

PARTICIPANT PROVISIONAL SEP

APPROVAL PACKET COVER PAGE

Complete and include this form with your Session Logs to compile your Provisional SEP Approval Packet and email complete packet to [credentialing@traumahealing.org](mailto: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 Online Advanced II and be looking to receive your PSEP Certificate at the Advanced II training?

Yes/No

\*To receive certificate at Advanced II training, your whole and complete PSEP Approval Packet must be received 6 weeks prior to the start of the Online 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: Provisional SEP Approval Packet”

\*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. We are not responsible for retaining incomplete logs.