



## CHECK LIST

**Make sure you send ALL materials according to the instructions below and keep a copy of documents for your records.**

**YOUR APPLICATION WILL NOT BE FORWARDED TO THE REGISTRY COMMITTEE IF IT IS NOT COMPLETE!**

**All applications must be submitted through the MemberClicks online system. An incomplete application will be returned to you for correction and submission in the next round.**

**Please upload the following documents in the online application system (note that documents requiring signatures will need to be printed, signed, and uploaded).**

Basic Requirements:

- \_\_\_\_\_ Theatrical resume.
- \_\_\_\_\_ Documentation of Professional Experience Hours, including certificates for any advanced clinical trainings.
- \_\_\_\_\_ Signed NADTA Code of Ethical Principles.
- \_\_\_\_\_ If alternative training. Copy of completed Alternative Training Contract signed by your Board Certified Trainer.
- \_\_\_\_\_ A short essay (1 page) describing the nature of your drama/theatre experience.
- \_\_\_\_\_ A short essay (1-2 pages) on your drama therapy orientation with brief details about your workplace (population, type(s) or services offered by workplace).

**Send by postal mail or electronically to the NADTA office:**

- \_\_\_\_\_ One copy of the graduate transcripts must be sent directly to the NADTA from the institution **unopened** and **sealed** in their envelopes or sent electronically. Electronic transcripts are preferred. Sending an undergraduate transcript is optional unless you want to count your undergraduate theatre degree toward the 500 theatre hours, then it is required.

**Payments:**

- \_\_\_\_\_ \$100 non-refundable application fee which can be paid online
- \_\_\_\_\_ Applicants are required to be a member of NADTA for the 12 months immediately preceding the RDT application. If you have not been a member for the past year, please contact the NADTA office for assistance with this.

**Letters of Recommendation:** You will need three letters of recommendation. At the end of the online application you will be required to add each of your references names and email addresses. Your references will then receive an email to upload the recommendation letter on your behalf. Please send them the form ahead of time and make them aware of this. **Letters of recommendation need to be sent by the people who have written them:**

- \_\_\_\_\_ A letter of recommendation from a **supervisor**.
- \_\_\_\_\_ A letter of recommendation from the **director of your training program** or (if alternative training) your **Board Certified Trainer**.
- \_\_\_\_\_ A letter of recommendation from **another trainer, supervisor, or colleague**, who can speak to your drama therapy work.

# APPLICATION

## Registered Drama Therapist

|  |       |     |               |
|--|-------|-----|---------------|
| NAME – (Please list your name as you would like it printed on your Registry Certificate) |       |     | DATE OF BIRTH |
| LIST ANY ADDITIONAL NAMES THAT MAY BE ON YOUR APPLICATION MATERIALS OR ACADEMIC RECORDS  |       |     |               |
| HOME ADDRESS   |       |     | HOME PHONE    |
| CITY   | STATE | ZIP | EMAIL         |
| COMPANY  |       |     | WORK PHONE    |
| WORK ADDRESS   |       |     | FAX           |
| CITY   | STATE | ZIP | EMAIL         |

### REGISTRATION PROCEDURAL BRIEF

#### I. EDUCATIONAL REQUIREMENTS:

##### 1. Masters or Doctoral Degree

Select  
One (X)

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | M.A. or Ph.D. in Drama Therapy from NADTA approved program                                |
| <input type="checkbox"/> | M.A. or Ph.D. in related field AND completion of Alternative Track Education requirements |

**2. Drama Therapy Internship(s):** A minimum 300 direct client contact hours plus at least 30 hours of supervision plus additional indirect service hours to total 800 hours (See additional requirements listed inside application).

**3. Transcripts:** One (1) copy of UNOPENED sealed official transcripts from graduate programs sent directly to the NADTA office from the institution the degree was obtained. If you are an Alternative Training Student also include one (1) copy of your completed Alternative Training Contract signed by your BCT. An undergraduate transcript is optional but is required if an undergraduate degree in theatre will be counted as the 500 theatre hours.

#### II. BASIC ELIGIBILITY REQUIREMENTS:

- 500 hours drama/theatre experience.
- 1,500 Professional Hours as a drama therapist. (See additional requirements listed inside)
- A 1-2 page essay on your drama therapy orientation with brief details about your workplace (population, type(s) or services offered by workplace).
- One(1)page essay describing the nature of your drama/theatre experience.
- Membership in NADTA for at least one year prior to application (proof required).

#### III. ADDITIONAL INFORMATION

- Submit one (1) copy of the letter of recommendation form to each of the 3 references with the top portion filled out. The reference will be asked to upload their recommendation on behalf of the applicant or sent directly to the office at office@nadta.org.
- Signed Code of Ethical Principles.
- \$100.00 non-refundable application fee in U.S. currency. Make payable to **NADTA**.

### ACKNOWLEDGEMENT

I hereby affirm that all information in this application is accurate.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**APPLICATION**  
Registered Drama Therapist

| SECTION 1:               |          | EDUCATION REQUIREMENTS  |                    |                    |
|--------------------------|----------|---|--------------------|--------------------|
| <b>Select<br/>A or B</b> | <b>x</b> | <p><b>NADTA approved M.A. program in Drama Therapy</b><br/>Master's or Doctoral Degree in Drama Therapy from an NADTA-approved university.<br/>An official transcript that documents completion of degree must be included with this application.</p>   |                    |                    |
| <b>A</b>                 |          | NAME OF SCHOOL  | DEGREE             | DATE OF GRADUATION |
|                          |          |   |                    |                    |
| <b>B</b>                 |          | <p><b>Alternative Training Program</b><br/>Master's or Doctoral Degree in related field to Drama Therapy and Certificate of Completion of Alternative Training Education Track (see below).<br/>An official transcript that documents completion of degree must be included with this application.</p>        |                    |                    |
|                          |          | NAME OF SCHOOL  | DATE OF GRADUATION |                    |
|                          |          |   |                    |                    |
|                          |          | MAJOR   | DEGREE             |                    |
|                          |          |   |                    |                    |
|                          |          | <p><b>Certificate of Completion of Alternative Training Education Track</b><br/>An official final transcript of the Alternative Training Contract with Certificate of Completion (final page of the contract) must be signed by the student's Board Certified Trainer and included with this application.</p> |                    |                    |
|                          |          | NAME OF TRAINER / MENTOR  | DATE OF COMPLETION |                    |
|                          |          |   |                    |                    |

For Guidance Only

**SECTION 1:**

**EDUCATION REQUIREMENTS - CONTINUED.**

**Drama Therapy Internship**

Drama therapy internship must be a minimum of 800 hours. These hours include direct client contact hours, supervision hours, and indirect services such as preparing for sessions, writing notes, reviewing professional materials, and required meetings. The internship must take place in an accredited institution or licensed agency. You must have worked with at least two (2) different populations (e.g. children, physically disabled, adolescent, older adults). Your internship may take place in one or more settings, but two (2) population exposures are required as a minimum.

Internship hours may not precede introductory drama therapy course work for alternative training students as well as students in M.A. approved programs. To receive your RDT, **at least 300 hours of the internship must be direct client contact with at least 30 hours of supervision** by a registered drama therapist, registered creative arts therapist or Master's level credentialed mental health or education professional. "Direct client contact" is defined as the following: group therapy, couples/family therapy, individual therapy, direct assessment, programming, outreach, formal

consultation to other professionals or organizations, and milieu therapy. Because drama therapy requires more than adequate knowledge of group psychotherapy, a minimum of half of the hours of the direct client contact time (150 hours) must be counted for group therapy. All 300 hours can be group work. Up to 100 hours of Playback Theater can count toward hours if approved by your school or your BCT. Participation in a Playback Theatre troupe can be used towards these hours, provided supervision includes how Playback Theatre can be used or is being used in a drama therapy context.

If you have completed (2) two or more internships, please make additional copies of this page and fill out a separate form for each internship.

**REQUIRED**

AGENCY/INSTITUTION

ADDRESS

CITY STATE ZIP

SUPERVISOR'S NAME DEGREE/CREDENTIAL

ADDRESS

CITY STATE ZIP

PHONE FAX EMAIL

**INTERNSHIP HOURS SUMMARY**

DATE BEGAN DATE ENDED

NATURE OF SERVICE POPULATION(S)

**Detail of Direct Client Service Hours**

**HOURS**

1. Group Drama Therapy (Can include participation in, co-leadership, or leadership of drama therapy, creative arts therapy groups, psychodynamic, psycho-educational or community groups using action techniques, or milieu-centered activities like trips, special events, rehearsals, etc.)

2. Couples/Family Drama Therapy

3. Individual Drama Therapy

**TOTAL DIRECT SERVICE HOURS**

**TOTAL INDIRECT SERVICES HOURS**

**TOTAL SUPERVISION HOURS**

(Should be in a ratio of 1 supervision hour to every 10 direct client contact hours by a registered drama therapist, registered creative arts therapist, or Master's level credentialed mental health or education professional.)

**GRAND TOTAL HOURS**

# APPLICATION

## Registered Drama Therapist

### SECTION 2: BASIC ELIGIBILITY REQUIREMENTS

**DRAMA/THEATRE EXPERIENCE:** An in-depth knowledge of drama, theatre, and/or performance makes drama therapists unique from other creative arts therapists. You are required to have at least 500 clock hours of experience in drama/theatre. These experiences may include acting, directing, and/or production work studied or performed in a college, community, or professional setting. One three credit college course is counted at 135 clock hours (including homework and rehearsal hours).

Please list the setting where you have had the majority of your theatre experiences or training:

(If you have more than three (3) sites as primary settings, please copy this page and fill out a separate form for additional settings.)

|  |       |     |  |       |
|--|-------|-----|--|-------|
| SETTING  |       |     | DATES OF EXPERIENCE OR TRAINING RECEIVED |       |
|  |       |     | MONTH                                    | MONTH |
| ADDRESS  |       |     | TO                                       | YEAR  |
|  |       |     |  | YEAR  |
| CITY   | STATE | ZIP | TOTAL HOURS                              |       |
|  |       |     |  |       |
| SETTING  |       |     | DATES OF EXPERIENCE OR TRAINING RECEIVED |       |
|  |       |     | MONTH                                    | MONTH |
| ADDRESS  |       |     | TO                                       | YEAR  |
|  |       |     |  | YEAR  |
| CITY   | STATE | ZIP | TOTAL HOURS                              |       |
|  |       |     |  |       |
| SETTING  |       |     | DATES OF EXPERIENCE OR TRAINING RECEIVED |       |
|  |       |     | MONTH                                    | MONTH |
| ADDRESS  |       |     | TO                                       | YEAR  |
|  |       |     |  | YEAR  |
| CITY   | STATE | ZIP | TOTAL HOURS                              |       |
|  |       |     |  |       |
| NAME OF PRIMARY INDIVIDUAL FAMILIAR WITH YOUR DRAMA/THEATRE EXPERIENCES WHO WE COULD CONTACT |       |     |  |       |
| NAME / TITLE   |       |     | PHONE                                    |       |
|  |       |     |  |       |
| ADDRESS  |       |     | FAX                                      |       |
|  |       |     |  |       |
| CITY   | STATE | ZIP | EMAIL                                    |       |
|  |       |     |  |       |

**REQUIRED:** On separate page, include the following:

1. In one page write a short essay that describes the nature of your drama/theatre experiences.
2. Attach theatrical resume.

# APPLICATION

## Registered Drama Therapist

### SECTION 2: BASIC ELIGIBILITY REQUIREMENTS - CONTINUED

**PROFESSIONAL EXPERIENCE AS A DRAMA THERAPIST:** 1,500 hours of professional experience as a drama therapist is required to become a Registered Drama Therapist. You may start to accrue these 1,500 hours before you graduate from your M.A. program in drama therapy, or before you complete all the requirements of Alternative Training if you have completed all your core coursework and your internship is complete. **Professional hours are NOT an extension of Internship hours.** They are hours accrued in a professional capacity in a paid setting. You **MUST** wait one year after your M.A. degree is completed to apply for your RDT. (If you graduated in May or June the year before you can apply for registry for the next year's March 15th deadline.) If you already had your M.A. before beginning alternative training, you do not need to wait one year if all other requirements have been met.

Professional Experience Hours can be accrued in the following ways:

- A minimum of 1000 and up to 1500 professional experience hours in a setting working as a paid drama therapist. Hours must be supervised by a Registered Drama Therapist, credentialed creative arts therapist or a credentialed master's-level mental health or special education professional. You must have one hour of supervision for every 10 hours of client contact time. **At least 50% of your minimum 1000 hours will be direct client contact hours** (see internship section for definition of "direct client contact"). If you have more than one (1) work site, please copy this page and fill out a separate form for each site \*Note: If you have acquired experience in a position that was unpaid, please attach a letter from a representative of the agency to document that:
  - 1) explains that the position was recognized by the agency as professional and
  - 2) provides a brief narrative justification for non-paid status.
- Up to 500 hours of advanced clinical training. This may consist of conference hours, classes, or workshops outside of the AT contract or all NADTA approved graduate program required coursework. **Certificates of completion must be attached.** You may begin to accrue professional advanced clinical training hours after you have begun your education in an NADTA approved program or Alternative Training, as long as the training is not part of your academic program or AT training.
- Up to 100 hours of personal psychotherapy and/or creative arts therapy within the last five years.
- Up to 100 hours from participation in Playback Theater. Participation in a Playback Theatre troupe can be used towards these hours, provided supervision includes how Playback Theatre can be used or is being used in a drama therapy context.

|  |            |                             |  |  |  |
|--|------------|-----------------------------|--|--|--|
| AGENCY / INSTITUTION                             |            |                             | PHONE  |  |  |
| ADDRESS  |            |                             | FAX  |  |  |
| CITY   | STATE      | ZIP                         | EMAIL  |  |  |
| DATES OF PAID EXPERIENCE                         |            | TOTAL INDIRECT CLIENT HOURS | TOTAL SUPERVISION HOURS<br>(1 hour supervision per 10 hours of client contact) |  |  |
| MONTH  | MONTH      |                             |  |  |  |
| YEAR   | TO<br>YEAR | TOTAL DIRECT CLIENT HOURS   | TOTAL WORK HOURS<br>(Only 40 hours per week may be counted.)                   |  |  |
| SUPERVISOR NAME & DEGREE/CREDENTIAL              |            |                             | PHONE  |  |  |
| ADDRESS  |            |                             | FAX  |  |  |
| CITY   | STATE      | ZIP                         | EMAIL  |  |  |
| NATURE OF SERVICE PROVIDED BY AGENCY/INSTITUTION |            | POPULATION (S) SERVED       |  |  |  |

**REQUIRED: On a separate page, attach a brief essay (1-2 pages) of the following\*:**

Please write a one-two page essay describing your employment as a drama therapist in terms of your theoretical model(s) and intervention strategies. Describe your work in relation to the following NADTA definition: Drama therapy is the intentional use of drama/theater processes to achieve the therapeutic goal of symptom relief, emotional and physical integration, and personal growth. Let us know what you do, with whom and why. Please be specific.

\* You do not have to write an essay for each job – just ONE ESSAY!

### SUPERVISOR ACKNOWLEDGEMENT

I verify that the hours and supervision hours stated above are accurate.

\_\_\_\_\_  
SUPERVISOR SIGNATURE

\_\_\_\_\_  
DATE

**SECTION 2: PROFESSIONAL EXPERIENCE HOURS - CONTINUED**

**ADVANCED CLINICAL TRAINING**

Up to 500 hours of training in drama therapy or fields related to drama therapy may count towards the required 1,500 professional experience hours. This may include participation in conferences, workshops, Postdoctoral programs, and classes not taken as part of the AT contract or Graduate program. Please submit, along with this form, a certificate of completion for each advanced clinical training or letter describing training (this may include a syllabus for classes taken).

(If you have completed two (2) or more trainings, please copy this page and fill out a separate form for each.)

|   |           |                                  |  |                                      |  |
|---|-----------|----------------------------------|--|--------------------------------------|--|
| TYPE OF TRAINING                          |           |                                  |  |                                      |  |
|   |           |                                  |  |                                      |  |
| NAME OF AGENCY / INSTITUTION              |           |                                  |  | PHONE                                |  |
|   |           |                                  |  |                                      |  |
| ADDRESS                                   |           |                                  |  | FAX                                  |  |
|   |           |                                  |  |                                      |  |
| CITY                                      |           | STATE                            | ZIP  | EMAIL                                |  |
|   |           |                                  |  |                                      |  |
| DATES OF TRAINING                         |           | TOTAL HOURS CLAIMED AT THIS SITE |  | POPULATION(S) SERVED (IF APPLICABLE) |  |
| MONTH                                     | <b>TO</b> | MONTH                            |  |                                      |  |
|   |           |                                  |  |                                      |  |
| YEAR                                      |           | YEAR                             | HOURS PER WEEK                                   | WEEKS PER YEAR                       |  |
|   |           |                                  |  |                                      |  |
| SUPERVISOR NAME & DEGREE/CREDENTIAL       |           |                                  |  | PHONE                                |  |
|   |           |                                  |  |                                      |  |
| ADDRESS                                   |           |                                  |  | FAX                                  |  |
|   |           |                                  |  |                                      |  |
| CITY                                      |           | STATE                            | ZIP  | EMAIL                                |  |
|   |           |                                  |  |                                      |  |
| WORKED PERFORMED AND/OR TRAINING RECEIVED |           |                                  | NATURE OF SERVICE PROVIDED BY AGENCY/INSTITUTION |                                      |  |
|   |           |                                  |  |                                      |  |

**Attach necessary documentation for training** (for example, certificate of completion or letter describing training).

**SECTION 3: ADDITIONAL INFORMATION**

**Disclaimer**

It is important to note that to become a Registered Drama Therapist does not automatically mean that you can become licensed as a drama therapist or psychotherapist in the state in which you live. It is your responsibility to check on your state licensing regulations, including preferred master degrees, required course work and internship hours. NADTA works to track therapy legislation requirements, as well as to protect drama therapists in pending licensing issues. Unfortunately, licensing varies state to state, and each state's psychotherapy and counseling laws follows different regulations. At this time, there is no state licensing available in the United States for the title "Drama Therapist." To find out more information about the state licensing, please contact the Government Affairs Chair of the NADTA Board of Directors at the NADTA office, or your individual state mental health licensing board.

**RDT RECOMMENDATION FORM**  
**Part One**

The applicant listed below has applied to the North American Drama Therapy Association for registration as a drama therapist. You have been identified as a reference. To help us understand the nature of the applicant's training and job responsibilities, please respond, as fully as you can, to the following questions. Please be sure the information is legible: typewritten responses are preferred.

You will receive a notification once the applicant has completed their application, asking you to upload the recommendation letter. If you are having trouble uploading the recommendation, please contact [office@nadta.org](mailto:office@nadta.org).

**RDT application deadlines are March 15 and August 15 of each year.**

Thank you,  
 The NADTA Registry Committee

**TO BE COMPLETED BY APPLICANT**

|  |       |         |         |
|--|-------|---------|---------|
| APPLICANT'S NAME                         |       |         |         |
|  |       |         |         |
| ADDRESS                                  |       |         |         |
|  |       |         |         |
| CITY                                     | STATE | COUNTRY | ZIPCODE |
|  |       |         |         |
| HOME PHONE                               | FAX   | EMAIL   |         |
|  |       |         |         |
| PERIOD OF TRAINING / WORK WITH APPLICANT |       |         |         |
|  |       |         |         |

**TO BE COMPLETED BY REFERENCE**

|  |       |         |         |
|--|-------|---------|---------|
| REFERENCE' NAME AND CREDENTIALS          |       | TITLE   |         |
|  |       |         |         |
| AGENCY / SCHOOL / INSTITUTE              |       |         |         |
|  |       |         |         |
| ADDRESS                                  |       |         |         |
|  |       |         |         |
| CITY                                     | STATE | COUNTRY | ZIPCODE |
|  |       |         |         |
| WORK PHONE                               | FAX   | EMAIL   |         |
|  |       |         |         |
| PERIOD OF TRAINING / WORK WITH APPLICANT |       |         |         |
|  |       |         |         |



**APPLICATION**  
Registered Drama Therapist

**RDT RECOMMENDATION FORM**  
**Part Two**

---

1. Please describe as completely as possible the nature of the training/work completed by the applicant with you:

2. Please comment on the applicant's competencies in the area of drama therapy, including strengths, weaknesses, and evidence of theoretical orientation as it informs clinical judgment, ability to communicate with other staff, and ability to perform assigned duties.

3. Do you recommend this applicant for RDT status?  Yes  No  With reservations (please specify)

\_\_\_\_\_  
Signature (not needed if email from professional email account)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**North American Drama Therapy Association**  
3739 National Drive, Suite 202  
Raleigh, NC 27612

Phone: 919-573-5441 T  
oll Free: 888-416-7167  
Email: office@nadta.org

**APPLICATION**  
Registered Drama Therapist

**RDT RECOMMENDATION FORM**  
**Part One**

The applicant listed below has applied to the North American Drama Therapy Association for registration as a drama therapist. You have been identified as a reference. To help us understand the nature of the applicant's training and job responsibilities, please respond, as fully as you can, to the following questions. Please be sure the information is legible: typewritten responses are preferred.

You will receive a notification once the applicant has completed their application, asking you to upload the recommendation letter. If you are having trouble uploading the recommendation, please contact office@nadta.org.

**RDT application deadlines are March 15 and August 15 of each year.**

Thank you,  
The NADTA Registry Committee

**TO BE COMPLETED BY APPLICANT**

|  |       |         |         |
|--|-------|---------|---------|
| APPLICANT'S NAME                         |       |         |         |
|  |       |         |         |
| ADDRESS                                  |       |         |         |
|  |       |         |         |
| CITY                                     | STATE | COUNTRY | ZIPCODE |
|  |       |         |         |
| HOME PHONE                               | FAX   | EMAIL   |         |
|  |       |         |         |
| PERIOD OF TRAINING / WORK WITH APPLICANT |       |         |         |
|  |       |         |         |

**TO BE COMPLETED BY REFERENCE**

|  |       |         |         |
|--|-------|---------|---------|
| REFERENCE NAME AND CREDENTIALS           |       |         | TITLE   |
|  |       |         |         |
| AGENCY / SCHOOL / INSTITUTE              |       |         |         |
|  |       |         |         |
| ADDRESS                                  |       |         |         |
|  |       |         |         |
| CITY                                     | STATE | COUNTRY | ZIPCODE |
|  |       |         |         |
| WORK PHONE                               | FAX   | EMAIL   |         |
|  |       |         |         |
| PERIOD OF TRAINING / WORK WITH APPLICANT |       |         |         |
|  |       |         |         |

**North American Drama Therapy Association**  
3739 National Drive, Suite 202  
Raleigh, NC 27612

Phone: 919-573-5441 T  
oll Free: 888-416-7167  
Email: office@nadta.org

**APPLICATION**  
Registered Drama Therapist

**RDT RECOMMENDATION FORM**  
**Part Two**

---

1. Please describe as completely as possible the nature of the training/work completed by the applicant with you:

2. Please comment on the applicant's competencies in the area of drama therapy, including strengths, weaknesses, and evidence of theoretical orientation as it informs clinical judgment, ability to communicate with other staff and ability to perform assigned duties.

3. Do you recommend this applicant for RDT status?  Yes  No  With reservations (please specify)

\_\_\_\_\_  
Signature (not needed if email from professional email account)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**APPLICATION**  
Registered Drama Therapist

**RDT RECOMMENDATION FORM**  
**Part One**

The applicant listed below has applied to the North American Drama Therapy Association for registration as a drama therapist. You have been identified as a reference. To help us understand the nature of the applicant's training and job responsibilities, please respond, as fully as you can, to the following questions. Please be sure the information is legible: typewritten responses are preferred.

You will receive a notification once the applicant has completed their application, asking you to upload the recommendation letter. If you are having trouble uploading the recommendation, please contact [office@nadta.org](mailto:office@nadta.org).

**RDT application deadlines are March 15 and August 15 of each year.**

Thank you,  
The NADTA Registry Committee

**TO BE COMPLETED BY APPLICANT**

|  |       |         |         |
|--|-------|---------|---------|
| APPLICANT'S NAME                         |       |         |         |
|  |       |         |         |
| ADDRESS                                  |       |         |         |
|  |       |         |         |
| CITY                                     | STATE | COUNTRY | ZIPCODE |
|  |       |         |         |
| HOME PHONE                               | FAX   | EMAIL   |         |
|  |       |         |         |
| PERIOD OF TRAINING / WORK WITH APPLICANT |       |         |         |
|  |       |         |         |

**TO BE COMPLETED BY REFERENCE**

|  |       |         |         |
|--|-------|---------|---------|
| REFERENCE' NAME AND CREDENTIALS          |       |         | TITLE   |
|  |       |         |         |
| AGENCY / SCHOOL / INSTITUTE              |       |         |         |
|  |       |         |         |
| ADDRESS                                  |       |         |         |
|  |       |         |         |
| CITY                                     | STATE | COUNTRY | ZIPCODE |
|  |       |         |         |
| WORK PHONE                               | FAX   | EMAIL   |         |
|  |       |         |         |
| PERIOD OF TRAINING / WORK WITH APPLICANT |       |         |         |
|  |       |         |         |

**APPLICATION**  
Registered Drama Therapist

**RDT RECOMMENDATION FORM**  
Part Two

---

1. Please describe as completely as possible the nature of the training/work completed by the applicant with you:

2. Please comment on the applicant's competencies in the area of drama therapy, including strengths, weaknesses, and evidence of theoretical orientation as it informs clinical judgment, ability to communicate with other staff and ability to perform assigned duties.

3. Do you recommend this applicant for RDT status?  Yes  No  With reservations (please specify)

\_\_\_\_\_  
Signature (not needed if email from professional email account)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**NADTA CODE OF ETHICAL PRINCIPLES**

# APPLICATION

## Registered Drama Therapist

Ethical practices in drama therapy are concerned with resolving issues related to practices and responsibilities in treatment, supervision, and research. Such standards are especially difficult to apply in new fields in the helping professions, where there may not be public awareness of responsible professional behavior and practices. The following are intended to serve as guidelines, which can protect the public and maintain the highest standards of objectivity and competence of drama therapists.

### 1) PROFESSIONAL RESPONSIBILITY

Drama Therapists are responsible for providing professional services respectful of the legal and civil rights of others, adhere to the NADTA professional and ethical guidelines, and safeguard the dignity and rights of their clients, students, colleagues, and research participants.

- a) A drama therapist accepts responsibility for his/her actions in clinical work, teaching, supervision, and/or research and complies with ethical and legal standards of behavior.
- b) A drama therapist does not knowingly make public statements that are false, deceptive, or fraudulent concerning his/her research, practice, or other work activities or of those persons or organizations with which he/ she is affiliated.
- c) A drama therapist is responsible to report any conduct by another drama therapist that has substantially harmed or is likely to substantially harm a person or organization, and is not appropriate for informal resolution.
- d) A drama therapist is obligated to cooperate in any ethical investigations, or proceedings required by the NADTA.

### 2) COMPETENCE

Drama Therapists limit their practice and services to those which are in their professional competence by virtue of their education and professional experience and consistent with any requirements for state/provincial and national/international credentials. They refer to other professionals when the therapeutic needs of clients exceed their level of competence.

- a) A drama therapist accurately represents his/her training, techniques and skills, and does not present information that is misleading or inaccurate.
- b) A drama therapist uses only initials to which he/she is legally entitled, for example: degree (s) from an accredited institution and/or registration or certification from professional organizations.
- c) A drama therapist takes adequate steps, through supervision or personal psychotherapy to prevent personal circumstances from interfering with the quality of service offered to others.
- d) A drama therapist respects and gives appropriate credit to colleagues in citing their work, research, or findings, in publications or presentations; does not misrepresent or misquote another's work.
- e) A drama therapist refrains from initiating any drama therapy activity if there is a substantial likelihood that personal circumstances will prevent the drama therapist from performing his/her work-related activities in a competent manner.
- f) A drama therapist who becomes aware of personal circumstances that may interfere with his/her ability to engage in drama therapy sessions, must take appropriate measures, such as obtaining professional consultation or assistance, and determine whether he/ she should limit, suspend, or terminate work-related duties.
- g) A drama therapist is informed of new clinical developments related to their practice, continues to develop their professional skills, and maintain their credentials through continuing education.

### 3) CONFIDENTIALITY

Drama Therapists have a primary responsibility to maintain confidentiality with respect to the therapeutic relationship and all

information and creative works resulting from clinical sessions and the therapeutic relationship. However, exceptions to confidentiality are only when disclosure is required by specific legal requirements, to prevent serious and imminent danger to client or others, and to protect a child, older adult, or other vulnerable person (s).

- a) A drama therapist maintains confidentiality, whether obtained in the course of practice, supervision, teaching, or research.
- b) A drama therapist obtains informed consent when releasing information that is specifically requested or appropriate.
- c) A drama therapist maintains informed consent when giving information about a client through publications or written or verbal presentations.
- d) A drama therapist takes strict precautions to ensure clients' records are stored in a secure location and ensures records and client information are available to authorized personnel only.

### 4) INFORMED CONSENT

Drama Therapists take responsibility to keep clients, students, and research participants informed at all times during therapy, supervision or research projects. This includes, but is not limited to, goals, techniques and methodologies, procedures, limitations, potential risks, and benefits.

- a) A drama therapist obtains informed consent of the individual (s) or legal guardian (s) when conducting therapy, research, or providing assessment or consulting services. A drama therapist uses language on the consent form that is understandable to the person (s). Where limitations to understanding are apparent such as cognitive deficits or with young children, the drama therapist secures informed consent from a legal guardian.
- b) A drama therapist informs the client (s) at the initiation of therapy about the purpose, goals, techniques, limitations, duration, and any other pertinent information, so that clients can make an in- formed consent to participate in therapy.
- c) A drama therapist gains permission from the individual (s), or their legal representatives, to whom he/she provides services before recording voices or images.
- d) A drama therapist ensures his/her clients understand the implication of any assessment, fee arrangements, record keeping, therapeutic plan, and limits to confidentiality.
- e) A drama therapist informs clients, students, and research participants that they have the right to refuse any recommended services and are advised of the consequences of such a refusal.

### 5) PROFESSIONAL RELATIONSHIPS

Drama Therapists have a primary responsibility to respect and promote the welfare of their clients and to avoid any multiple relationships that could impair professional judgment or increase the risk of harm to clients.

*(Principle 5 continued on next page)*

### PRINCIPLE OF RELATIONSHIPS (Continued)

- a) A drama therapist does not engage in unfair discrimination based on age, gender, identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.

# APPLICATION

## Registered Drama Therapist

b) A drama therapist does not engage in sexual solicitation, physical advances, and/or verbal or nonverbal conduct that is sexual in nature, in connection with the drama therapist's activities.

c) A drama therapist does not engage in sexual relationships with clients, students, supervisees, interns or research participants.

d) A drama therapist refrains from entering into multiple relationships with clients. When multiple relationships are unavoidable, appropriate professional precautions are undertaken such as informed consent, supervision, consultation, and documentation, to ensure that judgment is not impaired.

### 6) PRINCIPLE OF TEACHING AND TRAINING

Drama Therapists who are responsible for drama therapy education and training adhere to current NADTA guidelines and standards with respect to their professional activities.

a) A drama therapist is knowledgeable regarding ethical aspects of the profession and makes students/supervisees aware of their responsibilities.

b) A drama therapist provides the proper training that meets the requirements for registration or other goals for which claims are made by the program.

c) A drama therapist ensures that a current and accurate description of program goals and objectives, course descriptions, curriculum and content, fee structures, and completion criteria that must be satisfied for completion of the program is provided to students.

d) A drama therapist gives accurate and objective information while teaching or training.

e) A drama therapist does not teach techniques/procedures for which he/she has not been trained.

f) A drama therapist does not teach techniques/procedures for which they have been trained to individuals who lack the prerequisite training or expertise.

g) A drama therapist defines and maintains appropriate professional, social, and ethical boundaries with students/supervisees.

h) A drama therapist offers appropriate feedback to students/supervisees and evaluates their performance on relevant and established program requirements throughout training.

i) A drama therapist responsible for a program/course that requires the students to have individual or group therapy, ensures that faculty who are or are likely to be responsible for evaluating students' academic performance do not themselves provide that therapy.

j) A drama therapist in education, training, or supervision relationships does not engage in clinical relationships as therapist/client with students and/or supervisees and instead refers them to another professional.

### 7) PRINCIPLE OF PHYSICAL CONTACT, ROLE PLAY, AND OTHER DRAMA THERAPY ACTIVITIES

Drama Therapists are responsible to practice drama therapy techniques in a manner that is professional, maintains professional boundaries, and is always based on the individual's therapeutic goals, safety, and best interest.

a) A drama therapist uses physical contact in the context of therapeutic goals with the individual's consent and in a safe and respectful manner.

b) A drama therapist never imposes or requires that an individual make physical contact, and at any point during a session a client can refrain from and refuse physical contact.

c) A drama therapist maintains professional boundaries in the context of the drama therapy session when physical contact, role play, and other drama therapy techniques are employed.

### 8) RESPONSIBILITY TO RESEARCH PARTICIPANTS

Drama Therapy researchers respect the dignity and protect the welfare of participants in research.

a) A drama therapist researcher is guided by laws, regulations, and professional standards governing the conduct of research.

b) A drama therapist researcher seeks the ethical advice of qualified professionals not directly involved in the investigation to determine the extent to which research participants may be compromised by participation in research. The researcher observes safeguards to protect the rights of research participants.

c) A drama therapist researcher requesting participants' involvement in research informs them of all aspects of the research that might reasonably be expected to influence willingness to participate. Investigators take all reasonable steps necessary to ensure that full and informed consent has been obtained from participants who are also receiving clinical services, have limited understanding and/or communication, or are minors.

d) A drama therapist researcher respects participants' freedom to decline participation in, or to withdraw from, a research study at any time with no negative consequences to their treatment.

e) A drama therapist researcher cannot use information about a research participant during the course of an investigation unless there is authorization previously obtained in writing. When there is a risk that others, including family members, may obtain access to such information, this risk, together with the plan for protecting confidentiality, is to be explained as part of the procedure for obtaining informed consent.

**RDТ certification is contingent upon signing this Code of Ethical Principles. This signed form is kept on file at the NADTA office.**

I, \_\_\_\_\_, have read and understand the foregoing NADTA Code of Ethical Principles and agree to abide by them.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

**Recommended timeline to complete the RDT application**

- 8-10 weeks: AT students should set up a meeting with their BCT to review internship hours and AT contract.
- 9 weeks: Double check that you are up to date on your NADTA membership.
- 6-8 weeks: request undergraduate and graduate transcripts be sent directly to the NADTA office from the institution you attended. Please note, that International students may need to request transcripts earlier.
  - Write Theatre/Drama Essay.
  - Review and complete Drama/Theatre experience hours. Remember if you have a degree in theatre, this is complete.
- 6 weeks: reach out to your references. Ask them if they will write your recommendation, provide them with the form (top portion completed by you) and instructions on the email request they will receive from the NADTA once you have completed the application.
- 4-5 weeks: Review Professional Experience Hours forms. Make sure supervisor signatures are on each Professional hours form that will be uploaded. Double checks ratios of direct hours to supervision (10:1).
- 3 weeks:
  - Complete Drama Therapy Orientation essay.
  - Read and sign the NADTA CODE OF ETHICAL PRINCIPLES.
  - Continue working on getting forms signed.
- 2 weeks: finish up anything that still needs to be completed. Follow up with your references reminding them that they will get an email from the NADTA when you apply. They can also email the office directly at [office@nadta.org](mailto:office@nadta.org) before you submit if they prefer to get it in early.
- 1 week: Pay the application fee and apply online. Aiming to apply early allows time for any unexpected circumstances that arise to be handled well before the deadline.