EATA European Association of Transactional Analysis

## **TEW Staff Evaluation Form (part 2)**

Name:

Date:

**Location of TEW:** 

Personal style: Strengths:

Learning needs:

Requirements:

## **Staff Endorsements/Requirements:**

**ENDORSED** to initiate a PTSTA contract with EATA as: Teacher Supervisor

Area of specialization: Counselling \_\_\_\_ / Education \_\_\_\_ / Organization \_\_\_\_ / Psychotherapy \_\_\_\_

**REQUIREMENTS:** These requirements must be fulfilled before signing a TSTA/CTAT training contract. This paper and evidence of the completion must be added to the contract when sent to EATA for endorsement.

Signatures of the TEW Staff:

**TEW Coordinator:** 

**Participant:** 

Date:

**Requirements fulfilled:** 

**TSTA or Supervisor:** 

**Participant:** 

Date: