits." If the program is open to Fully Trained clinicians then please advertise as "Full Completion of an EMDRIA Approved Basic EMDR Training is required".
- 3) Promotional Materials must include the words "(Provider Name) maintains responsibility for this program and its content in accordance with EMDRIA Standards"

[Note 8] A Post-Test is essential in evaluating the effectiveness of the delivery of the Distance Learning Program and the amount of knowledge gained by attendees. The number of Post-Test questions in most programs should be directly related to the length of the program. For programs using time as the measuring unit of length (e.g., video or audio tape), the Post-Test for a 12-hour video program should consist of a minimum of 60 questions (5 questions per instructional hour). For programs that cannot be measured in units of time (e.g., a journal article or book), the number of Post-Test questions should be dependent on the length of the article or book (i.e. number of pages, chapters) or a similar criteria.

[Note 9] In order to measure the level of knowledge gained upon completion of distance learning programs, participants must obtain a specific passing score on the Post-Test in order to receive EMDRIA Credits. A passing score of 75% is suggested. If a different percentage is determined for passing, explain the rationale. The EMDRIA Credit Provider may wish to allow participants who do not obtain the required passing score, to retake the examination. If re-testing is permitted, please explain the process.

[Note 10] Generally, EMDRIA Credits are granted for each instructional hour in 30 minute time segments. No EMDRIA Credits will be awarded for breaks of more than 15 minutes. The number of EMDRIA Credits should be directly related to the length of the program. EMDRIA Credits may also be awarded for the time it takes participants to complete the Post-Test. If Credits are allocated for the Post-Test, please include the approximate timeframe and explain the rationale for the number of EMDRIA Credits allotted for Post-Test completion.

[Note 11] Examples of verification methods are passwords for Internet programs, notarized letter or signed statement for Self-Paced programs.



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Fax: (512) 451-5256

Tele-Course Form For EMDRIA® Credit

This form is required when submitting a program application for a telephone conference course or video web-streaming course. These programs are conducted in real-time formats.

1. *Through what means will your Tele-Course program be conducted (examples include: internet web streaming and telephone conference calls)?*
2. *Describe any special equipment that your program attendees will need in order to access your Tele-Course (examples include: land based telephone line and internet access)*
3. *Explain the identification system that will be used for accessing and completing the Tele-Course and explain the system used to assure the security of sensitive materials.*
4. *You may opt to test your Tele-Course participants. If applicable, please attach a copy of the post-text that will be used. Be sure to include the required passing score for your Tele-Course. (Post-Testing is **not** required by EMDRIA.)*
5. *How will you verify that the person being awarded the certificate of completion is the actual person who took the post-test (if applicable)?*



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Change of Information

Use this form to notify EMDRIA® as to any changes in the information given on the Provider Application. **Please note that we will not be able to process the change in information unless the first section on Provider Information is completed.**

PROVIDER INFORMATION:

Provider Name: _____
Provider Number: _____

Contact Information:

New Phone #: _____	New Fax #: _____	New Email: _____
New Address: _____	New Record Storage Site Address: _____	
_____	_____	
City: _____	City: _____	
State: _____	Zip: _____	State: _____ Zip: _____

Provider Staff Information:

New Program Developer: _____
New Program Administrator: _____
New Program Record Keeper: _____

NOTE: A change to the provider name and/or status may require a new Provider Application for EMDRIA® Credit. To change the Program Developer/Selector, a curriculum vita for the new developer/selector should accompany this form. Please review the Policy & Procedure Manual before submitting changes in information.



YES!

I would like to be added to the EMDR International Association mailing list.

