

Exact Listening Certification Form

Both Applicant and Recommending Trainer should read the instructions for this form (located at <http://www.exactlistening.org/trainers/cert.htm>) before submitting it. Mail the completed form with the Applicant's \$20 Certification Fee to the address on the instructions page.

PLEASE PRINT

Name of Graduate Applying for Certification
Name of Association Member Recommending the Graduate

I hereby confirm that the above named Graduate has demonstrated proficiency in the Exact Listening exercise as both guide and student to the degree that he/she is fully capable of teaching individuals with no previous exposure to the exercise how to act as effective guides. I hereby recommend the Graduate for certification as an Exact Listening Trainer and membership in the Exact Listening Trainers Association.

Signature of Recommending Trainer:

Date:

Applicant Contact Information:

Street
City & State/Province
Zip/Postal Code & Country
Telephone Numbers (Specify Day, Night, Cell, Fax, Pager, etc.)
Email

I hereby confirm that I am a registered graduate of the Exact Listening Course and that I have read and agree to the Association Policies posted on the Association Web site at <http://www.exactlistening.org/trainers/policies.htm>.

Signature of Applicant:

Date: