

Relive Specialist Training Application

Name of Applicant: _____

Check one (gender at birth): Female Male

Your date of birth: _____

Current profession(s): _____

List your educational background, degrees, and any official trauma training, and/or certifications: _____

Last RSM Academy training you attended, including date and location:

Have you attended a RSM Relive Specialist training previously? __ Yes __ No

If yes, when and where? _____

Criteria To Apply:

1. You are a Certified Practitioner in good standing? __ Yes __ No
 - a. What is your "location" on the RSM Journey: _____
2. You have a traditional Judeo-Christian biblical perspective? __ Yes __ No
3. You desire to help others heal from unresolved trauma? __ Yes __ No
4. You agree to adhere to RSM's Relive Protocol? __ Yes __ No
5. You have taken the RSM Trauma Webinar within the last year? __ Yes __ No
 - a. If not, when? _____ It may not be more than two years ago
6. You are currently a member of AACC? __ Yes __ No
 - a. If yes, write the year you became an AACC member: _____
 - b. This is a requirement to attending the Relive Specialist Training and remaining a RSM Relive Specialist; therefore, if you aren't, please register now to become an AACC member
7. You have taken an AACC Trauma Course? __ Yes __ No
 - a. If yes, write the course title and date finished: _____
 - b. Attach proof of certification and completion of course
 - c. This is a requirement to attending the Relive Specialist Training; therefore, if you haven't, please do so and write the course name and your finish date: _____

Please answer the following:

Share what motivates you to become a RSM Relive Specialist: _____

