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## Application to train in EMDR Therapy

### Exceptional Circumstances Pathway

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To complete EMDR Therapy training accredited by the EMDR Association of Australia, you are required to meet the eligibility criteria, as outlined on [emdraa.org](http://emdraa.org). Under some circumstances, as outlined below, you may apply to train if you do not meet all eligibility criteria.

The procedure for applying to train under exceptional circumstances is to:

- Complete this form – clearly indicating which criteria you do not meet.
- Prepare an application letter, addressing each criteria and how you do or do not meeting this. For criteria you do not meet, please provide collateral information which highlights how you have shown equivalence to this through other means.
- Attach copies of all referenced documents such as training certificates and qualifications.
- Attach a copy of your current CV.
- Attach a letter of support from your current manager and/or clinical supervisor.
- Ensure that an EMDRAA Accredited Consultant has signed the appropriate section of this form.

Completed applications should be emailed to: [accred@emdraa.org](mailto:accred@emdraa.org)

Please note that there are issues with the form when non-Adobe software is used to fill in the form. The most common culprits are Apple Preview and the various PDF plugins in browsers such as Chrome, Firefox, Safari, etc., which no longer support the Adobe plugin. Please save the file, do not open it in a browser window, and then open it using Adobe Acrobat or Reader.

**Application:**

Applicant name:

Applicant address:

Applicant email:

Professional discipline:

Supporting EMDRAA Accredited Consultant:

EMDRAA Accredited Consultant email:

*I confirm I have reviewed the requirements of this application and that my application includes the following:*

Checklist	
I have provided a letter addressing each of the following six criteria	
I have attached all supporting documents regarding the letter provided	
I have attached a current copy of my CV	
I have attached a letter of support from my current clinical supervisor and/or clinical manager	
I have attached a signed letter of support from an EMDRAA Accredited Consultant who has confirmed their availability to work with me from the commencement of my training.	
I understand that I <u>cannot</u> enrol in training until I have received approval to train from EMDRAA	

1. Have you completed an undergraduate degree in a mental health-related field?

Please note your degree, year completed, and the university level subjects/ units completed that relate to mental health assessment, diagnosis, conceptualisation, or intervention skills, or any subjects/ units specifically related to trauma.

Yes

No

2. Do you have evidence of training in providing trauma-related interventions? This training must include theoretical and practical applications. For example, training in other therapeutic modalities or training in the direct assessment and treatment of trauma-related presentations.

Yes

No

3. Do you currently meet the requirements for registration with a professional mental health membership body as outlined by EMDRAA? (see Are you Eligible - [emdraa.org/are-you-eligible/](http://emdraa.org/are-you-eligible/))

Yes

No

If you have answered no to q3, please provide the answers to the following questions in your cover letter:

- a. What is your identified professional discipline/ body?
- b. What is your current membership status within your discipline?
- c. Please outline your current progress towards meeting the eligibility criteria for your professional discipline as outlined on the EMDRAA website. For example, remaining client hours, competencies, time frames, and hours of supervision.
- d. What is your expected date to meet the full eligibility criteria for EMDRAA?

4. Do you currently hold professional indemnity insurance to cover your clinical practice?

Yes

No

5. Have you had at least two years recent experience in a clinical role providing counselling/therapy?

Yes

No

6. Are you engaged in regular clinical supervision? Please provide a letter of support from your current supervisor and/or clinical manager.

Yes

No

**Please note:** This application is to assess your eligibility to commence EMDR Basic training. You will need to meet the EMDRAA eligibility requirements before you are eligible to be a full member or move on to accreditation processes with EMDRAA.

**Please note:** If you are an international applicant, please provide a letter from your national or regional EMDR association to confirm your eligibility to train in EMDR Therapy in the country where you are practising.

## **Consultant Agreement**

This agreement is for applicants who do not fulfil all EMDRAA eligibility criteria but who **may be** conditionally approved by the EMDRAA Accreditation and Standards Committee for training with this agreement in place.

**Please note:** EMDRAA strongly recommends that at least the first session of consultation be conducted individually, to allow exploration of any additional learning requirements or support needed to ensure successful completion of EMDR Basic Training and effective implementation of EMDR Therapy.

I \_\_\_\_\_ (EMDRAA Consultant) have availability to consult with  
\_\_\_\_\_ (applicant) with 10 hours of consultation as they  
undertake an EMDRAA accredited consultation program.

I \_\_\_\_\_ (applicant) agree to participate fully in consultation with  
\_\_\_\_\_ (EMDRAA Consultant) and attend 10 hours of consultation  
throughout the period of basic training to ensure responsible practice and application of the  
training.

### **Please Sign**

Applicant signature:

Date:

Consultant signature:

Date: