

# APPLICATION FOR REGISTERED EXPRESSIVE ARTS THERAPIST (REAT)

IEATA welcomes your application for Registration as an Expressive Arts Therapist (REAT). Please engage in this process as a creative challenge in describing your professional path and philosophy of Expressive Arts Therapy.

In order to assess your qualifications, please provide all information requested. Only completed applications will be reviewed. To facilitate diverse reviewers from different regions/countries and to maximize efficiency, IEATA will create a digital copy (PDF) of your completed application and email it for review. Please submit as many documents electronically as possible, using Google Docs file sharing or emailing .doc or PDF scans of documents. We understand transcripts and references will be coming separately. Where items must be mailed, please use the address below. A fully on-line application process is being explored.

You will be notified when your application is complete and will commence review. Your application will be reviewed by three (2) anonymous reviewers from the Professional Standards Committee for Expressive Arts Therapists. We kindly request your patience with the review process. All reviewers, co-chairs and IEATA board members are volunteers with busy schedules in addition to their supporting IEATA. We appreciate your patience with this process, as it can take up to 3 to 4 months to review a completed application. Again, the review process does not begin until we have all required documents.

If you have any further questions, please email us at [reat@ieata.org](mailto:reat@ieata.org). If you need to review the guidelines and requirements again for professional registration, you may view them on our website at [www.ieata.org](http://www.ieata.org). This application is designed for you to document each requirement clearly and completely.

Thank you for your dedication to Expressive Arts Therapy and your interest in becoming a REAT with IEATA. Good luck and we look forward to reviewing your application.

Respectfully,

**The Professional Standards Committee for Expressive Arts Therapists**  
c/o International Expressive Arts Therapy Association

Box 40707  
San Francisco, CA 94110-0707  
USA

**[reat@ieata.org](mailto:reat@ieata.org)**

# APPLICATION FOR REGISTERED EXPRESSIVE ARTS THERAPIST (REAT)

## **APPLICANT CONTACT INFORMATION:**

NAME:

EMAIL:

MAILING ADDRESS:

PHONE:

OTHER (e.g., Skype ID/etc.):

## **APPLICATION CHECK LIST**

Please send in one email the following documents (.doc, .pdf):

\_\_\_ **Cover Letter of Intention (can be in body of email)**

\_\_\_ **Contact Information & Check List Page**

\_\_\_ **Curriculum Vitae or Resume**

\_\_\_ **Education & Training Form**

\_\_\_ **Practicum Supervision Confirmation Form(s)**

\_\_\_ **Supervised Post-Masters Supervision Form(s)**

\_\_\_ **Autobiographical Statement (approx. 1000-words)**

\_\_\_ **Expressive Arts Philosophy Statement (approx. 1000-words)**

\_\_\_ **Application Fee of \$120.00** (You can easily pay online via our IEATA website using Memberclicks or you may mail your check/payment to address above. Please make sure you're membership is up-to-date as well.)

Please request transcripts and letters of reference to be sent directly to [reat@ieata.org](mailto:reat@ieata.org) or by mail (address above and instructions below).

**List all institutions from which you have requested transcripts:**

-

**List all individuals from whom you have requested references (2 for Categories A-D, 5 needed for "Exceptional Category"):**

- 1.
- 2.
- 3.
- 4.
- 5.

# APPLICATION FOR REGISTERED EXPRESSIVE ARTS THERAPIST (REAT)

## EDUCATION AND TRAINING

Please select a category from the list below that you will be applying under. If you are not sure which one best fits your experience please review detailed description of each in registration requirements outline.

- A. Masters Degree in Expressive Arts Therapy
- B. Masters Degree in Psychology or Related Counseling Discipline, Plus Training in Expressive Arts Therapy Training
- C. Masters Degree in Fine Arts Plus Training of Expressive Arts Therapy and Therapeutic Process.
- D. Doctoral Degree in Expressive Arts Therapy
- E. Exceptional Category with Masters Degree or Higher in Expressive Arts, Psychology or Fine Arts (per above).

Please submit official transcripts for all institutions being claimed for this application. Transcripts sent by mail should be in a sealed envelope with the signature of the registrar or other designated official across the seal. If your education has been obtained from a graduate institute that is not state accredited, please include a detailed syllabus for each course taken. Please include information about your practicum and your practicum supervisor. Additionally, have your practicum supervisor(s) complete the Practicum Supervision Confirmation Form (next page).

Please summarize each academic degree and/or post-graduate training experience being claimed for this application using this format (copy/add additional as needed):

### Academic Degree:

Institution:

Degree Earned (MA, PhD, etc.):

Year completed:

Practicum location:

Supervisor:

Total Credits:

### Training Institute and Other Training:

Name of Institute:

Year completed:

Practicum location:

Supervisor:

Total Hours:

# APPLICATION FOR REGISTERED EXPRESSIVE ARTS THERAPIST (REAT)

## **PRACTICUM SUPERVISION CONFIRMATION FORM**

Please request each supervisor of your practicum experience to complete this confirmation form. Include this form in your application packet. Please do not have supervisors send this under separate cover. Please feel free to copy this form for additional practicum supervisors. Thank you.

**Name of Applicant:**

**Name of Supervisor:**

Total Number of Clinical Hours:

Total Hours of Supervision:

Place of Clinical Experience:

Dates of Supervision:

From

To

Comments on Applicant's EXA Work:

**Signature of Supervisor:**

**Title of Supervisor:**

**License or Registration**

# APPLICATION FOR REGISTERED EXPRESSIVE ARTS THERAPIST (REAT)

## **SUPERVISED POST-MASTERS EXPRESSIVE ARTS THERAPY EXPERIENCE**

Please include information on your 1,000 hours post-masters supervised experience. These hours must be collected within a 48-month time frame. Employment can also be post-masters non-paid internship. Please include a description of your supervision hours and supervisor. There must be a total of 50 hours of individual supervision or 100 hours of group supervision or any combination. Please submit supervisor forms to verify hours and dates (next page).

**Please list all sites of Employment being claimed for this application using this format (copy/paste additional, as needed):**

Job Title:  
Job Description:  
Location:  
Year Supervisor:  
Total Hours of Supervision:  
Hours Per Week:  
Total Hours:

Job Title:  
Job Description:  
Location:  
Year Supervisor:  
Total Hours of Supervision:  
Hours Per Week:  
Total Hours:

Job Title:  
Job Description:  
Location:  
Year Supervisor:  
Total Hours of Supervision:  
Hours Per Week:  
Total Hours:

**Grand Total Hours of Experience:**

**Grand Total Hours of Supervision:**

# APPLICATION FOR REGISTERED EXPRESSIVE ARTS THERAPIST (REAT)

## POST-MASTERS SUPERVISION CONFIRMATION FORM

Please request each supervisor of your post-master's experience to complete this confirmation form. Include this form in your application packet. Please do not have supervisors send this under separate cover. Please feel free to copy this form for additional supervisors. Thank you.

**Name of Applicant:**

**Name of Supervisor:**

**Total Number of Clinical Hours:**

**Total Hours of Supervision:**

**Place of Clinical Experience:**

**Dates of Supervision:**                      **From**                      **To**

**Comments on Applicant's EXA Work:**

**Signature of Supervisor:** \_\_\_\_\_

**Title of Supervisor:** \_\_\_\_\_

**License or Registration:** \_\_\_\_\_

# APPLICATION FOR REGISTERED EXPRESSIVE ARTS THERAPIST (REAT)

## INTERNATIONAL EXPRESSIVE ARTS THERAPY ASSOCIATION LETTER OF REFERENCE

Referent's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

State: \_\_\_\_\_

Zipcode: \_\_\_\_\_

\_\_\_\_\_ has applied for Registration as an Expressive Arts Therapist. We thank you for participating in our review process by providing a letter of reference. We would like you to comment on the above named applicant regarding the areas outlined below on a **separate sheet of paper**. Please use these questions as guidelines and address them on a separate sheet of paper. Thank you.

How long have you known the applicant and in what capacity?

How would you assess the applicant's competencies in the arts and psychological domain?

How would you assess the applicant's personal development and growth?

How would you assess the applicant's contributions to the field of Expressive Arts Therapy?

Please provide any relevant information about this applicant in relation to their registration as an Expressive Arts Therapist (REAT).

Please also include a short statement of your background.

Please include this form with your statement and submit electronically to [reat@ieata.org](mailto:reat@ieata.org) or mail to:

**The Professional Standards Committee for Expressive Arts Therapists**  
c/o International Expressive Arts Therapy Association

**P.O. Box 40707**  
**San Francisco, CA 94110-0707**  
**USA**

# APPLICATION FOR REGISTERED EXPRESSIVE ARTS THERAPIST (REAT)

## HELPFUL DEFINITIONS AND CLARIFICATIONS FOR THE REAT APPLICATION PROCESS

(Document A)

**Professional Expressive Arts Therapy Institute:** a program which is conducted by a person(s) who:

- 1) Is a Registered Expressive Arts Therapist with IEATA or
- 2) Has training and experience as a creative or expressive arts therapist, which is equivalent to the qualifications set forth in IEATA's general registration standards.

**Supervision:** is defined as direct contact with a supervisor for the purpose of reviewing therapeutic work either in an individual or group setting. Direct contact may be on-site or through video or audiocassettes accompanied by transcripts of sessions. A ratio of ten hours of client contact to one hour of supervision is recommended. Supervision time includes time for reviewing of work and giving feedback to supervisee.

**Supervisor Qualifications:** It is strongly urged that an individual conducting supervision as defined above, should be a REAT. "Distant supervision" may be conducted as explained in above paragraph. A list of REATs may be obtained by going to Memberclicks as an IEATA member and searching for REATs in your area. If you are having problems finding someone please email us at calling IEATA at [Admin@ieata.org](mailto:Admin@ieata.org) or calling us at 415-891-7328 (USA).

If access to a REAT is impossible, a case-by-case evaluation of another supervisor will be made by the Professional Standards Committee for Expressive Arts Therapists, prior to their submission of an application, at the applicant's request.

The non-REAT supervisor will be considered in one of the two following manners:  
A non-REAT potential supervisor who is not registered or certified as a Drama Therapist, Music Therapist, Art Therapist, Etc., or one of the creative arts therapy professions, must send two copies of his/her resume, including information on his/her own training and supervision regarding any creative arts background. This information should be sent to:

**The Professional Standards Committee for Expressive Arts Therapists  
c/o International Expressive Arts Therapy Association  
P.O Box 40707  
San Francisco, CA 94110- 0707  
USA**

Any questions about whether your supervisor meets criteria before collecting your hours or before applying for REAT status, should be clarified by contacting the Professional Standards Committee for Expressive Arts Therapists by email at [reat@ieata.org](mailto:reat@ieata.org) or phone at 415-891-7328.



# APPLICATION FOR REGISTERED EXPRESSIVE ARTS THERAPIST (REAT)

Please be aware that the Co-Chairs for the Professional Standards Committee for Expressive Arts Therapists cannot review your application or coursework before you apply, as this would be considered an unfair business practice w/regards to other applicants. We usually recommend that you consult with your academic advisor or supervisor who can look through the requirements with you for clarification.

# APPLICATION FOR REGISTERED EXPRESSIVE ARTS THERAPIST (REAT)

## GUIDELINES FOR EXCEPTIONAL APPLICATION

### (Document B)

For applicants who have a master's degree or higher in a related field and:

- 1) have exceptional professional qualifications,
- 2) have practiced expressive arts therapy for a minimum of (10) years, and
- 3) have demonstrated a clear contribution to the field and are highly respected by their peers in the profession and can demonstrate this by publications, videos, brochures, testimonies, awards, etc.

If applicants meet the criteria above but do not meet the current requirements for professional registration, they may apply under the **EXCEPTIONAL CATEGORY**. Applications may be submitted to the Co-Chairs of the Professional Standards Committee for consideration. The Co-Chairs will assign the application to two committee members who will then review the applicant's qualifications. Once the application has been evaluated by no less than two reviewers, their collective findings will be presented to the full Professional Standards Committee for approval.

To be considered by IEATA's Professional Standards Committee Reviewers, the "Exceptional" applicant must submit the following:

- 1) Letter of intent and why the applicant feels that they should be considered under the Exceptional Category,
- 2) Application for REAT registration, completed as fully as possible,
- 3) Documentation that verifies applicant's prior 10 years+ experience in the field of expressive arts therapy, that clearly represents a multi-modal approach
- 4) Curriculum Vitae, illustrating evidence of conference presentations, teaching positions and/or presentations, published works, etc., showing evidence of experience relevant to expressive arts therapy and professional standing
- 5) Examples of authorship of publications, videos and/or audio works relevant to expressive arts therapy that illustrate the applicant's professional standing
- 6) **Minimum of five (5) letters of reference**, with at least **two** of them being past supervisors.

The Professional Standards Committee will then assess the documentation and application supplied. Based upon its recommendations to the full committee, other materials, interviews and/or a video case presentation may be required. Because the documentation is lengthy and the Professional Standards Committee is made up of volunteers, the application review process under this option will take a minimum of four months.