



PARTICIPANT SEP APPROVAL PACKET COVER PAGE

Complete and attach this form to your SEP Approval Packet and email complete packet to rvolberding@traumahealing.org or fax to (303) 652-4039.

Participant Name: _____

Name Desired on Certificate: _____

Email Address: _____

Current Mailing Address: _____

City: _____

State/Province: _____

Zip Code: _____

Country: _____

Will you have your hours completed prior to Advanced II and be looking to receive your SEP Certificate at the Advanced II training?
Yes/No

*To receive certificate at Advanced II training, your whole and complete SEP Approval Packet must be received 6 weeks prior to the start of the Advanced II training you are registered for.

Also, you must not have any active or incomplete payment plans.*

Comments:

Personal Sessions:

(Minimum 12 credit hours)

Case Consultations:

Individual:

(Minimum 4 credit hours)

Group:

(No Minimum; 3 hours= 1 credit hour)

Total Case Consultations Hours:

(Minimum 18 credit hours; includes Group + Individual)

Case Consultation Hours with Faculty:

(Minimum 6 credit hours)

Review and Initial the following:

All provider signatures are accompanied by their printed name.

Any hours not logged on the session log must be a verified email, letter, or invoice from a Provider or Faculty member.

If scanned and emailed, please title subject line "First and Last name: SEP Approval Packet"

*Any Packets that do not meet these specifications will encounter a delay in processing time, and may not be processed until they are complete.

**Please keep all of your session logs until all of your hours have been completed. We are not responsible for retaining incomplete logs.