

ToP Facilitator Certification Program Application

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State/Province \_\_\_\_\_\_\_\_\_ ZIP Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Personal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When/where did you take the ToP Training courses?

Group Facilitation Methods\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participatory Strategic Planning\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other training or exposure to ToP, Please list all ToP courses and dates \_\_\_\_\_\_\_\_\_\_\_

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Please describe your present involvement with facilitation and/or organizational development and your particular interest in ToP Certification at this time.

Are you currently using *ToP* methods in your work?

 Yes No If yes, please elaborate.

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Are you currently using *ToP* methods in other settings?

 Yes No If yes, please elaborate

Do you have sufficient experience and background facilitating with ToP methods that you can put together evidence of your competence for a team of assessors? 🞏 Yes 🞏 No

Who will be your primary mentor for the certification process?

Please write a concise statement of your goals and expectations for this advanced professional development experience. For example, what do you expect ToP certification to do for you? For those you work for? What do you hope will come of this? What, if any, fears or concerns do you have?

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**Fees**

* The fee for ToP Facilitator Certification is $1200 plus the personal expenses incurred for on-site observation (travel, housing, meals, etc.).
* Please submit a non-refundable application fee of $120 payable to ICA-USA at the time of submitting the application. The balance of $1080 is due to ICA-USA prior to the time of the assessment event.

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

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Send completed form, your resume and any attachments with a $120.00 nonrefundable application fee to:

**Certification Coordinator**

Marilyn Oyler | 4208 N. 25th Street | Phoenix AZ 85016

marilyn.oyler@gmail.com (602) 468-0605