

**EGATIN**

# European Group Analytic Training Institutions Network

# APPLICATION FOR MEMBERSHIP

# *This application is for organisations, which offer training programmes in Group Analysis, which in general consist of personal therapy in a small analytic group, theory and supervision.*

# *Training programmes must be organized within the framework of a Group Analytic Institution that fulfils EGATIN’s Essential Training Standards.*

# Please note:

* The final date for Application for Membership is October 15th
* Application to be completed in typing, handwritten applications will not be accepted.
* 1 hour equals 60 minutes
* If accepted by the AGM, this form will be uploaded on the EGATIN’s website, section “Members only”

# Section I: Identity of Institution

1. Name of Institution:
2. Institution address: Postal code       State       City       str.       bldg.       of.
3. Institution e-mail       tel.
4. Institution EGATIN delegate name       e-mail
5. Institution foundation year
6. Institution legal status  If other, please, specify
7. Do you have a Constitution? [ ]  Yes [ ]  No
8. Do you have an Ethical Code? [ ]  Yes [ ]  No
9. Please, describe briefly the basic philosophy and theoretical orientation(s) of your Institution:
10. Which membership level are you applying for?

# Section II: Training credentials

1. Founder(s) or initiators:
2. Number of members at present: Full       Associate       other
3. Names of training staff (please, also complete in detail Section IV)

1.       2.       3.       4.       5.       6.       7.       8.       9.       10.

1. Number of graduates qualified since the foundation of your Institution:
2. If you are applying for qualifying level of membership, please, list the names of the first 5 graduates:

1.       2.       3.       4.       5.

# Section III: Description of Group Analytic Training offered by your Institution

# How many training courses does your institution offer?

# If your Institution offers more than one training course, please, fill in Sections III and IV for each course (see additional sections in Appendix below)

# COURSE 1

Course title:

Duration (in academic years) of the training in present:

Number of trainees in the current year

1) THERAPY

1. Does the course involve personal group analysis in small analytic group? Yes [ ]  No [ ]

If yes, complete below b, c, d, e, f.

1. What form of group analytic therapy?

[ ]  Block training. State number of blocks per year

[ ]  Continuous training. State number of sessions per week

1. What kind of group analytic group?

[ ]  Trainees only

[ ]  Mixed (trainees and patients)

1. Duration of each group analytic session:       minutes
2. Minimum hours of personal group analysis in small analytic group:
3. Do trainees attend group sessions in person?

[ ]  Always in person

[ ]  Always by means of telecommunication. Specify the type of technology used for telecommunication:

[ ]  Partly by means of telecommunication. Specify the type of technology used for telecommunication:       Describe how and to what extent the use of telecommunication technologies is limited:

1. What other group experiences do you offer trainees?

[ ]  Small experiential group       hours per year

[ ]  Median group       hours per year

[ ]  Large group       hours per year

1. Does the course involve individual psychotherapy? Yes [ ]  No [ ]

If yes, number of sessions weekly      , duration of each session       minutes, minimum hours required

2) THEORETICAL ACTIVITY

1. What are main areas of your theoretical approach (please, list below)?

1. In what form is theory offered?  If other, please, specify
2. Minimum hours of theory required

3) SUPERVISION

1. Does the course involve supervision of trainees’ psychotherapeutic work? Yes [ ]  No [ ]

If yes, complete below b, c, d, e, f.

1. In what form is supervision of trainees’ psychotherapeutic work offered?

[ ]  Group supervision only

[ ]  Individual supervision only

[ ]  Supervision is offered partly in group setting for minimum       hours

1. What kind of trainees’ psychotherapeutic work is presented for supervision?

[ ]  Group analytic cases. State minimum hours of supervision of group analytic work required       State minimum number of groups a trainee must be supervised for       State minimal duration of a group, which a trainee must conduct to qualify

[ ]  Individual psychoanalytic cases

[ ]  other (please, specify)

1. Duration of each supervision session in minutes: group session       individual session
2. Minimum hours of supervision required
3. Do trainees attend supervision sessions in person?

[ ]  Always in person

[ ]  Always by means of telecommunication. Specify the type of technology used for telecommunication:

[ ]  Partly by means of telecommunication. Specify the type of technology used for telecommunication:       Describe how and to what extent the use of telecommunication technologies is limited:

4) QUALIFICATION

1. Other kinds of obligatory activity during or at the end of the training course

 If other, please, specify

1. Describe the application process used by your Institute for training candidates

[ ]  Individual interview [ ]  Group interview [ ]  written application [ ]  Introductory course

[ ]  Personal analysis [ ]  other (please, specify)

1. Do you provide any kind of qualification or accreditation to your trainees at the completion of the training?

Yes [ ]  No [ ]  If yes, what kind

1. Do you always provide different trainers for Therapy and Supervision?

 Yes [ ]  No [ ]  If no, please, explain

# Section IV: Present training staff

Number of persons included in training staff in present

Do you require your training staff to be trained as group analysts? Yes [ ]  No [ ]

 If yes, please, fill in for each trainer (up to 10 entries available)

* 1. Trainer’s name

 Status  If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution[[1]](#footnote-1)       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

* 1. Name of supervisor       Group analytic Institution, where the supervisor was trained
	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

* 1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

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* 1. Trainer’s name

 Status If other, please, specify

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Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

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 Status If other, please, specify

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 Group analytic training institution       year of graduation

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Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

* 1. Trainer’s name

 Status If other, please, specify

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 Group analytic training institution       year of graduation

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	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

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Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

* 1. Trainer’s name

 Status If other, please, specify

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 Group analytic training institution       year of graduation

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* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
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Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

* 1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

* 1. Name of supervisor       Group analytic Institution, where the supervisor was trained
	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

* 1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

* 1. Name of supervisor       Group analytic Institution, where the supervisor was trained
	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

INFORMANT:

Name:

Address: Postal code       State       City       str.       bldg.       apt.

E-mail:       Tel.:

I confirm that all information stated above is correct and can be used by EGATIN [ ]

I confirm that information stated above complies with EGATIN Essential Training Standards [ ]

On behalf of my Institution I confirm our adherence to the principals contained in the EGATIN Constitution and Code of practice [ ]

On behalf of my Institution I confirm our agreement to pay the annual membership fee [ ]

Date       Signature

**Please send the completed application form by mail and/or by e-mail to EGATIN’s Membership Secretary**

**APPENDIX**

**(please, fill this section for each training course in case your Institution offers more than one)**

# COURSE 2

Course title:

Duration (in academic years) of the training in present:

Number of trainees in the current year

1) THERAPY

1. Does the course involve personal group analysis in small analytic group? Yes [ ]  No [ ]

If yes, complete below b, c, d, e, f.

1. What form of group analytic therapy?

[ ]  Block training. State number of blocks per year

[ ]  Continuous training. State number of sessions per week

1. What kind of group analytic group?

[ ]  Trainees only

[ ]  Mixed (trainees and patients)

1. Duration of each group analytic session:       minutes
2. Minimum hours of personal group analysis in small analytic group:
3. Do trainees attend group sessions in person?

[ ]  Always in person

[ ]  Always by means of telecommunication. Specify the type of technology used for telecommunication:

[ ]  Partly by means of telecommunication. Specify the type of technology used for telecommunication:       Describe how and to what extent the use of telecommunication technologies is limited:

1. What other group experiences do you offer trainees?

[ ]  Small experiential group       hours per year

[ ]  Median group       hours per year

[ ]  Large group       hours per year

1. Does the course involve individual psychotherapy? Yes [ ]  No [ ]

If yes, number of sessions weekly      , duration of each session       minutes, minimum hours required

2) THEORETICAL ACTIVITY

1. What are main areas of your theoretical approach (please, list below)?

1. In what form is theory offered? If other, please, specify
2. Minimum hours of theory required

3) SUPERVISION

1. Does the course involve supervision of trainees’ psychotherapeutic work? Yes [ ]  No [ ]

If yes, complete below b, c, d, e, f.

