## Letter of confirmation for Schema Therapy Supervision

With this letter I state that … received a total of 12 hours of supervision) according to the ISST guidelines:

* … hours total of individual supervision

*Bei Gruppensupervision: in converted group sessions*

The supervision took place between …

|  |  |  |
| --- | --- | --- |
| **Patients Initials** | **Number of sessions** | **Diagnosis (es)**  **Or modes** |
|  |  |  |
|  |  |  |

*Ort, Datum*

…

Certified Schema Therapy Supervisor (ISST e.V.)