



American Board of Examiners in Psychodrama, Sociometry and Group Psychotherapy

1629 K Street NW, Suite 300 - Washington, DC 20006 - jasmin@abepsychodrama.org - www.psychodramacertification.org

THE PAT ANNUAL TRAINING PLAN UPDATE FORM

FROM: _____ TO: _____

PART I: Identifications:

PAT:

Name: _____

Email: _____

PRIMARY TRAINER:

Name _____

Email _____

SECONDARY TRAINER:

Name _____

Email _____

PART II:

What year did you begin this process: _____ What year do you plan to take the TEP exam: _____

PART III: Reporting Training Hours, Consultation and Professional Development

A. TRAINING SESSIONS:

Attach **Annual Summary of Training Hours Form**.

B. PROFESSIONAL DEVELOPMENT:

Attach **Annual Summary of Professional Development Form**.

C. CONSULTATION:

In the space below tell us who you received consultation from since your last annual update and the types of consultation and the time frames (e.g., J.L. Moreno provided 15 hours of consultation during this past year both via telephone, face to face and on-site).

PART IV: Annual Summary of Training Hours, Consultation and Professional Development

IN-PERSON TRAINING HOURS OFFERED THIS YEAR	<input type="text"/>	CUMULATIVE IN-PERSON TRAINING HOURS OFFERED	<input type="text"/>
DISTANCE TRAINING HOURS OFFERED THIS YEAR	<input type="text"/>	CUMULATIVE DISTANCE TRAINING HOURS OFFERED	<input type="text"/>
CONSULTATION OBTAINED THIS YEAR	<input type="text"/>	CUMULATIVE CONSULTATION OBTAINED	<input type="text"/>
PROFESSIONAL DEVELOPMENT OBTAINED THIS YEAR	<input type="text"/>	CUMULATIVE PROFESSIONAL DEVELOPMENT OBTAINED	<input type="text"/>

PART V: Intentions for Next Year

Attach a one-page narrative of your intentions to obtain professional development, offer training workshops and receive consultation over the next year.

Our signatures below confirm our on-going Primary Trainer & PAT training relationship.

Signature of Primary Trainer

Date

Signature of Applicant

Date

As the primary trainer I have carefully read and reviewed the PAT Annual Update and all supporting documents. I understand it is the primary trainer's responsibility to submit these materials to the Board.

YOUR ANNUAL PAT UPDATE FORM MUST BE RECEIVED BY JULY 15th

ANNUAL SUMMARY OF TRAINING HOURS

List Training Session in Chronological Order

Training Session Title:**Trainer Role Taken (check one)**

Solo Trainer — You do it all

Co-Trainer — You and someone else do it collaboratively

Team Trainer — You and someone else take turns (count only your turn)

PAT Intern — You do part of Training session for a TEP (count your part)

Other — Please describe what you did:

Describe the Participants (setting, population):**Describe the Training (type of training; in-person or distance learning; goals, objectives; techniques used):**

Date Presented: _____

In-Person Hours Offered _____ **Total In-Person Hours to Date** _____

Distance Learning Hours Offered _____ **Total Distance Learning Hours to Date** _____

Describe Consultation:

Consultation Hours:

Name of Consultant:

Training Session Title:

Trainer Role Taken (check one)

- Solo Trainer — You do it all
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- Team Trainer — You and someone else take turns (count only your turn)
- PAT Intern — You do part of Training session for a TEP (count your part)
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Describe the Participants (setting, population):

Describe the Training (type of training; in-person or distance learning; goals, objectives; techniques used):

Date Presented: _____

In-Person Hours Offered _____ **Total In-Person Hours to Date** _____

Distance Learning Hours Offered _____ **Total Distance Learning Hours to Date** _____

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ANNUAL SUMMARY OF PROFESSIONAL DEVELOPMENT

The Board of Examiners defines professional development broadly as long as it increases the PAT's knowledge, skills and abilities as a TEP. Professional Development includes: 1) Attending Local, Regional & National Conferences; 2) Taking Classes; 3) Attending Workshops or Seminar; 4) Publishing articles or books may be credited for total of 15 hours; and 5) personal growth or therapy may be credited for a maximum of 25 hours.

Title:		
Description:		
Trainer / Teacher / Institution:	Dates:	Hours Completed <input type="text"/>
		Total Professional Development <input type="text"/>

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Description:		
Trainer / Teacher / Institution:	Dates:	Hours Completed <input type="text"/>
		Total Professional Development <input type="text"/>

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