



PARTICIPANT SEP APPROVAL PACKET COVER PAGE

Complete and include this form with your Session Logs to compile your SEP Approval Packet and email complete packet to credentialing@traumahealing.org or mail to office address "C/O Credentialing Team".

Participant Name: _____

Name Desired on Certificate: _____

Email Address: _____

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:

Please provide your count of your hours for staff reference when processing approvals.

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".

Please note, any approval packets submitted through postal mail may experience a delay in processing.

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

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