



**Vermont Center for Integrative Herbalism
Family and Clinical Herbalist
Application Form**

Name:	Program Name:
Phone:	Cell:
Email:	Mailing Address:
Emergency Contact Name:	
Emergency Contact Phone:	Relationship:

Medical conditions or allergy information you'd like us to know (to ensure your safety during our course):
How did you hear about this course?
Would you like your e-mail address to be added to our mailing list?

On a separate sheet of paper, please:

- Describe any relevant training and experience you have had in the fields of herbalism, human physiology and therapeutics, and other health care modalities. Describe in detail any formal training programs you have completed (attach course catalog / syllabus if available), along with conferences and workshops, clinical experience, and employment. Organized self-study, if adequately documented, can also constitute relevant experience.

- Include a one to two page personal statement explaining your interest in pursuing herbal studies. If applying for the advanced years of the Clinical Herbalist training program, please discuss your personal philosophy of wellness and passion for healing work. Also, discuss your preparedness for and commitment to undertaking a personally and academically demanding course of study.

Tuition Information:

Tuition is due by the first day of classes for each year. Payment plans are an option to help students fulfill their tuition requirement. VSAC grants may be available for Vermont residents and can reduce tuition cost for each year. Please contact us for more information about either of these options.

Include a deposit of \$250.00 to secure your place in the program; if no deposit is included, we cannot hold your space. The \$250.00 deposit is nonrefundable upon your acceptance into the program and will be applied to your tuition. In the event that you are not accepted, your deposit will be refunded to you in full. Please also attach a small photo of yourself, headshot style, to your application to help us begin matching names and faces.

We will contact you to schedule a formal admissions interview shortly after the July 1st deadline. We strongly recommend that students visit VCIH in person, but the interview can also be conducted via phone if necessary.

Please send this form with your deposit (or payment in full) and photo by July 1st to:

VCIH
252 Main Street
Montpelier, VT 05602

Please make checks payable to Vermont Center for Integrative Herbalism (VCIH).

For office use only:

deposit received ____ paid in full ____ VSAC funding ____ VSAC paid ____ interview ____