



Level III: Certification Training

Information Sheet

Continuing Education: 22 CE Hours

Level III: Certification Practicum Training

Course Description

During the Practicum, workshop participants, together with Drs. Julie and John Gottman, examine videotaped cases of couples brought in by workshop colleagues. Dr. Gottman uses these videotaped cases as learning and teaching tools to deepen understanding of when and how to use various Gottman Method approaches and interventions, and how to break destructive patterns and replace them with meaningful interactions.

Dr. Julie Gottman leads discussions, demonstrates techniques and provides guidance in developing a roadmap for clinical decisions. Participants have the chance to practice and refine their use of Gottman Method Couples Therapy through participation in role-plays, demonstrations and discussions in a small group setting. Following Certification Practicum, Senior Certified Gottman Therapists provide participants with a minimum of eight individual or twelve group phone consultations over a period of up to two years.

Video Participation: Case Discussion in Certification Practicum

- Participants are highly encouraged to bring a **standard DVD** or **VHS tape** of a couple from their practice to share for teaching and role-play experience. Therapists will not be critiqued on their work. **We strongly recommend you bring a case to share.**
- **Note:** Unfortunately, we are not able to support the following formats: Mini DVD's, "High-8," alternate or non-standard international formats, such as "Super-8."
- This is for Case Discussion within the context of Certification Practicum ONLY and is not related to the videotaped interventions submitted for final Certification Review.

Level III Application Process

You have two options for continued training with The Gottman Institute:

Non-Certification Track- NEW-For those who are interested in additional training but may not be ready to enter Consultation or become Certified at this time. Attendees have up to 2 years to apply to the Consultation and final video review leading to Certification.

Standard Certification & Consultation Track-for those interested in Consultation and the Certification track leading to designation as a Certified Gottman Therapist. See page 4 for more information on Consultation.

For both tracks:

1. Please complete the attached **Certification Training Application** along with the course payment form.
2. For your personal reference and assessment, a **Certification Training Application Checklist** has also been included; you do not need to return this form to The Gottman Institute as it is only for personal use.
3. If you have questions about the application or the training process, please contact Ann Scranton, Professional Development Program Specialist, at 888-523-9042 x2, or via email at anns@gottman.com.

Who Should Apply to the Certification Track?

Many clinicians wonder what characteristics the most successful Certification Practicum (Certification Track) applicants possess. After our first decade of training therapists throughout the world, The Gottman Institute has identified several key indicators that may be helpful in determining your personal readiness.

In addition to strong core therapeutic skills, ideal candidates typically possess the following:

- Certification-Track Candidates: Three years postgraduate experience is the minimum and the most successful candidates typically have five years+ post-graduate experience directly providing clinical outpatient couples therapy and treatment
- Experience working within diverse and/or international environments to include work with minority populations
- Experience working with adult populations in specialty areas that include one or more of the following: domestic violence, substance abuse and recovery, trauma and post-traumatic stress disorders and affective disorders
- Strong clinical experience directly providing individual therapy within outpatient setting is desirable though not required
- Ability to consistently manage a diverse caseload of couples within their current practice
- An adequate number of couples in one's practice to meaningfully integrate the Gottman Method material into ongoing work with couples

Application, Course Fees & Payment Information

- The fee for the Level III: Certification Training is \$1,500.00 for the July 2009 training. Installment options are available. Payment by check or credit card (MasterCard/Visa/American Express) along with your completed Payment Form.
- You may submit your application materials anytime prior to July 10, 2009 (for the July 2009 training). Applications are reviewed on a first-come, first-served basis and class size is limited.
- **CANCELLATION POLICY:** Prior to three weeks of the Certification Training program, you can receive a full refund minus a \$100 administrative fee. Within three weeks of the program, only workshop credit will be issued.
- Following the Certification Practicum, participants who choose to continue in the Certification Track will work with Senior Gottman Therapists in phone consultation sessions. Participants pay their consultants directly for these sessions (refer to Consultation Section on page 4).

Continuing Education Information: 22 CE Hours

- **NBCC:** "The Gottman Institute is an NBCC Approved Continuing Education Provider (ACEP™) and may offer NBCC approved clock hours for events that meet NBCC requirements. The ACEP™ solely is responsible for all aspects of the program."
- **APA:** "The Gottman Institute is approved by the American Psychological Association to sponsor continuing education for psychologists. The Gottman Institute maintains responsibility for this program and its content."
- **CBBS:** "Course meets the qualifications for 22 hours of continuing education credit for MFTs and/or LCSWs as required by the California Board of Behavioral Sciences." (Certification Practicum)
- **ASWB:** "R. Cassidy Seminars, provider #1082, is approved as a provider for social work continuing education by the Association of Social Work Boards (ASWB) www.aswb.org, phone: 1-800-225-6880, through the Approved Continuing Education (ACE) program. R. Cassidy Seminars maintains responsibility for the program."