May EMDRIA make your information available to EMDR education and training providers? Yes No

Last Name _____ First Name _____ Credentials _____

Mailing Address _____

City _____ State _____ Zip _____ Country _____

Phone _____ Fax _____ Email _____

May EMDRIA make your information available to EMDR education and training providers? Yes No

Last Name _____ First Name _____ Credentials _____

Mailing Address _____

City _____ State _____ Zip _____ Country _____

Phone _____ Fax _____ Email _____

May EMDRIA make your information available to EMDR education and training providers? Yes No

Last Name _____ First Name _____ Credentials _____

Mailing Address _____

City _____ State _____ Zip _____ Country _____

Phone _____ Fax _____ Email _____

May EMDRIA make your information available to EMDR education and training providers? Yes No

Last Name _____ First Name _____ Credentials _____

Mailing Address _____

City _____ State _____ Zip _____ Country _____

Phone _____ Fax _____ Email _____

May EMDRIA make your information available to EMDR education and training providers? Yes No

Last Name _____ First Name _____ Credentials _____

Mailing Address _____

City _____ State _____ Zip _____ Country _____

Phone _____ Fax _____ Email _____

May EMDRIA make your information available to EMDR education and training providers? Yes No

Last Name _____ First Name _____ Credentials _____

Mailing Address _____

City _____ State _____ Zip _____ Country _____

Phone _____ Fax _____ Email _____



EMDR INTERNATIONAL ASSOCIATION

Request for Email List

From this request, you will receive email addresses from our mailing list. These addresses will be provided in an Excel file.

There is a fee of \$25 for the first 500 addresses and \$10 for each additional grouping of (up to) 500 addresses. An Invoice will be mailed (or emailed) to you with your request. Payment will be due upon receipt of the Invoice. If you have questions, please feel free to call or email our office.

Please send me email addresses for the following State(s): _____

We can furnish addresses by city, state, area code or 5-digit zip code. Please use an extra sheet of paper if you have more cities than the blanks allow for, and attach it to this form when you submit the request.

If you do not wish to have a listing for the entire state, please specify below which City(s), Area Code or 5-digit Zip Codes you would like listings for:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Mail or Email the List & Invoice to:

 (Name)

 (Address)

 (City, State & Zip)

OR

 (Name)

 (Email Address)

I understand that this email list is for ONE-TIME use only. I agree to use this list for the following EMDRIA Credit approved Program ONLY.

 EMDRIA Credit Approved Program Number

 Signature of EMDRIA Credit Provider

 Date

 Print Name Here

5806 Mesa Dr., Suite 360, Austin, TX 78731-3785
 Toll Free: (866) 451-5200 (U.S. Only) ❖ Tel: (512) 451-5200 ❖ Fax: (512) 451-5256
 Email: info@emdria.org ❖ Website: www.emdria.org



EMDR INTERNATIONAL ASSOCIATION

Request for Mailing List

From this request, you will receive an MS Word document with the names and addresses from our mailing list. These pages will be formatted so that you can easily run copies onto your own blank labels (Avery 5160 labels). If you have questions, please feel free to call our office.

Fees for mailing list are \$.05/name, with a \$10 minimum on all requests. An Invoice will be mailed/emailed to you with your list. Payment will be due upon receipt of the Invoice.

Please send me mailing addresses for the following State(s): _____

We can furnish addresses by city, state, area code or 5-digit zip code. Please use an extra sheet of paper if you have more cities than the blanks allow for, and attach it to this form when you submit the request.

If you do not wish to have a listing for the entire state, please specify below which City(s), Area Code or 5-digit Zip Codes you would like listings for:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Mail or Email the Mailing Label document & Invoice to:

(Name)

(Address)

(City, State & Zip)

OR

(Name)

(Email Address)

I understand that this mailing list is for ONE-TIME use only. I agree to use this list for the following EMDRIA Credit approved Program ONLY.

