EMDR Consultation Agreement

Romina M. Schnelle, MA, LMFT 123169
EMDRIA Approved Consultant | Existnow Therapy

This agreement describes individual EMDR consultation for certification or continued professional development. We will identify your learning goals, review examples of your work, and evaluate progress through collaborative feedback and deliberate practice. Consultation supports clinical competence; payment or completion of hours does not guarantee a recommendation or credential.

1 Parties and consultation plan

Consultee name: _____
License or registration, number, and jurisdiction: _____
Email: _____ Phone: _____
Consultant email: _____ Phone: _____

Purpose (select): [ ] EMDRIA certification [ ] Ongoing professional development
Start date: _____ Expected review or end date: _____
Format: Individual consultation by secure, real-time video unless otherwise agreed.
Session length: 60 minutes. Suggested frequency: two hours per month.
Agreed frequency: _____ Platform: _____

Initial learning goals and areas of focus: _____
_____
_____

We will review goals, progress, and the consultation plan at least every five consultation hours and when needs change. No more than two hours of consultation will be conducted within a single day, consistent with the supplied 2026 standards. Sessions will allow time to apply feedback between meetings.

2 Scope and professional responsibility

I provide consultation as an EMDRIA Approved Consultant, not as a Consultant in Training. Consultation is distinct from clinical supervision, psychotherapy, basic training, and emergency services. You retain responsibility for client care, risk assessment, treatment decisions, informed consent, documentation, and compliance with your license or registration and applicable professional obligations. Consultation does not replace required supervision for associate or other prelicensed clinicians.

I provide education, reflective questions, recommendations, and evaluation within my competence. You use independent professional judgment when considering recommendations. I remain responsible for my own professional conduct. We will discuss specialty consultation or referral when your needs exceed my expertise. Basic training consultation, group consultation, and consultation of consultation for CITs require a separate written agreement or addendum before beginning.

3 Eligibility and certification consultation hours

Before certification consultation begins, provide the final completion certificate for your EMDRIA Approved EMDR Basic Training, including completion of all required training components. A workshop attendance or continuing education certificate alone is insufficient. We will clarify any uncertainty with the training provider or EMDRIA before designating sessions as certification consultation. Hours received before completion of an eligible basic training do not count toward certification.

EMDRIA currently requires at least 20 hours of EMDR-focused consultation for certification, including at least 10 individual hours. As an Approved Consultant, I may provide all 20 hours; the former CIT limit of 15 hours no longer applies to my services. Certification also has additional eligibility and application requirements. You are responsible for reviewing the current requirements and submitting your application; EMDRIA makes the final credentialing decision.

Only actual time in eligible, synchronous consultation is documented as consultation time. Payment, missed sessions, cancellation fees, administrative email, and independent study do not create consultation credit. Late arrival, early departure, or interruptions reduce documented time to the time actually provided. General professional development sessions are not automatically designated as certification hours.

You may work with other consultants, including those with relevant specialties. Please disclose other consultation used toward the same credential so we can coordinate goals and avoid duplication. Each consultant verifies only the hours they provided. Hours previously received from me while I was a CIT retain their original status and remain subject to the rules applicable to those hours.

4 Preparation and examples of clinical work

Come prepared with specific questions, an update on prior feedback, and clinical material related to your goals. Submit the provided Case Conceptualization Form at least 24 hours before each appointment using the agreed secure method. Actively use EMDR with clients within your scope and bring examples that allow evaluation of your work across relevant phases and clinical presentations.

Video recording or live observation is strongly preferred because it allows direct review of clinical skills. My practice expectation is at least one behavioral work sample for every five hours of certification consultation, using different clients and phases when feasible. When recording or observation is prohibited or not feasible, we will agree in advance on alternatives, such as audio, near-verbatim transcripts, detailed structured session summaries, or case presentations with reflective discussion. Client care and consent take priority over obtaining a recording.

Obtain all required client permissions and comply with agency policies before recording or sharing material. Remove identifying information from written materials. Do not email identifiable client information or recordings through ordinary email. Arrange secure viewing or transfer before sharing. You are responsible for ensuring that you are authorized to disclose the material.

5 Consultant commitments and learning environment

I will provide practical, EMDR-focused guidance, stay current with relevant EMDR research and standards, and identify the limits of my knowledge. I will support a respectful learning environment that attends to culture, language, identity, power, disability, and accessibility. You may request learning accommodations, ask questions, disagree respectfully, and give feedback about the consultation relationship. We will address misunderstandings and concerns without retaliation.

6 Competency assessment and recommendations

We will use observable work samples, case conceptualization, reflective discussion, and your application of feedback to assess progress. Areas of review include the Adaptive Information Processing model; case conceptualization and treatment planning; the eight phases and three-pronged approach; readiness, stabilization, safety, and closure; clinical decision-making and appropriate adaptations; ethical practice; and cultural responsiveness. Evaluation considers your developmental stage, practice context, and agreed learning goals.

I will provide feedback during sessions, identify strengths and specific areas for improvement, and summarize progress at the agreed review points. You agree to reflect on feedback, practice targeted skills between meetings, and discuss the results. When concerns arise, we will establish a written development plan with specific skills, practice activities, work samples, and a review date. Additional training or consultation may be recommended. Any additional paid services require agreement before scheduling.

