



848 N. Rainbow Blvd., Box 2500, Las Vegas, NV 89107 • 800-710-1539 ext.1 (phone & fax) • info@ntcb.org

CERTIFICATION APPLICATION

Certified Integrated Therapies Specialist (CITS)

Fee: 65/year

Those that have completed the required hours of the Academy of Integrated Therapies Certification Program are eligible to become a Certified Integrated Therapies Specialist (CITS) under the auspices of the NTCB and may also opt to become a Licensed Spiritual Healer (LSH) under the Federation of Spiritual Healer Licensing Boards (<http://FSHLB.com>). To be a LSH, one must also be a CITS. Becoming a LSH, in addition to becoming a CITS, is optional, however, unless you are already licensed in a recognized profession, you will need to be both a CITS and LSH to practice legally in all 50 States of the U.S. and 10 Provinces of Canada.

Please type or print the following information.

Date:	Name (as it would appear on certificate):		
Business Name:		Website:	
Address:		City:	
State/Prov:	Postal Code:	Country:	
Home Phone:		Work Phone:	
Cell Phone:		E-Mail:	

Degree and Experience

Highest degree attained (degree and subject):

Current licenses/certifications (Please list all. If necessary, send separate documents):

1	I have completed 40 CEU of AIT Training & Testing or Equivalent	Y	N
2	I have completed 15 Practicum	Y	N
3	I have completed Professional Ethics/Practices/Informed Consent Form Courses	Y	N
4	I have completed the Correspondence & Basic Skills Coaching Workshop <i>Name of Instructor:</i>	Y	N
5	I have completed Anatomy & Physiology	Y	N
6	I routinely require my clients to sign an Informed Consent form & keep a Copy on file. I routinely give my clients a copy of my Informed Consent Form	Y	N

I am applying for CITS certification as indicated above. I understand that certification is for one year and renewal is contingent upon accumulating 20 Continuing Education Credits after the first year. I also understand that in performing vitaflex, raindrop technique and other modalities within the scope of aromatherapy practice that, as a CITS (and LSH), I will use only Young Living Essential Oils and uphold AIT standards. .

Applicant Signature: _____

AIT Officer Signature: _____

Date: _____

Payment Information

Fees may be paid by mailing a U.S. check, Bank Money Order or paying by credit card on-line at <http://ntcb.org/apply.html>. Applicants may e-mail - info@ntcb.org, fax – 800-710-1539, ext. 1 or mail your applications to 848 N. Rainbow Blvd., Box 2500, Las Vegas, NV 89107. Certificates are issued once information and payment are verified. Please allow 4 weeks for processing.

Method of Payment: _____ On-Line _____ Mailed in my check/money order