

Registered Somatic Dance Educator Application

RSDE Application

Step 1 of 9



Registered Somatic Dance Educator Application

Thank you for applying to become a Professional Member of ISMETA! We are a global collaborative of individuals and organizations advancing the profession of Somatic Movement Education and Therapy. As a professional association, we support high standards of practice and maintain a registry of qualified practitioners.

All applicants must demonstrate that they abide by the values and curricula that are articulated in ISMETA's Scope and Standards of Practice, and Code of Ethics found in the [Registered Somatic Dance Educator Requirements](#).

This application can be used for the 250-hour credential of Registered Somatic Dance Educator (RSDE).

To complete this application, you'll need:

- Copies of certificates from training programs you have completed.
 - If you trained long ago and no longer have a certificate, you may provide a statement of completion from the training program.
- Two letters of recommendation: a letter of recommendation from a mentor or colleague and a letter of recommendation from a client/student who has experienced your Somatic Movement work to be submitted by the person who wrote it. **These are not required for current ASMPs, RSME/Ts, or MSME/Ts.**
- A Personal Statement. This is part of the application that asks, "Why are you interested in joining ISMETA?"
- To arrange payment of the \$75 application fee with info@ismeta.org. If you are a current member, please pay the \$20 application fee by logging into the [Member Portal](#) and completing the form under the orange drop-down menu labeled "RSDE APPLICATION FORM".

Your application will be reviewed by our Professional Standards Committee. Please note that this review process typically takes between two to three months. If the committee requires any additional information or documentation from you during this time, we will contact you directly.

Letters of Recommendation

We require two letters of recommendation: one letter from a mentor or colleague and another letter from a client/student who has experienced your Somatic Movement work. The person who wrote the letter must be the one to submit it. As the applicant, please contact your two letter writers and request they send their letters directly to our office at info@ismeta.org with the subject line "Letter of Recommendation - YOUR NAME HERE".

Be sure to follow up with both recommenders to ensure their letters are submitted.

Member Credential	Membership Fee
Application Fee	\$75
Professional Member Fee (RSDE)	\$120
Two Year Professional Member Fee (RSDE)	\$200
Dual Registration Fee (with other ISMETA credentials: ASMP, RSME/T, MSME/T)	+\$65/year
Professional Member Plus Fee US & Canada (RSDE)	\$235
	\$135 annual fee to ISMETA and a 98.37

Professional Member Plus Fee UK, EEA & South Africa (RSDE)

GBP rate for the UK and 111. 37 EUR for the European Economic Area and South Africa fee to BGI

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Registered Somatic Dance Educator Application

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I am: **(Required)**

☒ Applying for ISMETA Membership

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Registered Somatic Dance Educator (RSDE-250)

Registered Somatic Dance Educator (RSDE-250) is designed for dance educators who integrate Somatic Movement into their pedagogy. To be eligible for this credential, applicants need to complete a minimum of 250 hours of training in Somatic Movement and have higher education training as dance educators in the forms of a BA, BFA, MFA, MEd, or equivalent; Doctorate in Dance Education or equivalent; or equivalent professional experience. (Please see application for details.)

I am applying for: (Required)

☒ RSDE-250

Applicant Name (Required)

Address (Required)

Phone (Required)

Website

Email (Required)

Why are you interested in joining ISMETA as an RSDE? (Required)

0 of 1800 max characters

Have you ever had a professional grievance filed against you? (Required)

☐ Yes

☐ No

Has your membership in any professional organization been revoked? (Required)

☐ Yes

☐ No

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Please provide a brief overview of your experience with Somatic Movement in dance education. Identify areas of specialty and/or concentrations, if any. **(Required)**

0 of 1800 max characters

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Registered Somatic Dance Educator Application

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CURRICULAR REQUIREMENTS

Please review ISMETA's Registered Somatic Dance Educator Requirements: [Here](#)

Please list and upload evidence of your educational experience in the categories below.

Please complete **all** fields for each Module of training you've completed:

A. Education with Evidence of Dance Pedagogy Coursework

- i) BA, BFA, MFA, MEd, or equivalent **OR**
- ii) Doctorate in Dance Education or equivalent **OR**
- iii) Equivalent professional teaching experience.

Please Note: Equivalent training/experience will be reviewed on a case-by-case basis only upon the receipt of a formal application.

Upload Diploma or Equivalent Professional Documentation **(Required)**

Choose File

No file chosen

Max. file size: 525 MB.

B. Somatic Movement Training

- i) 250 contact hour Somatic Movement Certificate from an [ISMETA Approved Training Program](#) or other comparable program **OR**
- ii) Transcript showing 250 contact hours of Somatic Movement coursework that meets the following criteria (1 semester credit = 15 contact hours; 1 quarter credit = 10 contact hours).

Note: ISMETA Registered Professional Members (ASMPs, RSME/Ts, MSME/Ts) do not need to complete this section. Instead state your ASMP, RSME/T, or MSME/T status below.

Upload Certificate of Completion (Required)

Choose File	No file chosen
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Max. file size: 525 MB.

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TRAINING REQUIREMENTS AND DOCUMENTATION

Please provide information about all the Somatic Movement training(s) you've completed. There is no required number of trainings, only the required total training hours for the RSDE credential (250+hours). **Please note:** The field to enter the total number of training hours you've completed appears at the bottom of this page.

If you trained long ago and no longer have a certificate, you may provide a statement of completion from the training program.

All material submitted should demonstrate proficiency and adherence to the RSDE Requirements.

Please review:

[RSDE Requirements](#)

Please provide information about the Professional Somatic Movement Training(s) you have completed below. Please complete all fields for each Module of training you've completed:

Training 1 - Program Name, Contact Name/Phone/Email/Website, and Dates of Training **(Required)**

Training 1 -Upload Certificate of Completion Here **(Required)**

Choose File

No file chosen

Max. file size: 525 MB.

Training 1 - Teaching Methods **(Required)**

- ☐ Movement
- ☐ Sensory Awareness
- ☐ Hands-on touch
- ☐ Discussion
- ☐ Assessment
- ☐ Theoretical Framework
- ☐ Other

Training 1 - Program Parts **(Required)**

- ☐ Part A - Overview/Foundations/Core Concepts
- ☐ Part B - Skill Development
- ☐ Part C - Internship/Practicum & Assessment
- ☐ Part D - Other

Training 1 - Key themes & principles **(Required)**

Training 1 - Training hours completed with percentages of in-person, live online, and pre-recorded content **(Required)**

Training 2 - Program Name, Contact Name/Phone/Email/Website, and Dates of Training

Training 3 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

Training 4 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

Training 5 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

Training 6 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

Training 7 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

Training 8 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

Training 9 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

Training 10 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

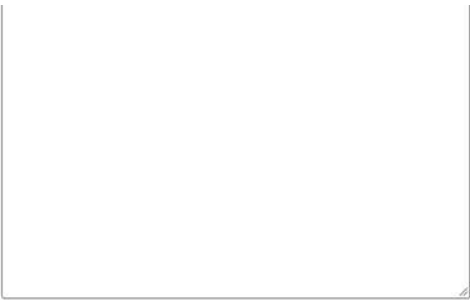
Training 11 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

Training 12 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

Training 13 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

Training 14 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training

Training 15 - Program Name, Contact Name/Phone/Email/Website,
and Dates of Training



Total Training Hours (Required)

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CORE CAPACITIES

All applicants must demonstrate that they abide by the values and curricula that are articulated in ISMETA's Scope and Standards of Practice, and Code of Ethics found in the [Registered Somatic Dance Educator Requirements](#).

Include here a detailed description of how your coursework specifically prepared you to meet the following core capacities for Somatic Dance Education. Please be concise using under 300 words for each prompt.

1. Describe the primary somatic movement principles of the system(s) trained in; *(Required)*

0 of 1800 max characters

2. Focus on body awareness in functional and expressive movement activities; *(Required)*

0 of 1800 max characters

3. Refine perceptual, kinesthetic, proprioceptive, and interoceptive sensitivity; *(Required)*

0 of 1800 max characters

4. Recognize habitual patterns of perceptual, postural, and movement interactions; *(Required)*

0 of 1800 max characters

5. Facilitate movement activities to support structural, functional, and expressive integration; (Required)

0 of 1800 max characters

6. Integrate experiential explorations of anatomical structures and physiological processes in dance education; (Required)

0 of 1800 max characters

7. Demonstrate skillful use of verbal and non-verbal communication; (Required)

0 of 1800 max characters

8. Demonstrate the process for engaging in ethical touch; (Required)

0 of 1800 max characters

9. Distinguish between activities that are inside and outside of ISMETA's RSDE Scope of Practice. (Required)

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10. Access and deepen the creative process through somatic awareness. (Required)

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POLICIES AND STANDARDS

ISMETA's membership requires a high standard of professional practice by all RSDEs.

All applicants must demonstrate that they abide by the values and curricula that are articulated in ISMETA's Scope and Standards of Practice, and Code of Ethics found in the Registered Somatic Dance Educator Requirements.

Please review these policies and standards and attest to your intended compliance with these standards and Logo Usage Agreement, by checking the boxes below.

RSDE Requirements: [Review Document](#)

Consent (Required)

☐ I have read and agree to comply with the RSDE Requirements.

Logo Usage Agreement:

We encourage Professional Members to use their credentials after their names wherever possible: when speaking, in print, and/or digitally on websites. The ISMETA Logo can be used in print or in digital applications. We ask that when using the logos, you hyperlink to the ISMETA homepage www.ISMETA.org. Please note these Logos are dated and will need to be updated yearly on your materials.

Along with the Logo, we ask that you include the following language wherever possible:

"As a Professional Member of the International Somatic Movement Education and Therapy Association, I meet the high [Standards of Practice and uphold the Code of Ethics](#). For more information visit www.ISMETA.org"

Consent (Required)

☐ I have read and agree to comply with the Logo Usage Agreement.

FINANCIAL REQUIREMENTS

Each individual applying for ISMETA Professional Membership agrees to pay a \$75 application fee. If you are a current member, please pay the \$20 application fee by logging into the [Member Portal](#) and completing the form under the orange drop-down menu labeled "RSDE APPLICATION FORM". Please note the review process only begins once payment and all supporting documents are received and may take up to two months to complete.

If you are accepted, your Professional Member fee will be collected at that time. If you are not accepted, you may still [become a Friend of ISMETA](#). Renewal notices are sent by email one month before your membership is due to expire. Professional Member fees are due once a year. Please make sure to complete your renewal before your membership lapses.

Consent (Required)

☐ I have read the text above and I agree to pay the application fee now.

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CONCLUSION

Did you use Artificial Intelligence (AI) to fill out this application? **(Required)**

- ☐ Yes
- ☐ No

Thank you for completing the ISMETA Registered Somatic Dance Educator Application. Please take a moment to follow up with your recommenders to ensure they have submitted your letters of recommendation. Once your application is complete, including both letters, we will begin the review process. Our goal is to complete the review within two months. As part of the review, we may request the following:

- a Zoom or phone call to clarify any questions the committee may have about your application
- video or written samples of your work

Signature

Tt ↺

Date **(Required)**

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DD

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Submit

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