

**FORM 9**

**FINAL CASE REPORT READER ASSESSMENT**

Name of Candidate \_\_\_\_\_

Name of Advisor \_\_\_\_\_

Address of Advisor \_\_\_\_\_

Date Received by Reader \_\_\_\_\_

Per the Clinical and Teaching Member Requirements and Procedures, the following criteria for the Case Report must be met:

- 1. The Case Report includes a thorough presentation of a sandplay process.
- 2. The writing demonstrates a thorough understanding of sandplay process, sandplay theory, and symbolic process.
- 3. The writer demonstrates professional competence.
- 1. The writer demonstrates clinical competence including an appreciation of co-transference.

\_\_\_\_\_ **Acceptance.** I think this report meets the above guidelines.

\_\_\_\_\_ **Conditional.** I have some questions I would like to have clarified by the applicant before I can make my evaluation.

\_\_\_\_\_ **Rejection.** I think membership in ISST is not appropriate at this time. I recommend:

Reader \_\_\_\_\_ Date \_\_\_\_\_

The Reader is asked to return this sheet to the **Advisor, the STA Office, but not the Applicant.** The Reader is asked to keep the Case Report safely until asked to return it to the Applicant.

See Chapter Four and Appendix page A17/1-4 and A18/1-1 for more information.