

**Society of Ortho-Bionomy International®**

5335 N. Tacoma Avenue Suite #21G, Indianapolis, Indiana 46220

www.ortho-bionomy.org

Phone: 317-536-0064

E-mail: office@ortho-bionomy.org

Fax: 317-536-0065

# Advanced Practitioner Training Program Handbook

## Benefits of Enrolling in the Advanced Practitioner Training Program

- Having an **advisor**: a person whom you trust who is available on a one on one basis and who can help you with questions and problems, who monitors your progress and who can celebrate your success with you. Your advisor is available to support you in learning techniques, help you fine-tune your work with clients and aid you in developing into an advanced practitioner. Together you establish your own mixture of pre-arranged meetings/sessions and more informal ways to check in.
- The **instructor community** knows that you have an advanced interest in Ortho-Bionomy and you will receive extra attention and monitoring in classes and in between.
- Having made a **commitment** to the program helps Practitioners to stay focused and generates enthusiasm for the work and its evolution.
- Further commitment often shifts the Practitioners work to a clearer and higher place of **evolution**.
- You gain a sense of **community**, belonging and support from other Practitioners in the program that helps you stay connected between classes and continue your advanced study of Ortho-Bionomy.
- Enrollment helps you to create a space to develop **relationships** with peers and professional colleagues and ways to develop this into a deepening personal practice.
- Your fees **support** the ongoing efforts of the Society of Ortho-Bionomy to increase the visibility of Ortho-Bionomy and to keep the organization functioning to the benefit of all its members.
- A listing in the Ortho-Bionomy directory that you are in the program makes you a candidate for **referrals** and allows instructors and peers to know that you are deepening and advancing your training.
- Apart from the above named benefits, being enrolled in the advanced practitioner program is a necessary step to becoming a registered advanced practitioner. If you would want to train to teach, this step is required on the journey to become an instructor of Ortho-Bionomy.

Handbook Revised December 2009

## Registered Advanced Practitioner Training Program

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## Registered Advanced Practitioner Program

### Entrance Requirements:

1. Completion and approval as a Registered Practitioner Program by the Practitioner Review Committee (PRC)
2. Current membership in good standing with the Society of Ortho-Bionomy International
3. Completed Registered Advanced Practitioner Program Application Form (page 13)
4. Payment of the Advanced Practitioner Program Entrance Fee of \$100

**Overview:** The Advanced Practitioner Training Program is designed to allow members an opportunity to deepen their training as Practitioners. The Program has been designed to allow Practitioners the ability to customize the program to meet their individual needs. The Program is grounded in the foundation classes of Ortho-Bionomy. Practitioners enrolling in the Advanced Training Program have the opportunity to choose a path of study that meets their long term goals. The requirement of 112 units of Electives may be met with additional classes or with a project/community service or with a combination of the two. This allows members to specialize in a particular area while meeting the requirements of the Advanced Program. For example, a Practitioner who loves working with animals and wants to focus on that aspect of his/her practice may choose additional classes and community service to increase her/his skills with animals. A Practitioner who wants to become an Instructor may take additional Phase 4 classes and focus on increasing his/her learning as a potential Instructor. All projects and community service Electives must be pre-approved by the student's advisor. The number of hours of Community Service or time spent actively participating in a project or elective classes must meet the Elective requirements. Two additional *OPTIONAL* components of the Advanced Practitioner Training Program are the requirement of writing up case studies and the option of writing up a community service project for publication. The ability accurately to track a client's progress and thoroughly to document sessions is an important skill that member's continually build upon in their practice. As acceptance of Ortho-Bionomy grows, Practitioners must be able to demonstrate accurate documentation in their practice.

**Curriculum:** (Units are approximately equal to one hour, 16 units per weekend)

Classes should be appropriate to the Advanced Practitioner Program. In cases where these are not available, the candidate should approach the class on an energetic level appropriate to an Advanced level class. If the class is not an advanced level class, let the Instructor know that you are enrolled in the Advanced Practitioner Training Program. This energetic approach will be an integral part of the ongoing interaction with your advisor.