Prerequisites

Certification Track:

- Master's or doctoral degree in a mental health-related field
- Licensure or certification in a mental health-related field
- 100 hours couples therapy
- Minimum 3 years (5 preferred) post-graduate experience
- Completed *Level I: Marital Therapy: A Research Based Approach* Live Training or DVD Homestudy
- Completed *Level II: Assessment, Intervention & Co-Morbidities* Live Training or DVD Homestudy (formerly titled *Advanced Study Training*)

Non-Certification Track:

- Master's or doctoral degree OR current enrollment in a graduate program within a mental health-related field
- 30 hours couples therapy
- Completed *Level I: Marital Therapy: A Research Based Approach* Live Training or DVD Homestudy
- Completed *Level II: Assessment, Intervention & Co-Morbidities* Live Training or DVD Homestudy (formerly titled *Advanced Study Training*)

Application Requirements

We must receive all of the following documents for your application to be complete:

- Certification Practicum Application form (attached)
- Payment form (attached)
- Curriculum vitae or resume
- *Certification Track Only:* Copy of license or certification documentation within your state or country of practice
- *Certification Track Only:* Current Proof of Liability Insurance for \$1 million/\$3 million minimum
- *Certification Track Only:* Two letters of recommendation from clinicians who know your psychotherapeutic work

IMPORTANT-Courtesy Holds & Timelines

We are pleased to offer a courtesy hold on a registration space for you upon receipt of completed application. Due to the potential for limited class size, **we strongly recommend that you submit the application no less than 6-9 weeks in advance of the Level III Training.**

NOTE: Letters of recommendation may be sent **separately** to: Beverly Collins Parnell, M.S., Professional Development Director, 3511 NE 45th St, Ste 2, Seattle, WA 98105 OR Fax (206) 260-8592 OR email: Beverly@gottman.com.

Level IV: Consultation & Final Video Review for Certification

To become a Certified Gottman Therapist, you must complete Consultation and pass the final video review after attending the Level III Workshop. Clinicians in the Consultation Track will be matched individually or in small groups (no more than four people) with a Gottman Senior Faculty member. Your Consultant will be assigned to you shortly after the Level III workshop.

Consultation usually takes place over the phone. A minimum of eight hours of individual consultation or twelve hours of group consultation will be needed to complete certification requirements, but the Consultant may determine that more consultation is necessary in order for a Consultee to become certified. Certification candidates will pay their Consultant directly either \$140 per 50-minute session for individual consultation; \$100 per 1-½ hour group session if in a group of 3; or \$80 per 1-½ hour group session if in a group of 4. Candidates are expected to pay for telephone calls involved in the consultation. The Gottman Institute confers with candidates regarding how to set up conference phone calls for group consultation.

There are no continuing education credits available for consultation.

More information about the Consultation and Certification process will be provided during the Level III workshop.

Level III: Certification Training

Application Checklist

This form is for your personal use and information ONLY. Please do NOT turn in this form with your application packet.

Please be sure that you've completed the following prior to sending us your application packet:

Certification Track:

- Completed *Level II: Assessment, Intervention & Co-Morbidities* Live Training or DVD Homestudy (formerly titled *Advanced Study Training*)
(must be completed by 6/22/2009)
- Payment Form
- Statement of Intent
- Resume/CV
- State Certification
- Malpractice Insurance (1M/3M)
- Letter of Recommendation #1
- Letter of Recommendation #2

(letters of reference may be sent separately)

Non-Certification Track:

- Completed *Level II: Assessment, Intervention & Co-Morbidities* Live Training or DVD Homestudy (formerly titled *Advanced Study Training*)
(must be completed by 6/22/2009)
- Payment Form
- Statement of Intent
- Resume/CV

Level III: Certification Training

Application Form



Applicant Contact Information

Name			
Street Address			
City, State, ZIP Code			
Home Phone		Work Phone	
E-Mail Address			

Clinical Practicum Prerequisites

Please check that you meet each of the following criteria (choose one track):

