



Personal Sessions and Case Consultations

Name: _____

Phone Number: _____

Please mail or email your completed log sheets to: PO Box 24039 Bullfrog, Guelph, ON CANADA N1E 6V8 | info@equusoma.com

Date		Service Type (check one)	Duration (# of hours)	Provider Name	Provider Signature
1		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
2		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
3		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
4		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
5		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
6		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
7		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
8		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
9		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
10		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
11		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
12		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
13		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
14		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
15		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
16		<input type="checkbox"/> Personal Session <input type="checkbox"/> Case Consultation			
Level 1 Requirements			Level 2 Requirements		
10 personal sessions of SE™ (10 hours): Without equines: With any EQUUSOMA®-approved personal session provider <u>or</u> any <u>advanced</u> -level personal session provider in the Somatic Experiencing® International credit provider list.		6 case consultations (6 hours): With any EQUUSOMA®-approved consultation provider. Must focus on the integration of EQUUSOMA® in your scope of practice (or relationship with your equine if you are not currently working in your scope).	5 personal sessions of SE™ (5 hours): <ul style="list-style-type: none"> Without equines: With any EQUUSOMA®-approved personal session provider or any <u>advanced</u>-level personal session provider with Somatic Experiencing® International. With equines: See student policy manual (October 2022) for instructions. 		6 case consultations (6 hours): With any EQUUSOMA®-approved consultation provider. Must focus on the integration of EQUUSOMA® in your scope of practice (or relationship with your equine if you are not currently working in your scope).

See the Student Policy Manual (October 2022) for more details. A summary can be found at: <https://equusoma.com/students/approved-credit-hours>.

Students may complete more than the required number based on their needs.