

# APPLICATION FORM I: FOR TRAINING ORGANIZATIONS

1. Full name and initials of the Organization: (In native language and in English)

2. Official address:

Postal address:

Name:

Name:

Street and number:

Street and number:

City:

City:

Postal code:

Postal code:

Country:

Country:

Contact person:

Phone number:

Mobile phone number:

Best times to phone:

Fax number:

E-mail:

Website of the Organization:

3. Name of the President/ Vice-president (Director/ Co-director):

4. Year of founding of the Organization:

5. Presentation of the formal structure of the Organization: (Society or partnership agreement or non-profit organisation or foundation or?)

6. History of the Organization (1/2- 1 PAGE) (Roots? Help of foreign trainers? Founded by whom? Influences? Links and contacts? Developments?):

7. Training program (1- 4 PAGES) (Admission qualifications, different stages in training, elements with hours, orientations in the training, recommended readings, comparison with Minimal Training Standards of FEPTO):

8. List of training staff (Main trainers, co-trainers, functions, specialities ):  
(P.S. We ask for the photocopies of PD certificates of the main trainers)

9. Number of training groups in the last three years:

10. Number of psychodramatists certified by the Organization:

11. Other activities and publications:

12. Does your Organization have a specific Code of Ethics? (If yes, please supply it. If not, do you agree to abide by the FEPTO Code of Ethics?)