

RSM Academy Protocol Application

First Time and Refresher Trainees Form

Print Your Name: _____

Phone number: _____

Mailing Address: _____

Email Address: _____

Gender at Birth (check one): Female, Male; Birthdate: _____

Occupation: (Include any degrees or titles) _____

Criteria to ensure RSM is a good fit for you:

1. Are you at least 18 years old? ___ Yes; ___ No; Date of birth _____

2. Have received at least **two RSM sessions**? ___ Yes; ___ No

3. The name of your RSM Practitioner and contact number: _____

4. Have you personally received Jesus Christ as your Lord and Savior? ___ Yes; ___ No

5. What religious organization were you brought up in? _____

6. What is your current religious affiliation (i.e., the church you currently attend)? _____

7. Is your relationship with Jesus Christ based on prior teachings of Ellen White (Seventh Day Adventist), Joseph Smith (Mormonism), or Charles Taze Russell (Jehovah Witness)?
___ Yes; ___ No

a. If yes, have you renounced your cult involvement? ___ Yes; ___ No

b. If yes, please explain your reasons for renouncing your cult involvement: _____

8. Are you committed to utilizing RSM for your personal healing journey? ___ Yes; ___ No

9. Please check the following appropriate boxes:

Are you: (Currently Involved) (Have In Your Past) (Not Ever Involved)?

- | | | | | |
|---------------|--------------------------|--------------------------|--------------------------|--|
| • Tarot Cards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| • Ouija Board | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

New Age.

New Age is a term applied to a range of spiritual or religious beliefs and practices that developed in Western nations during the 1970s. Precise scholarly definitions of the New Age differ in their emphasis, largely as a result of its highly eclectic structure. Although analytically often considered to be religious, those involved in it typically emphasize beliefs outside the mainstream (such as reincarnation, holism, pantheism, and occultism) that advance alternative approaches to "spirituality" and rarely use the term "New Age" themselves. Theologically, the New Age typically adopts a belief in a holistic form of divinity that imbues the entire universe, including human beings themselves. There is a strong emphasis on the spiritual authority of the self. This is accompanied by a common belief in a wide variety of semi-divine non-human entities, such as angels and masters, with whom humans can communicate, particularly through the form of channeling.

	Are you: (Currently Involved)	(Have In Your Past)	(Not Ever Involved)?
• Wicca	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Witchcraft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Shamanism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Animal Guides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• New Age Practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Suggested video to prepare for training: RSM Attachment online webinar at <https://www.rsmsoulspiritbody.com/webinars>

Suggested reading to prepare for training: Leaf C. (2008). Who Switched Off My Brain?: Controlling Toxic Thoughts and Emotions. Dallas, TX: Switch on Your Brain USA Inc.

Please share your story about when and how you personally received Jesus Christ as your Lord and Savior. _____

Why are you interested in becoming a RSM Practitioner? _____

I fully understand that Retracing Sequence Method™ firmly adheres to and is based on the traditional Judeo-Christian Bible and its values; therefore, does not accept the false teachings, perspectives, and activities of occult, cult religions, or New Age. Therefore, I understand and completely agree that RSM™ will not be a good fit for me and my application will not be

approved if I am involved with, participating in, or practicing in the occult, a cult religion, or New Age. Additionally, if at any time in the future, I become a member or affiliate with any alternative spiritual perspective, other than the traditional Judeo-Christian Biblical perspective and values, I understand I will no longer be eligible to be certified or practice within the scope of the RSM Protocol.

Verification: My signature below indicates I hereby affirm that my responses to the foregoing questions are true, accurate, and complete and that I have made no misrepresentations regarding them. I understand and acknowledge that my responses to these questions will determine whether I satisfy the threshold eligibility criteria for RSM training – any incomplete, false, or misleading responses to the foregoing will render you ineligible to proceed with RSM training, RSM Certification, and result in revocation of your credentials as an RSM Practitioner. I further understand and acknowledge RSM™ is proprietary to its founder, Rashelle Wilson, M.A., CMHC, who retains sole and absolute discretion whether or not to train any applicant.

(Your signature here) _____ (Date) _____

(Print your name) _____ Today's Date: _____

(Your Signature)

Once your application has been received, you will be contacted via email