**Fees: \$100 Entrance Fee                      \$150 Matriculation Fee** An entrance fee of \$100 payable to the Society of Ortho-Bionomy International is due at the time of your application into the Advanced Practitioner Program. An additional matriculation fee of \$150 is due on completion of the Program. These fees do not include your annual Advanced Practitioner membership fees in the Society. All fees are used to support the activities of the Society (a non-profit mutual benefit professional association). These include the staffing of the Society office, administration of membership and training programs, website, and general Society business. Your fees provide you with affiliation to a registered professional organization and trademark protection.

**Choosing Your Advisor:** An integral part of the Registered Advanced Practitioner Training is the guidance, support, and feedback received from an advisor. Although it is strongly recommended that you experience working with as many Registered Instructors, Registered Advanced Practitioners and students as possible, the relationship you have with your advisor is unique. S/he will be working specifically with you as you progress in your training. It is necessary to choose an advisor prior to enrolling in the training program. You

may begin taking classes and filling out your program record form immediately. It is strongly suggested that you choose an advisor before completing the first 100 hours of the program. As soon as you have an advisor you may send in your Application to enroll in the Advanced Practitioner Training Program to the Society office.

The following are some tips and guidelines for selecting and working with an advisor:

- Can the Instructor clearly articulate what they require from the students whom they advise?
- Can the Instructor talk in detail about how they view their role as advisor?
- Do you feel that you will get the time and attention that you need from the Instructor? Be direct and ask for what you envision or ask the Instructor in what ways they are available outside of class for their students.
- What are the Instructor's fees for Feedback Sessions, Private Discussions, and Evaluation Sessions?
- Does the Instructor have a written contract? Not all Instructors have a contract but they should be able to talk in detail about what they expect from a student.
- Talk with several Instructors before choosing an advisor. This is a relationship in which you, as the student, will need to be supported and guided. Find an Instructor who matches your needs and at the same time will challenge you to continue to grow.

**Advisor Eligibility:** An advisor for the Advanced Practitioner Training Program must be a Registered Instructor who has been actively teaching for at least one year.

**Agreement:** Talk with the advisor of your choice to discuss expectations. Specify what you expect from an advisor and hear what s/he expects her/his role to be. When you come to an understanding that is clear for both of you, put your agreement in writing. You will have your agreement to refer back to if necessary.

**On-going Relationship:** Becoming a Registered Advanced Practitioner of Ortho-Bionomy is an on-going process. It is both a personal process and a process of coming to understand the work and how to utilize it. Maintaining on-going communication with your advisor is an invaluable aid in moving along in your process. Together you can establish your own mixture of pre-arranged meetings/sessions and more informal talks and ways to check in. Doing sessions for feedback with your advisor, having him/her observe your work with clients, having one on one discussions in person or by telephone are all excellent ways for your advisor to get a sense of where you are in your training and to guide you in your training. It is a good idea to plan together how and when you will stay in contact as part of your initial agreements. Be clear with your advisor if and where a fee is appropriate in exchange for her/his time.

#### **Advanced Practitioner Training Program Requirements:**

The training program consists of classes, sessions received, private discussions, a lecture/demonstration of Ortho-Bionomy, documentation of sessions with clients, including at least one case study of at least 4 sessions with a client and preferably several more formal case studies (including a minimum of 50 sessions presented as a minimum of 5 case studies), feedback sessions, and evaluation sessions with Registered Instructors. On page 14 you will find a complete list of the requirements for the Advanced Practitioner Training Program. Below you will find a complete description of each component of the training program. If you have any questions, please ask your advisor or any Instructor for clarification, or you may call the Society office.

**Tutorials:** Tutorial time spent with your advisor or instructor augments your study of Ortho-Bionomy outside regular classes. The 19 tutorial units required include the following (unit equal to approximately one hour, individual segment length of tutorial time is at the discretion of the advisor)

**Sessions Received (8 units):** Sessions received from a Registered Instructor or Registered Practitioner in good standing during the course of your training to help you to understand and integrate what you have learned in class and what happens with the client (on the table and the follow on).

