

Application for Membership and Accreditation (Acc.D.C.) in the Divorce Coaches Association of Ontario

Full Legal Name:

Email:

Phone:

1.

2.

3.

Name of licence	Name of issuing body	Date license or certification gran
6. Post-seconda		
6. Post-seconda	ry education: Name of institution	Date degree grant
		Date degree grante

Name of employer	Name of position	Dates

8. History of professional education in Divorce Coaching:

History of employment:

7.

Name of program & instructor	Curriculum of program	Date program completed

9. History of professional experience in Divorce Coaching:

Initials of name of client	Period of engagement	Description of services provided and goals achieved

10. References for Divorce Coaching:

Telephone number & email of reference	Explanation for reference
	Telephone number & email of reference

Attachments required:

- 1. CV
- 2. Valid Ontario Drivers Licence or Canadian Passport
- Professional licenses
- 4. Post-secondary degrees
- 5. Invoices for Divorce Coaching (names redacted)

By my signature below, I certify that the contents of this application are true, complete and accurate and will be reviewed by the Divorce Coaches Association of Ontario. I understand that any misrepresentation in this application, however immaterial, could result in the revocation of my membership and accreditation by the Divorce Coaches Association of Ontario.

Name	(print):
Date:	

Signature: