



Healing Beyond Borders

Educating and Certifying the Healing Touch®

HEALING TOUCH INSTRUCTOR CERTIFICATION RENEWAL APPLICATION FORMS AND CRITERIA

Dear Certified Instructor,

Welcome to the Healing Beyond Borders Healing Touch Instructor Certification Renewal process. We are pleased that you have made the commitment to continue as a HTI Certified Healing Touch Instructor. We acknowledge and thank you for your work in spreading healing light through Healing Touch classes.

Each of the instructor certification criteria outlined in this application are meant to highlight specific knowledge, skills, and judgment related to professional and ethical teaching. Please use the specific instructions for each criterion as well as the general instructions regarding the application format and process.

We thank you for renewing your commitment to excellence as a HTI Certified Healing Touch Instructor.

In Light,

Healing Beyond Borders - Board of Directors
Healing Beyond Borders - Certification Board

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General Information and Directions

1. Instructors must have a current HTI Instructor Certification through Healing Beyond Borders to teach in the HTI Healing Touch Certificate Program. This certification is effective for five years. Renewal applications must be submitted to the office of Healing Beyond Borders at least 30 days before the expiration date of your current certification.
2. Renewal of your HTI Instructor Certification is based on the evidence presented on your application, the criteria described in this application packet, and the following:
 - a. Current, sustained membership in Healing Beyond Borders (**required**);
 - b. Ongoing Certification as a HTI Healing Touch Practitioner (**required**);
 - c. Record of continuing education regarding teaching; and
 - d. Teaching of Course 1 classes (at least five classes during the most recent certification period **required**)
3. Renewal extends your certification for five years, which allows students in your classes to progress in the HTI Healing Touch Certificate Program.
4. If your certification expires, you will no longer be able to use the title or credential of Certified Healing Touch Instructor (CHTI) in your correspondence or in representing Healing Touch to the greater community. If you wish to become a HTI Certified Healing Touch Instructor again following the expiration of your certification, certain requirements must be met. An explanation of these requirements can be obtained from the Healing Beyond Borders office.
5. Application Procedure
 - a. Submit a completed application form, application fee, and all required materials outlined in this application.
 - b. One copy of the completed application form must be submitted to the Healing Beyond Borders office either by postal mail, fax, or e-mail (scanned electronic signature required).
 - c. **Retain one complete copy of your application for your records.**
6. Non-refundable Application Fee: \$100.00 USD
Send your completed application form and all required materials:
Include a check or money order payable to Healing Beyond Borders, or Credit card - pay online (VISA, MC, DISCOVER, AMERICAN EXPRESS)
 - Go to www.HealingBeyondBorders.org
 - Click on OUR STORE, then CERTIFICATION FEES
 - Add to Cart CHTI Re-Certification Member Renewal Fee
 - Print receipt and attach a copy to your application
7. To ensure you have included everything, please use the application checklist on page 7 of this application. **Do not enclose the checklist with your application.**
8. Submit one copy of your application portfolio to:
Healing Beyond Borders – Certification
7112 W. Jefferson Ave., Suite 301
Lakewood, CO 80235
Phone 303 989-7982 Fax: 303 980-8683 Email: Certification@HealingBeyondBorders.org

Certification Renewal Instructions & Guidelines

Criterion 1: Statement of Self-Evaluation of Teaching

Write a statement providing a self-evaluation of your teaching, including teaching experiences, teaching expertise, and future goals as an instructor.

Action/Evidence Required

- Submit a typed personal statement, single-spaced on one page.

Criterion 2: Record of HTI Healing Touch Certificate Program Classes Taught

Demonstrate an established and current teaching record of all HTI Healing Touch Certificate Program classes taught, including at least five Course 1 (Foundations of Healing Touch) classes taught in the past five years.

Action/Evidence Required

Submit in typed form a list of all HTI Healing Touch Certificate Program classes taught over the past five years.

- Classes should be listed in chronological order and include the date, location, and course level.
- Course 1 (Foundations of Healing Touch) classes should be listed in **bold**.

Criterion 3: Documentation of Continuing Instructor Education

Documentation of continuing education to build a knowledge base about energy healing, networking and building community among instructors, updating instructor skills regarding changes to the HTI Healing Touch Certificate Program course of study, and maintaining standardization of the techniques taught.

Action/Evidence Required

Provide a summary statement of the information presented in the table on page 5. You must complete the activities in Column A **and** one of the two activities listed in Column B.

Continuing Instructor Education Activities	
Column A (Required)	Column B (Choose one of the two options below)
<p>List the dates and locations of at least three Instructor Meetings hosted annually either by Healing Beyond Borders or an Affiliate Country.</p> <p><i>If you were unable to attend one or two of the required meetings, you may meet by phone, e-mail, video conference (e.g., Skype), or in person with a certified instructor who attended the annual Healing Beyond Borders Instructor Meeting to discuss the content of the meeting. Summarize your discussion in one to two paragraphs, and include the peer instructor's name and the date you met.</i></p>	<p>Documentation of at least three activities to maintain expertise as an adult educator (i.e. observe another HTI Certified Instructor teaching, read books or articles, or attend workshops or seminars). Include for each activity, a brief summary and evaluation of how they apply to your instructor role (use one page, single-spaced).</p> <p>OR</p> <p>Instructor Peer Review from another HTI Certified Instructor.</p> <ul style="list-style-type: none"> • Have a CHTI review at least three hours of your teaching during one of your classes. The class observation must be within the past five years. • Have the CHTI complete the Instructor Peer Review Form (see page 8) • Alternate ways to meet requirements for Peer Review: <ul style="list-style-type: none"> ○ Co-teach a HTI Course 1 class with another certified instructor and have that person review you; or ○ Attend a HTI Course 1: Foundations of Healing Touch Instructor Training (free of charge with advanced notice of attendance)

Application for Renewal of HTI Instructor Certification

Name _____
Last First MI Credentials

Address _____

City _____ State/Province _____ Postal Code _____

Preferred Phone _____ Cell Phone _____

Email _____ Work Phone _____

Date of Application _____ HBB Member # _____

Original Practitioner Certification Date _____ CHTP # _____ Last Renewal Date _____

Original Instructor Certification Date _____ CHTI # _____ Last Renewal Date _____

Applicant's Statement of Professional Responsibility

Recognizing there are many areas of subtlety that cannot be established by written materials alone, you are asked to attest to the truth of the following statements.

- Yes No I have read the HTI Instructor Guidelines and I attest that my teaching practice adheres to these Instructor Guidelines.
- Yes No I have read the Code of Ethics/Standards of Practice and the Scope of Practice Statement as published by Healing Touch International, Inc., and I attest my practice adheres to these Code of Ethics/Standards of Practice, and Scope of Practice.
- Yes No I take responsibility to obtain and maintain appropriate legal credentials or qualifications necessary to touch the human body as required in my state or geographical area.
- Yes No I attest the above statements are true.

Signature of Applicant Date _____

Instructor Renewal Checklist

Please use this checklist to ensure your application is complete.

Do not return this checklist with your application.

<input type="checkbox"/>	Completed Application Form (p. 6)
	Criterion 1: Statement of Self-Evaluation of Teaching
<input type="checkbox"/>	Personal statement regarding self-evaluation of teaching expertise
	Criterion 2: Record of HTI Healing Touch Certificate Program Classes Taught
<input type="checkbox"/>	Chronological listing of all HTI Healing Touch Certificate Program classes taught in the past five years, with Course 1 (Foundations of Healing Touch) classes listed in bold
	Criterion 3: Documentation of Continuing Instructor Education
<input type="checkbox"/>	Summary statements regarding continuing instructor education to maintain/improve teaching expertise

Application Submission

<input type="checkbox"/>	Original signed and dated application
<input type="checkbox"/>	Two complete copies of the original application
<input type="checkbox"/>	Retain one complete copy of original application
<input type="checkbox"/>	Check, money order, or credit card information for application fee of \$100 U.S.D. payable to Healing Beyond Borders

Be sure to keep a complete copy of your application.

Your application will not be returned to you.

Instructor Peer Review Form (Criterion 3: Optional)
(Peer review must be completed by an active HTI Certified Healing Touch Instructor)
Teaching Activity Checklist

Applicant's Name _____
Last Name First Name MI

Class Location _____ **Dates** _____

Peer CHTP/I Name _____ **Phone** _____

Introductions/Opening _____
Meditations _____

Overview of Healing Touch (1-2 hr) _____
Definition, History, Benefits, _____
Theory, HTI and Certificate _____
Program Overview, sensing energy _____

Framework for HT Session (2 hr) _____
Presentation _____
Demonstration _____
Seven Steps _____

Human Energy System (2 hr) _____
Energy Field/Chakra lecture _____
Assessment: Pendulum, Hand _____
Scan, Sensing EF, other _____

Modified Mesmeric Clearing (1-1 ½ hr) _____
Demonstration _____
Exchange & Sharing _____

Chakra Connection (1 ½ -2 hr) _____
Demonstration _____
Exchange & Sharing _____

Clinical Applications Pain Mgmt (½ -1 hr) _____
Laser(s), Siphon, Pain Spike _____
Pain Ridge, Wound Care _____

Healing Beyond Borders HTI Healing Touch Instructor Certification Renewal

Headache Management	Time: Suggested / Allotted (½ -1 hr)	Comments
<i>Sinus</i>	_____	_____
<i>Tension</i>	_____	_____
<i>Migraine, Head Trauma</i>	_____	_____

(½ -1 hr)

Noel's Mind Clearing <i>(optional)</i>	_____	_____
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(½ -1 hr)

Scudder Meridian Technique <i>(optional)</i>	_____	_____
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(½ -1 hr)

Development of Healer	_____	_____
Self-Care/ Journaling	_____	_____

(1-2 hr)

Heart to Heart Connection	_____	_____
Chakra Spread	_____	_____
<i>Demonstration</i>	_____	_____
<i>Exchange /Sharing</i>	_____	_____

(½-1 ½ hr)

Legalities, Ethics	_____	_____
Scope of Practice	_____	_____

Supervisor Comments: _____

Opportunities for Improvement: _____

Signature of Peer Instructor _____ **Date** _____
HTI Certified Healing Touch Instructor (Observer)

Name/Credentials of Peer (Print clearly) Date Certified/Renewed

Appendix 1 Application Review Information

Feedback to Applicants

Applicants receive a letter indicating the status/outcome of the evaluation.

Approved: The applicant will receive a letter of approval from the Healing Beyond Borders Certification Board and a Certificate of Certification as an HTI Healing Touch Instructor (CHTI).

Approval Pending: This status indicates action required by the applicant to meet the certification requirements and is accompanied by a “feedback report.” This report provides direction for submission of additional material(s) as requested by the reviewers. Applicants have 30 days to submit updated materials. If the resubmitted materials meet the criteria, the application will be designated as “Approved.” If the materials do not meet the criteria, the application may be designated “Not Approved.”

Not Approved: This status results from a consensus of the Certification Board. The letter will clearly indicate the reasons and rationale for a “Not Approved” status. An appeal process is available for those receiving a “Not Approved” status and is outlined in Appendix 1 of this document.

Grievance Procedure

If an applicant receives a “Not Approved” and disagrees with the decision, she/he may appeal in writing to the Healing Beyond Borders Certification Board within 60 days of notification.

The Healing Beyond Borders Certification Board will consider the appeal and respond to the applicant within six (6) weeks of receiving the appeal request. Their response will either confirm the “Not Approved” status or will modify the status as warranted.

The applicant must send 4 copies of the original packet and letter of appeal to:

Healing Beyond Borders – Certification Board
7112 W. Jefferson Ave., Suite 301
Lakewood, CO 80235

Appeal – Practitioner Certification