EMDRIA Credit Approved Program Number

Signature of EMDRIA Credit Provider

Date

Print Name Here

5806 Mesa Dr., Suite 360, Austin, TX 78731-3785
Toll Free: (866) 451-5200 (U.S. Only) ❖ Tel: (512) 451-5200 ❖ Fax: (512) 451-5256
Email: info@emdria.org ❖ Website: www.emdria.org

SAMPLE

Attendance Sheet

Provider Name: _____

Program Title: _____

Date of Completion: _____ **Time:** _____ **Number of EMDRIA® Credits:** _____

Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted
Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted
Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted
Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted
Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted
Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted
Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted
Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted
Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted
Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted
Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted
Print Name	License #	Sign-In	Sign-Out	<input type="checkbox"/> Eval. Received <input type="checkbox"/> Credit Granted

SAMPLE
<Insert Provider Name>

This is to certify that

Participant Name

License #

has attended, in its entirety, the following program

Presented by: _____

Date of Completion: _____ EMDRIA® Credit Hours: _____

EMDRIA Credit provider # _____, is approved by the EMDR International Association to offer EMDRIA® Credit for this program, approval # _____. The provider maintains responsibility for the program.

Your name here as EMDRIA Credit Provider & Administrator

SAMPLE

Program Evaluation Form

Program Title: _____

Please take a moment to rate the following items using the scale provided.

SCALE: 1=Strongly Disagree 2=Disagree 3=Neutral 4=Agree 5=Strongly Agree

1. INSTRUCTOR: _____

- a. Well Prepared/Organized _____
- b. Concepts Clearly Explained _____
- c. Responsive to Questions _____
- d. Skillful in Presenting _____
- e. Considerate & Professional _____

2. CONTENT/FORMAT/LEARNING:

- a. Program description was accurate _____
- b. New skills or knowledge acquired _____
- c. Content seemed current _____
- d. Material/Concept well organized _____
- e. Teaching level appropriate to audience _____
- f. Slides/Video/Audio clear and helpful _____
- g. Handouts current and useful _____
- h. The following program objectives have been achieved 1)_____ 2)_____ 3)_____ 4)_____

3. OVERALL RATING:

- a. Program met or exceeded expectations _____
- b. Facility/Room was comfortable _____
- c. Program was well administered _____
- 5)_____ 6)_____ 7)_____ 8)_____

COMMENTS/SUGGESTIONS: _____



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Provider Renewal Form
EMDRIA® Credits

Provider is: Organization Individual

Provider Number: _____

Renewal Applicant:

Name: _____		
Mailing Address: _____ _____		
City: _____	State: _____	Zip: _____
Phone: _____	Fax: _____	Email: _____

Program Developer/Selector*:

Name: _____	Title: _____
Phone: _____	Email: _____
*If Program Developer/Selector is not an EMDRIA Certified Therapist please indicate the EMDRIA Certified Therapist who will review the program prior to submission of program to be sure it meets the EMDRIA standards as stated in the EMDRIA Credit Policies and Procedures Manual	
Name: _____	Title: _____
Phone: _____	Email: _____

Program Administrator:

Name: _____	Title: _____
Phone: _____	Email: _____

Person Responsible for Program Records:

Name: _____		
Records Storage Address: _____ _____		
City: _____	State: _____	Zip: _____
Phone: _____	Fax: _____	Email: _____

Specialty Area/Primary Theoretical Approach to EMDR (if any):

PROGRAM SELECTION AND DEVELOPMENT

A Provider's educational program is based on stated educational goals, and it should clearly contribute to the continuing education of mental health professionals in the area of practice, theory, methodology and research in EMDR.

E. Curriculum Content

1. *How will you assure that program materials contribute to clinical/research knowledge in the use of EMDR and comply with current EMDRIA polices?*

F. Program Development and/or Selection

1. *What are the qualifications of the person responsible for the program development and/or selection? Please enclose a curriculum vita and any other information you think would be helpful. If Program Developer/Selector is not an EMDRIA Certified Therapist please indicate the EMDRIA Certified Therapist who will review the program prior to submission to be sure it meets the EMDRIA standards as appear in the EC Policies and Procedures Manual.*
2. *If you are not EMDRIA Certified, describe your review process for program selection, content, and application that includes an EMDRIA Certified therapist and is independent from the presenter of a specific program..*

