



# American Board of Examiners in Psychodrama, Sociometry and Group Psychotherapy

1629 K Street NW, Suite 300 - Washington, DC 20006 - [abe@psychodramacertification.org](mailto:abe@psychodramacertification.org) - [www.psychodramacertification.org](http://www.psychodramacertification.org)

## TEP THIRD PROFESSIONAL ENDORSEMENT

The undersigned applicant is applying for national certification as a Trainer, Educator, Practitioner in Psychodrama, Sociometry and Group Psychotherapy. If you are not fully confident and you are unwilling to endorse the applicant, return this form to the applicant.

### PART I: WAIVER OF LIABILITY (To be completed by Applicant)

I, \_\_\_\_\_, hereby authorize \_\_\_\_\_,  
(Applicant) (Endorser)

hereinafter "the endorser," to provide the American Board of Examiners in Psychodrama, Sociometry and Group Psychotherapy and their appointed representatives with all information of any kind which the endorser may deem relevant to my qualifications as an applicant. I hereby release and discharge the endorser and the American Board of Examiners in Psychodrama, Sociometry and Group Psychotherapy from all claims arising out of the provision of such information.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

### PART II: ENDORSEMENT (To be completed by the Endorser)

**Do not complete this reference form unless the above waiver is signed by the applicant.  
Do not return this form to the applicant, but mail it directly to the Board.**

#### A. GENERAL INSTRUCTIONS

You may endorse this applicant provided that you have personally observed the applicant more than once on separate occasions within the past three years conducting psychodrama training sessions that reveal the knowledge, skills and abilities relevant to the teaching and training of the practice of psychodrama, sociometry and group psychotherapy.

**Third endorser has observed applicant on at least two occasions. List dates:** \_\_\_\_\_, \_\_\_\_\_.

#### B. SPECIFIC INSTRUCTIONS

Using the format requested below, provide the information asked for on your professional letterhead.

**If you are NOT certified by the American Board of Examiners, please attach a copy of your resumé or curriculum vitae.  
The applicant is already certified as a practitioner, so please limit your comments to their knowledge, skills and abilities as a trainer and teacher in psychodrama, sociometry and group psychotherapy.**

**Comments regarding the applicant's skill in other roles – for example, as a director, auxiliary, double, group member, or service to the community – are not relevant to this endorsement.**

**I. Relationship Context:** In general provide a history of your relationship with the applicant. Specifically describe the number of times, dates and settings in which you have observed the applicant in the role of trainer and educator in psychodrama, sociometry and group psychotherapy.

**II. Evaluation of Applicant's Knowledge, Ability and Skills:** Describe your impressions and evaluations of the applicant's knowledge, skills and abilities as a trainer and educator in leading psychodrama, sociometry and group psychotherapy training sessions. Include strengths and weaknesses. Is there a particularly memorable training recollection? Be as explicit as you can be.

**III. Evaluation of Applicant's Professionalism:** Comment on the applicant's professionalism as a trainer and teacher. This includes things like knowledge of the subject area, awareness of limitation of competency, concern for ethics, standards of practice, relationships with colleagues, continuing education, and so forth.

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**PART III: RECOMMENDATION**

I hereby recommend and endorse the applicant for certification as a Trainer, Educator, Practitioner of Psychodrama, Sociometry and Group Psychotherapy.

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PRINTED NAME OF ENDORSER

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SIGNATURE OF ENDORSER

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DATE

**ALL APPLICATION MATERIALS MUST BE RECEIVED IN OUR OFFICE BY JULY 15th**