



848 N. Rainbow Blvd., Box 2500, Las Vegas, NV 89107 • 800-710-1539 ext.1 • 888-484-3113 (fax) • info@ntcb.org

**CERTIFICATION APPLICATION**

**Board Certified Quantum Naturopath Coach  
for IQUM Graduates**

Fee: \$65 per year for one certificate.  
Renewal fee is \$65.

**Please complete the following information.**

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

**Degree and Experience**

|  |
|--|
| Highest degrees and subjects attained (Please list all. If necessary, send separate copies/documents): |
| Licenses and certificates (Please list all. If necessary, send separate copies/documents):             |
| Experiences and service (Please list all. If necessary, send separate copies/documents):               |
| <b>Please answer all questions on Page 2.</b>  |

**Credit Card 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 – 888-484-3113 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 4-6 weeks for processing.

**Signature:** \_\_\_\_\_



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**Please answer the following questions.**

|  |        |
|--|--------|
| 1. I have completed all the required IQUM Video Courses.   | Y or N |
| 2. I have completed all the required IQUM Textbook Courses.  | Y or N |
| 3. I have completed the required Dissertation Project with IQUM.   | Y or N |
| 4. I have received my Master in Traditional Naturopathy Degree from IQUM.  | Y or N |
| 5. I currently have a Bachelor's Degree related to Science and/or Health.  | Y or N |
| 6. I have completed 30 hours of a professional ethics course.<br>Name of instructor: _____   | Y or N |
| 7. I am currently certified by the NTCB as a CBS or QBS.   | Y or N |
| 8. I am currently licensed by the QHLB as a Quantum Healer License.  | Y or N |
| 9. I routinely discuss my Informed Consent Form with my clients and give them a copy.  | Y or N |
| 10. I routinely require my clients to sign an Informed Consent Form and keep it on file.   | Y or N |
| 11. I routinely give my clients a copy of my Code of Ethics.   | Y or N |
| 12. I have completed/documentd _____ hours of my 1000-hour naturopathy internship.   | Y or N |
| 13. I understand that a Board Certified Quantum Naturopath is NOT equivalent or comparable to Doctor of Medicine (MD) or a Doctor in Naturopathy (ND). | Y or N |
| <b>Signature:</b> _____ <b>Date:</b> _____   |        |