

EMDR SINGAPORE

CERTIFICATION - APPLICATION FORM

Title: Dr/Prof/Mr/Ms/Mdm

Last Name: _____ First Name: _____

Address: _____

_____ Postal Code: _____

Telephone number: _____ (Home) _____ (Mobile)

Email Address: _____

Highest Degree Obtained & Field of Study (MA, MSW, PhD, MD, DPsych, etc):

Institution & country where received: _____

Date/Year received: _____

Please answer the following questions and submit the relevant documents.

(1) Approved Basic Training recognised by EMDR Singapore

Have you submitted your Certificate of Completion of an approved EMDR Basic Training programme?

Yes No

(2) Professional Practice

Do you have a current and valid status as:

Clinical Member or Registered Counsellor of the Singapore Association for Counselling (SAC); OR

Full Member or Registered Social Worker of the Singapore Association of Social Workers (SASW); OR

Full Member or Registered Psychologist of the Singapore Psychological Society (SPS); OR

600 hours post-degree supervised clinical work experience within the last 3 years

Attach a copy of supporting document issued by SAC, SASW or SPS, or a declaration letter signed by your clinical supervisor, Head of Department or Employer.

Yes No

(3) EMDR Practice

Have you, within 3 years immediately preceding this application, conducted at least 50 EMDR sessions with no less than 25 clients in which 75 percent of cases to be phase 4 and further?

Please attach [Client Session Log](#).

Yes No

(4) EMDR Consultation post EMDR Basic Training

Have you received at least 15 hours of supervision/case consultation with an EMDR Singapore Approved Consultant after the completion of your EMDR Basic Training?

NOTE: At least 5 of these hours must be obtained through individual consultation. The remaining 10 hours may be obtained through small group consultation (max 4 pax/group for a minimum of a 2-hour session – i.e. at least 30 minutes of case consultation per person).

Please attach [Consultation Log](#) signed by Approved Consultant.

Yes No

(5) EMDR Singapore Membership

Are you a current Full Member with EMDR Singapore?

Yes No

(6) Payment of Certification Application Fee of SGD50 (Non-refundable)

I have made online payment via PayNow (UEN: T10SS0113F) *or*

I have made payment via direct bank transfer (OCBC: 629-353830-001)

Please attach proof of payment/screenshot.

(7) Declaration Statement

I confirm and acknowledge that the information I have submitted is true. I understand that I may be subjected to random checks to verify the information submitted.

Signature of Applicant

Name of Applicant

Profession

License Number (if any)

Date

Please submit this application form and supporting documents to registrar@emdr.sg