



# Application Form Continuous Professional Development Credits (CPD) for workshops and development activities

Please complete all sections. Email completed application to: [admin@emdrassociation.org.uk](mailto:admin@emdrassociation.org.uk)

Name of Applicant:

Email Address:

EMDR Status of Applicant: **Please tick:**  
Practitioner  Consultant  Trainer

Type of event e.g.: Commercial; Region Affiliated; NHS In-House; Other; - please give full details

All Applications for EMDR Association UK CPD credits for Commercial events attract a fee of £500. The award of credits is conditional upon receipt of the payment. This fee is waived for non-commercial events

Name(s) of Speakers:  Practitioner  Consultant  Trainer   
1:      
Email:

Practitioner  Consultant  Trainer   
2:      
Email:

Practitioner  Consultant  Trainer   
3:      
Email:

For workshops including Child & Adolescent content, to what level is the speaker(s) C&A qualified:

	C&A Level 1	C&A Level 2	C&A Practitioner	C&A Consultant
1: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Title of event:

Date of Event:  Location/ Online:  Duration of Event:

Aims:

Learning Outcomes:

Teaching Methodology/ Format:

Percentage of time focussed on non-EMDR content & why

Target Audience:  
N.B: If attendees have not completed their EMDR training, it is the responsibility of the workshop facilitator and the organisers/sponsors of the event to ensure attendees have the appropriate level of EMDR training for that event.

How will this event develop EMDR practice?

Has this event has previously been awarded CPD points YES  NO  If Yes, have you included a summary of previous evaluations? YES  NO  If No, Give reason

Have you submitted a summary of evaluations of other workshops you have received CPD credits for? YES  NO  If No, Give reason

Signature:  Date: