



BRAINSPOTTING RECERTIFICATION

RECERTIFICATION SESSION DOCUMENTATION FORM

THIS FORM IS FOR PRACTITIONER USE ONLY

PRACTITIONER'S NAME:

CONSULTANT'S NAME:

Please list details of a session using one of the following frames and submit this document with your consultant's recertification report. Please alter the recipient's name or put initials for confidentiality purposes.

Frame Set-up used: Outside Window

Date:

Anonymous Brainspotting Recipient Identifier:

Presenting issue:

Briefly describe what motivated you to choose this frame set-up:

Briefly describe the recipient's process:

Briefly describe your experience of the process (attunement, limbic countertransference, tail of the comet, etc.):

Frame Set-up used: Inside Window

Date:

Anonymous Brainspotting Recipient Identifier:

Presenting issue:

Briefly describe what motivated you to choose this frame set-up:

Briefly describe the recipient's process:

Briefly describe your experience of the process (attunement, limbic countertransference, tail of the comet, etc.):

Frame Set-up used: Gazespotting

Date:

Anonymous Brainspotting Recipient Identifier:

Presenting issue:

Briefly describe what motivated you to choose this frame set-up:

Briefly describe the recipient's process:

Briefly describe your experience of the process (attunement, limbic countertransference, tail of the comet, etc.):

Brainspotting

Frame Set-up used: Body Resource Model

Date:

Anonymous Brainspotting Recipient Identifier:

Presenting issue:

Briefly describe what motivated you to choose this frame set-up:

Briefly describe the recipient's process:

Briefly describe your experience of the process (attunement, limbic countertransference, tail of the comet, etc.):

Frame Set-up used: Outside-Inside Window

Date:

Anonymous Brainspotting Recipient Identifier:

Presenting issue:

Briefly describe what motivated you to choose this frame set-up:

Briefly describe the recipient's process:

Briefly describe your experience of the process (attunement, limbic countertransference, tail of the comet, etc.):

Frame Set-up used: Rolling

Date:

Anonymous Brainspotting Recipient Identifier:

Presenting issue:

Briefly describe what motivated you to choose this frame set-up:

Briefly describe the recipient's process:

Briefly describe your experience of the process (attunement, limbic countertransference, tail of the comet, etc.):

Frame Set-up used: Z axis & Vergence

Date:

Anonymous Brainspotting Recipient Identifier:

Presenting issue:

Briefly describe what motivated you to choose this frame set-up:

Briefly describe the recipient's process:

Briefly describe your experience of the process (attunement, limbic countertransference, tail of the comet, etc.):

Brainspotting

Frame Set-up used: One Eye Brainspotting

Date:

Anonymous Brainspotting Recipient Identifier:

Presenting issue:

Briefly describe what motivated you to choose this frame set-up:

Briefly describe the recipient's process:

Briefly describe your experience of the process (attunement, limbic countertransference, tail of the comet, etc.):

Frame Set-up used: Advanced Resource Model

Date:

Anonymous Brainspotting Recipient Identifier:

Presenting issue:

Briefly describe what motivated you to choose this frame set-up:

Briefly describe the recipient's process:

Briefly describe your experience of the process (attunement, limbic countertransference, tail of the comet, etc.):

Practitioner Signature: _____

Date: