**Application to the UK Balint Society for Accreditation as a Balint Group Leader**

**NB: An applicant for leadership accreditation should be a member of the Balint Society. The membership application form is available on www.balint.co.uk/join-us/**

Applications are considered by the Balint Society Council at the next Council meeting after an application is received. Anyone not accepted for accreditation will be given reasons why, and advice about how they can gain further experience prior to a re-application.

The decision of the Balint Society Council is final.

If you would like advice about your accreditation pathway please contact jane.dammers@ncl.ac.uk or gearoid.fitzgerald@nhs.net

**Please return this form and any supporting documents (e.g. copies of attendance certificates) to the Balint Society Leadership team:** leadership@balint.co.uk

|  |  |
| --- | --- |
| Date of application: |  |
| Name |  |
| Address |  |
| Email |  |
| Phone |  |
| Profession and current job title |  |
| Professional experience relevant to Balint group work |  |

**Details of experience as a group member**: groups you have participated in over a period of time and/or ordinary Balint groups at Balint Society weekends. If you have had supervised observation of a group please also detail here.

|  |  |  |
| --- | --- | --- |
| Dates, place and frequency of group. Estimate number of sessions attended | Participants (professional roles, trainees etc) | Group leaders names. |
|  |  |  |
|  |  |  |
|  | Continue on next page…. |  |
|  |  |  |
|  |  |  |

**Details of training as a Balint Leader**

A. Leader or Co-leader experience in an on-going group

|  |  |  |  |
| --- | --- | --- | --- |
| Dates, place and frequency of group. Estimate number of groups you have led. | | Details of group (e.g. who participated) | Co-leader Name and whether accredited with Balint society. If not accredited please ask them to supply some details. |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

B. Balint Society Leadership Training at residential weekends or day workshops

|  |  |
| --- | --- |
| Dates and place | Group leaders |
|  |  |
|  |  |
|  |  |

C. Supervision experience – one to one or in a group –please detail

Any additional comments:

**References:** Please ask your supervisor(s) to complete the reference form (Supervisor reference for Balint Leader accreditation)available via the website page ‘Becoming an Accredited Balint Group Leader’.

Name of supervisor(s) and contact details:

Other references

Please give detail of referee(s) if you wish to enclose any other references relevant to this application

**If you are not able to supply a reference please say when and where you can be seen leading a group so that your skills can be assessed.**