G. Goals and Objectives

1. *Overall - what are the goals and objectives of the programs you intend to hold?*
2. *How do you plan to maintain balance and objectivity with programs so that presentations do not predominantly reflect the commercial view of the presenter, the provider organization, and/or anyone providing financial assistance to the organization or presenter?*

H. Program Instructors/Presenters

1. *What criteria do you plan to use when selecting programs and presenters?*
2. *How do you encourage the use of innovative and interesting teaching methods?*

AUTHORIZATION

I certify, on behalf of _____, that the preceding statements are true. Our organization agrees to comply with EMDRIA policies. In addition, our organization agrees to maintain the highest ethical standards as stated in the various mental health practitioners' Code of Ethics and Code of Conduct.

Provider Signature

Date

PAYMENT

The Provider Renewal Application Fee in the amount of \$100.00, made payable to the EMDR International Association, must accompany this application.

Check enclosed Visa Mastercard

Credit Card Number: _____ Exp. Date: _____

Name as it appears on card: _____

Signature: _____

NOTE: Completion of this form does not constitute continued EMDRIA® approved provider status. If granted, your continued status as an approved provider will become effective on the date set forth in the notification of approval letter.



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 Fax: (512) 451-5256

Regional Meeting/SIG
 Provider Renewal
EMDRIA® Credits

Provider Number: _____

Renewal Applicant is an: Regional Meeting

EMDRIA SIG

Name: _____		
Mailing Address: _____		

City: _____	State: _____	Zip: _____
Phone: _____	Fax: _____	Email: _____

Program Developer/Selector*:

Name: _____	Title: _____
Phone: _____	Email: _____
*If Program Developer/Selector is not an EMDRIA Certified Therapist please indicate the EMDRIA Certified Therapist who will review the program prior to submission of program to be sure it meets the EMDRIA standards as stated in the EMDRIA Credit Policies and Procedures Manual	
Name: _____	Title: _____
Phone: _____	Email: _____

Program Administrator:

Name: _____	Title: _____
Phone: _____	Email: _____

Person Responsible for Program Records:

Name: _____		
Records Storage Address: _____		

City: _____	State: _____	Zip: _____
Phone: _____	Fax: _____	Email: _____

Specialty Area/Primary Theoretical Approach to EMDR (if any):

PROGRAM SELECTION AND DEVELOPMENT

A Provider's educational program is based on stated educational goals, and it should clearly contribute to the continuing education of mental health professionals in the area of practice, theory, methodology and research in EMDR.

I. Curriculum Content

1. How will you assure that program materials contribute to clinical/research knowledge in the use of EMDR and comply with current EMDRIA polices?

J. Program Development and/or Selection

1. What are the qualifications of the person responsible for the program development and/or selection? Please enclose a curriculum vita and any other information you think would be helpful. If Program Developer/Selector is not an EMDRIA Certified Therapist please indicate the EMDRIA Certified Therapist who will review the program prior to submission to be sure it meets the EMDRIA standards as appear in the EC Policies and Procedures Manual.
2. If you are not EMDRIA Certified, describe your review process for program selection, content, and application that includes an EMDRIA Certified therapist and is independent from the presenter of a specific program..

K. Goals and Objectives

1. Overall - what are the goals and objectives of the programs you intend to hold?
2. How do you plan to maintain balance and objectivity with programs so that presentations do not predominantly reflect the commercial view of the presenter, the provider organization, and/or anyone providing financial assistance to the organization or presenter?

L. Program Instructors/Presenters

1. What criteria do you plan to use when selecting programs and presenters?
2. How do you encourage the use of innovative and interesting teaching methods?

AUTHORIZATION

I certify, on behalf of _____, that the preceding statements are true. We/I agree to comply with EMDRIA policies. In addition, we/I agree to maintain the highest ethical standards as stated in the various mental health practitioners' Code of Ethics and Code of Conduct.

Regional Meeting/SIG EC Provider Signature

Date