— CERTIFICATION TRACK	— NON-CERTIFICATION TRACK
<input type="checkbox"/> Master's or doctoral degree in a mental health-related field	<input type="checkbox"/> Master's or doctoral degree OR current enrollment in a graduate program within a mental health-related field
<input type="checkbox"/> Licensure or certification in a mental health-related field	<input type="checkbox"/> 30 hours couples therapy
<input type="checkbox"/> Completed <i>Level I: Marital Therapy: A Research Based Approach</i> Live Training or DVD Homestudy	<input type="checkbox"/> Completed <i>Level I: Marital Therapy: A Research-Based Approach</i> Live Training or DVD Homestudy
<input type="checkbox"/> Completed <i>Level II: Assessment, Intervention & Co-Morbidities</i> Live Training or DVD Homestudy (formerly titled <i>Advanced Study Training</i>)	<input type="checkbox"/> Completed <i>Level II: Assessment, Intervention & Co-Morbidities</i> Live Training or DVD Homestudy (formerly titled <i>Advanced Study Training</i>)
<input type="checkbox"/> Minimum 3 years (5 preferred) post-graduate experience	
<input type="checkbox"/> 100 hours couples therapy	

Clinical Outpatient Experience

Tell us in which areas you have clinical outpatient experience and expertise

<input type="checkbox"/> Trauma/PTSD	<input type="checkbox"/> Domestic Violence
<input type="checkbox"/> Substance Abuse	<input type="checkbox"/> Affective disorders
<input type="checkbox"/> Other: _____	

Statement of Intent

Briefly describe why you wish to attend the Level III: Certification Practicum Training.

Describe Your Couples Psychotherapy & Couples Therapy Experience

Summarize your professional experience including specialized skills and qualifications you have acquired; describe your view of the professional rewards and challenges of couples treatment; provide an overview of your professional goals for next 5 years and plans for using Gottman Method.

Describe Your Therapeutic Orientation

Summarize your therapeutic orientation and how you plan to utilize Gottman Method.

Describe A Professional Challenge

Summarize a difficult case, your clinical approach and the outcome. What would you do differently? Which of your professional strengths does this case illustrate?

Professional Liability Questionnaire

1. Have you ever been convicted of a crime in any state or country? Yes No
2. Have you ever had any licensing board or professional ethics body require you to surrender your license or found you guilty of a violation of ethics codes, professional misconduct, unprofessional conduct, incompetence or negligence in any state or country? Yes No
3. Are there any complaints, charges or investigations pending against you by any licensing board or professional ethics body for violation of ethics codes, professional misconduct, unprofessional conduct, incompetence or negligence in any state, province, or country? Yes No
4. Have you ever had any insurance company or Lloyd's decline, cancel, refuse to renew or accept only on special terms any professional liability insurance? Yes No
5. Has any professional liability claim or suit ever been made against you? Yes No
6. Are there any circumstances of which you are aware that may result in any professional liability claim or suit being made against you? Yes No
7. Are you engaged in any sexual misconduct with any of your current or former patients or any current or former patient's spouse or any person with a direct relationship to the patient or former patient? Yes No

If you answered "Yes" to any of the above questions, please include an explanation on a separate page.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as an applicant, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed) _____

Signature _____

Date _____

The Gottman Institute Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual orientation, age, or physical ability.

ADA accommodations will be made in accordance with the law. If you require ADA accommodation, please indicate your needs at time of registration. TGI cannot ensure the availability of appropriate accommodations without prior notification.

Thank you for completing this application form.

The Gottman Institute-Registration Form

LEVEL III: Certification Practicum

Presented by Dr. Julie Schwartz Gottman

July 15-18, 2009

Please return this payment form along with your completed application materials. If you have any questions about the Certification Training Program, contact Ann Scranton at (888) 523-9042x2 or (206) 523-9042x2.

Name _____ Degree/Lic.Type _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Fee: ___ \$1,500.00

Payment Options - *Please DO NOT SEND CASH*

You may pay the program tuition in full or in two installments, payable to The Gottman Institute, by bankcard or personal/business checks. **If you are registering after July 1, please call or email us to make installment payment arrangements.**

If paying installments by check, please enclose two checks – one to be deposited at the time of registration and one post dated to **no later than July 1, 2009**. Checks will be deposited on those dates.

If paying installments by bankcard, the first installment is due at the time of registration. The second installment payment will be charged 30 days after registration.

Full Tuition Payment Option

I have enclosed one check or authorize my credit card to be charged for **\$1,500**.

Installment Payment Option

I am making two equal payments totaling **\$1,500** (\$750.00 each payment).

___ I am paying with enclosed check(s) or ___ I am paying with (circle one): **Visa MasterCard AmEx**

Card Number _____ Exp. Date _____

CSV (3 digit number on back of your credit card) _____

Name as it appears on the card (*please print*) _____

Signature _____ Date _____

Return this completed form to: The Gottman Institute, 3511 NE 45th St, Suite 2, Seattle, WA 98105
or Via FAX: (206) 260-8592. If you have questions about Gottman Method Clinical Training,
please contact Beverly Collins Parnell at (888) 523-9042 ext. 4

Office Use Only:

OP Number: _____ OP Date: _____ Initials: _____ Other: _____