Before I consider a certification recommendation, my practice requires a minimum of five consultation hours with me and sufficient work samples to evaluate competence. At least one video or live observation is preferred; an agreed alternative under Section 4 may be used when needed. These are my practice requirements, not separate EMDRIA minimums. Meeting them does not guarantee an endorsement, and more observation or practice may be necessary.

A recommendation is based on demonstrated readiness rather than attendance alone. If I cannot recommend you at a particular time, I will explain the reasons and the next steps. I will still provide accurate verification of completed consultation time, identifying individual hours, dates, and relevant limits of my evaluation. Verification of attendance and a recommendation are separate. On request at conclusion, we will agree on a reasonable delivery date for documentation.

The CIT Verification, Evaluation and Recommendation (VER) form described in the supplied standards is for the Approved Consultant pathway. It is not automatically substituted for the certification recommendation process. If we later enter a CIT consultation relationship, a separate plan will address CIT eligibility, consultation competencies, work samples, and submission of the online CIT VER form when a final recommendation is made.

7 Confidentiality and consultation records

Both parties will protect client and consultee information and use private settings for remote meetings. I will maintain accurate records of dates, actual consultation time, purpose, goals, material reviewed, feedback, progress, and evaluations. Consultation records will be stored securely and retained for five years after our work concludes, or longer when required by applicable obligations. You should maintain your own hour log and retain the documentation needed for your application.

Consultation confidentiality is subject to applicable law and ethical obligations, including legally required reports, valid legal process, and disclosures necessary to address serious safety concerns where authorized or required. Only necessary information will be disclosed. Confidentiality in consultation is not a promise of psychotherapy privilege. Routine sharing with an outside consultant or peer group requires prior discussion and any necessary permissions.

Consultation sessions will not be routinely recorded. Recording, AI transcription, or other automated capture by either party requires separate prior written consent describing the purpose, access, storage, retention, and deletion plan, together with any required client permissions. This agreement does not authorize such recording or external sharing. Client work recordings are reviewed only through an agreed secure process; storage and deletion arrangements must be agreed before transfer.

8 Fees payment and attendance

The individual consultation fee is $95 per 60-minute session, payable before the appointment. Credit and debit cards are accepted through Stripe. Sessions may be purchased individually. Any package, discount, group fee, or additional service requires separate written terms. Rates may be reviewed annually; changes will be communicated in writing before they apply to future appointments.

Cancel or reschedule at least 24 hours before the appointment to avoid the full session charge. A full refund is available for a prepaid appointment cancelled at least 24 hours in advance. Completed services, cancellations with less than 24 hours notice, and no-shows are nonrefundable. If you arrive more than five minutes late, the appointment is treated as a missed session and is nonrefundable. Any exception must be expressly agreed. No consultation time is credited for a missed appointment.

If I cancel, you may choose a refund or rescheduling. If I must end a session early because of illness or an emergency, I will refund the unused portion and discuss rescheduling. Only the consultation time actually provided will be documented. A connection problem will be addressed by an agreed secure alternative or rescheduling; only time actually spent in consultation is credited.

9 Communication concerns and ending services

Use the contact method listed in Section 1 for scheduling and administrative questions. We will agree on a secure channel for case material. Between-session messages are not monitored continuously and do not provide emergency coverage or consultation credit. Bring clinical questions to scheduled consultation unless we have separately arranged additional services. Use your clinical supervisor, agency procedures, and local emergency resources for urgent client needs.

Either party may end consultation by written notice. Where feasible, we will hold a closing discussion, summarize progress and remaining learning needs, and discuss referrals. I may pause or end consultation for unmet eligibility requirements, nonpayment, repeated missed appointments, confidentiality breaches, conduct that prevents productive consultation, or needs beyond my competence. Termination does not erase completed hours or create entitlement to a recommendation. Unused prepaid services will be refunded, less charges properly due under this agreement.

Please raise concerns directly with me when comfortable. I will review concerns and discuss a response and possible resolution. You may seek outside guidance or use EMDRIA and applicable licensing board complaint processes at any time; this agreement does not require informal resolution first or limit those rights. No mandatory arbitration or waiver of complaint rights is created by this agreement.

10 Agreement and signatures

California law governs this agreement to the extent applicable, without displacing mandatory laws or professional obligations in another relevant jurisdiction. Changes to scope, fees, recording permissions, or other material terms require written agreement by both parties. We will review any credentialing rule changes that affect our work before continuing under revised expectations.

By signing, we confirm that we have reviewed this agreement, had an opportunity to ask questions, and agree to the consultation plan and terms. The consultee understands the distinction between consultation and supervision, the training verification requirement, the evaluation process, confidentiality limits, and the absence of a guaranteed recommendation or credential.

Consultee signature: _____ Date: _____
Printed name: _____
Consultant signature: _____ Date: _____
Romina M. Schnelle, MA, LMFT 123169 | EMDRIA Approved Consultant

Source framework: EMDR International Association, EMDRIA Approved Consultant Standards (2026), particularly Practice Expectations, Developing Contracts, Documentation and Reports, and Evaluation and Recommendation. Current certification guidance: www.emdria.org/emdr-training/certification-faqs/ and www.emdria.org/emdr-training/emdr-certification-2/. This independently drafted practice agreement is not an EMDRIA-issued form. Credential requirements should be rechecked when applying.