

Application for Becoming an AEDP Supervisor-in-Training

To be submitted to AEDP Institute

Please send completed applications to: carolynf@aedpinstitute.org

Section 1: Personal Information

1. Full Name

2. Highest Educational Degree Achieved

3. Years of Clinical Practice Experience

4. License Information

(State/Province/Country, License Type/Board, License Number)

Example: NY, USA, LCSW, #12345LC

5. Home Mailing Address

6. Work Mailing Address (if different)

7. Email and Phone Number

Email: _____

Phone: _____

8. First Language and Other Languages Spoken

First Language: _____

Other Languages: _____

9. Date You Became an AEDP Certified Therapist

10. AEDP Supervisors You Have Worked With

Please list all AEDP Supervisors with whom you have worked for more than one or two hours in individual or group supervision (including Core Training).

11. Other Psychotherapy Models

Please list any other psychotherapy models in which you are trained and your approximate current level of training.

12. Previous Supervision Experience

Have you formally supervised therapists before (in a model other than AEDP)?

No

Yes

If yes, please indicate the number of years and the model(s):

Section 2: Prerequisites for Entering the Supervisor-in-Training Track

A. Experiential Assisting

By the time you become a Certified Supervisor, you will need to have assisted in:

- 1 Immersion
- 5 ES1 Modules
- 1 Advanced Skills Module (ASM)

To apply for the Supervisor-in-Training Track, you must have assisted in:

- At least 1 Immersion
- At least 3 ES1 Modules

We strongly recommend that plans are already in place to complete the remaining assisting requirements as soon as possible.

Please note that participant feedback and Lead Assistant evaluations from these courses may be reviewed as part of your application process.

If you would like to include notes regarding your assisting experience, please do so below:

Immersion(s) Assisted In (up to 2)

ES1 Modules Assisted In (up to 5)

Future ES1 Modules Scheduled

Advanced Skills Modules (Completed or Scheduled)

Please include faculty presenter(s) and date(s).

Special Note for Non-English-Speaking Candidates or Challenging Time Zones

Equivalent assisting experience may be completed through Institute-recognized trainings, supervision groups, or Core Trainings (online or in person). Please contact the Certification Committee to discuss alternatives if needed.

B. Reading Requirement

I have read *Supervision Essentials of AEDP* by Natasha C. N. Prenn and Diana Fosha.

Yes, I have read this book.

C. Self-Reflection

Please write an approximately 200-word self-reflection and share it with your two Supervisors of Supervision (at least one of whom must be AEDP Faculty).

Prompt

As you prepare to enter the Supervisor-in-Training track, please reflect on your readiness to train as an AEDP Supervisor. Supervision requires a range of skills beyond therapy itself.

Please describe:

- Areas of strength and mastery in AEDP
- Areas still needing development

We do not expect mastery in all areas, but applicants should demonstrate a solid foundation and readiness to continue developing the following supervisory capacities:

- Teaching relevant AEDP theory (attachment, the Triangle, the Four States, emotion theory, etc.)
- Teaching AEDP interventions and experiential techniques

I have read this candidate's self-reflection and agree to serve as one of their Supervisors of Supervision beginning approximately: _____

I will assist this candidate in preparing and reviewing their Culminating Project before submission.

I have supervised this person for approximately _____ hours prior to today.

Signature: _____

Date: _____

Supervisor of Supervision #2

Name: _____

I have read this candidate's self-reflection and agree to serve as one of their Supervisors of Supervision beginning approximately: _____

I will assist this candidate in preparing and reviewing their Culminating Project before submission.

I have supervised this person for approximately _____ hours prior to today.

Signature: _____

Date: _____

Candidate Signature

Candidate Signature: _____

Application Submission Date: _____

Additional Comments

Carolyn Fitzgerald will respond within approximately two weeks. If you do not hear back within that timeframe, please follow up directly or contact **admin@aedpinstitute.org**.