



**APPLIED METAPSYCHOLOGY FACILITATOR CERTIFICATION/ACCREDITATION APPLICATION**

**INITIALS**

- \_\_\_\_\_ **A)** I hereby apply for certification as an Applied Metapsychology Facilitator.
- \_\_\_\_\_ **B)** I attest that I am a Certified/Accredited Advanced TIR & LSR Facilitator and I have successfully completed the Applied Metapsychology Facilitator 1-8 Workshops with (Trainer(s) \_\_\_\_\_) and I have completed an Internship covering the materials of these workshops with Trainer(s) \_\_\_\_\_ as covered below.
- \_\_\_\_\_ **C)** I have delivered a minimum of 50 successful hours of viewing sessions, on the techniques covered in these workshops, under the supervision of an AMI Certified/Accredited trainer/technical director and I have completed at least one viewer on all the sections of the Applied Metapsychology Viewing Curriculum through the Rightness Section. I hereby submit a session log documenting the 50 hours. The session log includes what was addressed in each session, length of each session, and the end result of each session.
- \_\_\_\_\_ **D)** I enclose standard-size audio or video tape(s) of a complete session, on techniques for this training level, for review by the AMI Certification/Accreditation Committee. I understand that certification is contingent on an audio or video tape, CD, or DVD being accepted by the Certification/Accreditation Committee. If the tape enclosed with this application is not accepted, I will be informed as to what is unacceptable and extended the opportunity to submit another tape. The maximum number of tapes that will be reviewed by the Certification/Accreditation Committee is three. If all three tapes are unacceptable, I will be required to start a new application process, which includes paying another application fee.
- \_\_\_\_\_ **E)** I enclose a signed copy of the client release from for the above recording(s).
- \_\_\_\_\_ **F)** I have personally completed all of the Applied Metapsychology Viewing Curriculum through the Rightness Section.
- \_\_\_\_\_ **G)** I have a current AMI/TIRA membership, or I am including my membership application along with this Certification/Accreditation application. I understand that I need to keep my membership current in order to maintain the validity of my Certification/Accreditation.
- \_\_\_\_\_ **H)** I understand that my Certificate/Accreditation is valid for a period of three years and that at the end of three years I will need to apply for Re-Certification/, documenting at least 21 hours of continuing education in the field. I understand that I will only need to renew my highest level of Certification/Accreditation.
- \_\_\_\_\_ **I)** I understand that if I allow my Certification/Accreditation to lapse for a year or more that further training and supervision will be needed to the satisfaction of my trainer for me to be able to Re-Certify/Accredit at this level, and that I will need to send a new recorded session with my application.
- \_\_\_\_\_ **J)** I enclose the certification application fee and also my membership application, if necessary.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Certification Application Fee: \$ 125.00**

Method of Payment    Visa    MasterCard    Check in US dollars, drawn on US bank, payable to AMI

Card Number: \_\_\_\_\_ CCV Code (last 3 digits on back of card) \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Card Holder's Signature: \_\_\_\_\_

\_\_\_\_\_ **APPLICANT—PLEASE SEND YOUR COMPLETED APPLICATION & FEE(S) TO YOUR TRAINER.**  
 \_\_\_\_\_ **TRAINER—Please send certification application and fee(s) to TIRA, along with your letter of recommendation for certification, when you have accepted Facilitator's session tape, and the completed certification application.**



5145 Pontiac Trail • Ann Arbor, MI 48105 • USA

Phone: 734-761-6268 Fax: 734-663-6861 Website: [www.AppliedMetapsychology.org](http://www.AppliedMetapsychology.org)

Email: [info@AppliedMetapsychology.org](mailto:info@AppliedMetapsychology.org)

## Release

I, \_\_\_\_\_, do hereby consent to and authorize the use of any audio or audio-visual tape recording of me made during the course of my counseling or viewing sessions solely for the purpose of furthering professional education, training, and competence. Accordingly, I hereby grant \_\_\_\_\_ (*facilitator*), Applied Metapsychology International, and their agents and professional associates the right to use all or parts of such recordings for the purpose of review for Certification/Accreditation of the aforementioned facilitator, and I release them and their colleagues from any and all actions, suits, and claims of damage based on their use of such recordings for these purposes. In providing this consent and release, I affirm that my only consideration and compensation is the personal satisfaction of knowing that I shall have contributed to enhancing the training and competence of helping professionals.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



5145 Pontiac Trail • Ann Arbor, MI 48105 • USA  
Phone: 734-761-6268 Fax: 734-663-6861 Website: [www.AppliedMetapsychology.org](http://www.AppliedMetapsychology.org)  
Email: [info@AppliedMetapsychology.org](mailto:info@AppliedMetapsychology.org)

### Written Exam for AMF Certification/Accreditation

1. Explain the difference between *unburdening* and *discovery* and when you would employ each.
2. What is the purpose of the Applied Metapsychology viewing Curriculum and why is it called a curriculum?
3. Why are the subjects addressed in the Curriculum arranged in the order that they are?
4. Explain the difference between a *method*, giving several examples, and a *technique*.