1. In what form is supervision of trainees’ psychotherapeutic work offered?

[ ]  Group supervision only

[ ]  Individual supervision only

[ ]  Supervision is offered partly in group setting for minimum       hours

1. What kind of trainees’ psychotherapeutic work is presented for supervision?

[ ]  Group analytic cases. State minimum hours of supervision of group analytic work required       State minimum number of groups a trainee must be supervised for       State minimal duration of a group, which a trainee must conduct to qualify

[ ]  Individual psychoanalytic cases

[ ]  other (please, specify)

1. Duration of each supervision session in minutes: group session       individual session
2. Minimum hours of supervision required
3. Do trainees attend supervision sessions in person?

[ ]  Always in person

[ ]  Always by means of telecommunication. Specify the type of technology used for telecommunication:

[ ]  Partly by means of telecommunication. Specify the type of technology used for telecommunication:       Describe how and to what extent the use of telecommunication technologies is limited:

4) QUALIFICATION

1. Other kinds of obligatory activity during or at the end of the training course

 If other, please, specify

1. Describe the application process used by your Institute for training candidates

[ ]  Individual interview [ ]  Group interview [ ]  written application [ ]  Introductory course

[ ]  Personal analysis [ ]  other (please, specify)

1. Do you provide any kind of qualification or accreditation to your trainees at the completion of the training?

Yes [ ]  No [ ]  If yes, what kind

1. Do you always provide different trainers for Therapy and Supervision?

 Yes [ ]  No [ ]  If no, please, explain

# Section IV: Present training staff

Number of persons included in training staff in present

Do you require your training staff to be trained as group analysts? Yes [ ]  No [ ]

 If yes, please, fill in for each trainer (up to 10 entries available)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution[[2]](#footnote-2)       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

* 1. Name of supervisor       Group analytic Institution, where the supervisor was trained
	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

* 1. Name of supervisor       Group analytic Institution, where the supervisor was trained
	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
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	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

* 1. Name of supervisor       Group analytic Institution, where the supervisor was trained
	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

* 1. Name of supervisor       Group analytic Institution, where the supervisor was trained
	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

* 1. Name of supervisor       Group analytic Institution, where the supervisor was trained
	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

* 1. Name of supervisor       Group analytic Institution, where the supervisor was trained
	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
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Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

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 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

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	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
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Completed       hours of supervision of group analytic work under supervision of:

* 1. Name of supervisor       Group analytic Institution, where the supervisor was trained
	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

# COURSE 3

Course title:

Duration (in academic years) of the training in present:

Number of trainees in the current year

1) THERAPY

1. Does the course involve personal group analysis in small analytic group? Yes [ ]  No [ ]

If yes, complete below b, c, d, e, f.

1. What form of group analytic therapy?

[ ]  Block training. State number of blocks per year

[ ]  Continuous training. State number of sessions per week

1. What kind of group analytic group?

[ ]  Trainees only

[ ]  Mixed (trainees and patients)

1. Duration of each group analytic session:       minutes
2. Minimum hours of personal group analysis in small analytic group:
3. Do trainees attend group sessions in person?

[ ]  Always in person

[ ]  Always by means of telecommunication. Specify the type of technology used for telecommunication:

[ ]  Partly by means of telecommunication. Specify the type of technology used for telecommunication:       Describe how and to what extent the use of telecommunication technologies is limited:

1. What other group experiences do you offer trainees?

[ ]  Small experiential group       hours per year

[ ]  Median group       hours per year

[ ]  Large group       hours per year

1. Does the course involve individual psychotherapy? Yes [ ]  No [ ]

If yes, number of sessions weekly      , duration of each session       minutes, minimum hours required

2) THEORETICAL ACTIVITY

1. What are main areas of your theoretical approach (please, list below)?

1. In what form is theory offered? If other, please, specify
2. Minimum hours of theory required

3) SUPERVISION

1. Does the course involve supervision of trainees’ psychotherapeutic work? Yes [ ]  No [ ]

If yes, complete below b, c, d, e, f.

1. In what form is supervision of trainees’ psychotherapeutic work offered?

[ ]  Group supervision only

[ ]  Individual supervision only

[ ]  Supervision is offered partly in group setting for minimum       hours

1. What kind of trainees’ psychotherapeutic work is presented for supervision?

[ ]  Group analytic cases. State minimum hours of supervision of group analytic work required       State minimum number of groups a trainee must be supervised for       State minimal duration of a group, which a trainee must conduct to qualify

[ ]  Individual psychoanalytic cases

[ ]  other (please, specify)

1. Duration of each supervision session in minutes: group session       individual session
2. Minimum hours of supervision required
3. Do trainees attend supervision sessions in person?

[ ]  Always in person

[ ]  Always by means of telecommunication. Specify the type of technology used for telecommunication:

[ ]  Partly by means of telecommunication. Specify the type of technology used for telecommunication:       Describe how and to what extent the use of telecommunication technologies is limited:

4) QUALIFICATION

1. Other kinds of obligatory activity during or at the end of the training course

 If other, please, specify

1. Describe the application process used by your Institute for training candidates

[ ]  Individual interview [ ]  Group interview [ ]  written application [ ]  Introductory course

[ ]  Personal analysis [ ]  other (please, specify)

1. Do you provide any kind of qualification or accreditation to your trainees at the completion of the training?

Yes [ ]  No [ ]  If yes, what kind

1. Do you always provide different trainers for Therapy and Supervision?

 Yes [ ]  No [ ]  If no, please, explain

# Section IV: Present training staff

Number of persons included in training staff in present

Do you require your training staff to be trained as group analysts? Yes [ ]  No [ ]

 If yes, please, fill in for each trainer (up to 10 entries available)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution[[3]](#footnote-3)       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

* 1. Name of group analyst       Group analytic Institution, where the group analyst was trained
	2. Name of group analyst       Group analytic Institution, where the group analyst was trained

Completed       hours of supervision of group analytic work under supervision of:

* 1. Name of supervisor       Group analytic Institution, where the supervisor was trained
	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

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	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

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	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

 Basic academic training       year of graduation

 Group analytic training institution       year of graduation

 Completed       hours of personal analysis in small analytic group under conducting of group analyst(s):

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	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

1. Trainer’s name

 Status If other, please, specify

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 Group analytic training institution       year of graduation

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 Status If other, please, specify

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1. Trainer’s name

 Status If other, please, specify

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Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

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	2. Name of supervisor       Group analytic Institution, where the supervisor was trained

Completed       hours of group analytic theory under guidance of       (state the name of theory seminars coordinator)

INFORMANT:

Name:

Address: Postal code       State       City       str.       bldg.       apt.

E-mail:       Tel.:

I confirm that all information stated above is correct and can be used by EGATIN [ ]

I confirm that information stated above complies with EGATIN Essential Training Standards [ ]

On behalf of my Institution I confirm our adherence to the principals contained in the EGATIN Constitution and Code of practice [ ]

On behalf of my Institution I confirm our agreement to pay the annual membership fee [ ]

Date       Signature

**Please send the completed application form by mail and/or by e-mail to EGATIN’s Membership Secretary**

1. Note: Institutions in which trainers have completed their own training must either be members of EGATIN or must fulfil EGATIN’s Essential Training Standards [↑](#footnote-ref-1)
2. Note: Institutions in which trainers have completed their own training must either be members of EGATIN or must fulfil EGATIN’s Essential Training Standards [↑](#footnote-ref-2)
3. Note: Institutions in which trainers have completed their own training must either be members of EGATIN or must fulfil EGATIN’s Essential Training Standards [↑](#footnote-ref-3)