

Cover sheet for application as an
European Accredited Psychotherapy Training Institute (EAPTI)

Official evidence by the NAO and EWAO of recommendations for the accreditation of a training institute as an EAPTI according to the TAC procedures (point 4.2. and 5.2.)

Please note: It is the responsibility of the EAPTI applicant to complete the form and to obtain the signature of the NAO/EWAO completed on the cover sheet prior to examination by the TAC.

Name of applying institute and abbreviation	Contact person Email	Modality

I, the duly authorized officer of this **National Awarding Organization**, confirm that the training program of the above mentioned institute has been either recognized by our NAO or that our NAO *has no objection* for an accreditation as EAPTI.

Comments: _____

Signature of authorised officer	Name	Name of NAO	Date and stamp

I, the duly authorized officer of the relevant **European Wide Accrediting Organization** confirm that the training program of the above mentioned institute has been already recognized and *meets the training standards* of our EWAO:

(If there is no relevant EWAO, the EWOC will scrutinize the method and state no objection to the accreditation as an EAPTI):

Signature of authorised officer	Name and official status	Name of EWAO (EWOC)	Date and stamp

The **TAC (Training Accreditation Committee)** recommends to EAP an EAPTI accreditation, allowing to prepare trainees for the ECP:

Signature of TAC chair	Name TAC chair	Date TAC meeting	Date of EAPTI accreditation