NPSI Control Case Suitability / Candidate Readiness Form*

Date of Consultation:___________________

Dear Progression Committee:

I have met with the following candidate, __________________________, and have reviewed their initial report and clinical material as prerequisite for requesting to being Control Case number 1, 2, 3 (circle one).

My relationship to the candidate is (check all applicable):

Training Analyst evaluating case ______

Proposed Supervisor ______

Previous Supervisor for control case number 1 or 2 (circle one) ______

After meeting with the candidate my assessment as to the candidate’s readiness and suitability of the patient as a control case is as follows (please attach additional comments if needed):

Training Analyst’s Signature________________________Date__________

Candidate’s Signature______________________________Date__________

* This form completed by two training analyst’s should be submitted as a packet to the Chair of Progression along with a copy of the Letter of Intent, copy of the Initial Report plus a process recording of at least one session, and Report of Supervision Commencing. Upon written approval by the Progression Committee the case can proceed and the hours of analysis and supervision counted towards credit for clinical training. The official start date of an approved control case will be on the date when the aforementioned packet is submitted to the Chair of Progression.