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LETTER OF INTENT TO PURSUE ET/P®

Date: _____

Name: _____

Membership Number: _____

Email Address: _____

I plan on completing the requirements that will qualify me to become a Professional Level Educational Therapist (ET/P®).

I understand that to qualify I must:

- Be an Associate member in good standing and maintain my membership throughout the supervision period.
- Have my Masters Degree approved by the Membership Committee.
- Complete the Application Packet including:
 - Application form
 - Documentation verifying 1500 direct service hours over the last 10 years
 - Updated resume
- Successfully complete the supervision hours assigned by the supervision committee.

Signature

Please download this PDF and upload the completed letter, along with your completed application, Direct Service hours documentation, and current resume at <https://www.aetonline.org/professional-application>