**Sessions for Feedback (3 units):** Sessions you set up with a Registered Instructor in good standing to give you feedback on your work, separate from evaluation. The program requires that you set up a minimum of one session for feedback during each 100 unit period of training.

**Consultations (8 units):** One-to-one time that you arrange to spend with a Registered Instructor in good standing to discuss your own questions and concerns about any aspect of Ortho-Bionomy. Not all of the private discussions need to be with your advisor.

Be sure to document your tutorial time. Include time, date, topics addressed and Instructor comments. At the end of your program, your advisor will check your documentation and an acknowledgement of the fulfillment of requirements should be included in materials sent to the Society. Fees for tutorial time are arranged with individual instructors.

**Study Groups: (Minimum of six 3 hour sessions)** A group led by a Registered Instructor/Associate Instructor that meets to address the interests of participating students, i.e. review of class material, practice of technique, demonstration of Ortho-Bionomy, sharing/questions concerning ethical and emotional issues, etc. Three study groups out of the 6 required must be lead by an Instructor and the remaining 3 can be led by a Practitioner with at least 1 year of experience. Study group fees are determined by the individual instructors. The Instructor or Practitioner must complete your Program Record Form in order for the Study Group to count toward your training requirements. Courses beyond those required by the Advanced Practitioner Program can substitute for up to 2 of the 6 required instructor-led study groups if the advisor agrees\*.

**Documented Sessions (Supervised Practice):** The 150 documented session hours with clients must be with a minimum of 20 different people. Each session must be a minimum of 30 minutes (even if the session extends beyond one hour it will still count as one) and must consist entirely of Ortho-Bionomy. We recommend that your begin documenting sessions given outside of class immediately upon your entrance into the program.

These can be a mix of: (a) freestyle sessions (current format) and (b) case studies, a minimum of one informal case study of 4 sessions is required and it is strongly recommended that additional case studies, preferably a minimum of 50 sessions constituting a minimum of 5 case studies be prepared. Documented sessions should demonstrate familiarity with core classes of Ortho-Bionomy as appropriate for the session. Each case study should include ideally at least 5 sessions with the client.

Keep a notebook of your sessions. A sample (master) of a form for the session can be used. Your Advisor should approve each case study as it is written as this is an opportunity for feedback that can be incorporated into the next case study.

*\* Note: On September 28, 2004, SOBI initiated a trial practice of permitting Study Groups to be facilitated by a Registered Practitioner or Advanced Practitioner with at least one year of Practitioner experience. This trial ends as of December 1, 2006. Any such study groups take between September 28, 2004 and December 1, 2006 will also count for credit, but in that case classes cannot be substituted for study groups.*

**Case Study Option Format:**

This is an **option** to do to take the place of some of your documented sessions. The goal of a case study is to document change over time. By taking good notes at each session with a client, you can then compile a “picture or story” of what occurred over 5 or 10 sessions. The more that you write the easier it will be to compile the story later when putting together the case study. The notes taken during a session should include the following information:

Subjective complaints, medical history, Objective findings, Assessment of subjective and objective findings, Description of sessions including techniques used, Response of client, & conclusions.

The case study should be formatted with the above information and a brief 50-100 word introduction or summary (abstract) to give as much depth as possible to your presentation of the client history and progress. Your advisor can help you with formatting the case study if necessary. A uniform format for case study presentation by all applicants will facilitate a collection of case studies as a learning tool in the future.

**Electives** (120 units) May be classes or projects, or a combination of the two.

**Classes** include additional core classes, anatomy and physiology or other Ortho-Bionomy relevant courses designed by a registered SOBI instructor such as visceral, communication skills, self-care, TMJ, carpal tunnel, working with fibromyalgia, etc.

**Projects** include a research project or Ortho-Bionomy related community service project to be designed by advisor and student and a report of which would be sent with the other completed program documentation to the Practitioner Review Committee for review. The value of the project would depend on the time required as worked out between the advisor and student. A project could be an academic research project or community service with a specific group. The following is a short list of sample projects or special population that could define a research project or community service project in Ortho-Bionomy: Horses, domestic abuse survivors, sexual abuse survivors, cancer patients, fibromyalgia patients, individuals with carpal tunnel, asthma patients, individuals with multiple sclerosis, children or adults with ADD or ADHD, Post Traumatic Stress Syndrome, athletes, benefits of Ortho-Bionomy in surgical recovery.

If a student chooses to work with a specific group of people, the project could include a set number of client hours, a number of research hours to become familiar with the condition, and a number of hours to write a research report. For example, if a student chooses to work with carpal tunnel s/he would research the etiology of the syndrome, the current treatment options available and their success rate, and then find a group of people to work with who have carpal tunnel. After completion of the treatments a report would be written summarizing the research and the client’s results with Ortho-Bionomy. A general guideline for writing up a research project could be as simple as following the case study guidelines or as in depth as following the protocol for publication in a medical journal. It is up to the student to choose how they wish to write up the project. This write up must be included with the documentation that goes to the PRC at the completion of the Advanced Practitioner Training Program. The student is free and encouraged to publish any write up that is performed as part of the training program.

### **Evaluation for Registered Advanced Practitioner Program**

Upon completing the Advanced Practitioner Training Program curriculum, you will enter into the evaluation phase of your program. The following activities are included as part of your evaluation process:

1. Three sessions given to Registered Instructors or Advanced Practitioners in good standing. At least two of the evaluations must be with Instructors and one with the student's advisor.
2. Demonstration of Ortho-Bionomy given as an introduction to your practice, to a minimum of four people, observed by an Instructor.
3. A short typed essay (at least one page) on what the philosophy and principles of Ortho-Bionomy mean to you personally and professionally.

**Completing Your Evaluation:** When you have completed your evaluation activities, please send four completed packets of the required documentation to the Society office. All waivers must be approved by the Practitioner Review Committee prior to sending in your final packet. Please do not send in your materials piecemeal. Please remember to keep a copy of all documentation for yourself and send a copy of your packet to your advisor. Refer to the **Final Checklist Prior to Sending Documentation to the Society Office for the Practitioner Review Committee**, to confirm you are ready to submit copies of your Advanced Practitioner Training Program submission.

**Submission To Become A Registered Advanced Practitioner:** Once you have completed all the requirements and documentation to become a Advanced Practitioner, including having your advisor sign off on your completed Advanced Practitioner Training Program Record Form, please send in to the SOBI office 4 copies of your Advanced Practitioner Training Program packet. This includes a typed letter announcing your request to be registered as a Advanced Practitioner, letters of Recommendation from the three instructors who received your evaluation sessions, a letter of recommendation from the Registered Instructor who observed your demonstration, documentation of approved waivers of any requirements, your Program Record Form, with your advisor's signature confirming satisfactory completion of program and the documentation, and your completed typed essay. You must also send the \$150 matriculation fee to the Society. Please keep the originals of all your documentation and send an additional copy of your packet to your Advisor.

Please mail in your complete packet (mail USPS marked "no signature required" & keep postal receipt for your records) at least two weeks prior to the submission deadline to confirm you make the deadline and, if there is anything missing from your packet, you have time to submit this documentation and do not have to wait for the next submission date. The Practitioner Review Committee (PRC) submission deadlines are March 15, June 15, September 15 and December 15. The PRC will verify the completeness of the file and also conduct a qualitative examination of the documentation to assess the readiness of a candidate to become a Registered Advanced Practitioner. The PRC may approve your application or request some clarification or additional work for you to qualify. The PRC may also contact your advisor for clarification. Please note the review committee will only review one level of evolution at a time and trainees must have previously registered for the Training program for which they are applying. (Faxed or e-mailed forms can not be processed). **A complete submission checklist has been provided.**

The SOBI office holds all paperwork until the next committee date, at which time your Advanced Practitioner paperwork is sent to the three Instructor/Practitioner members of the Practitioner Review Committee (PRC). The committee reviews all of your documentation, assesses if you have met the requirements to evolve to the Advanced Practitioner level. The Practitioner Review Committee may request some clarification or some additional work based on their review of the application.

The SOBI office receives notice of evolutions from the PRC by the next submission deadline. As soon as notice is received from the PRC, the SOBI office will email or mail you the results of your submission. Once you have been approved by the Practitioner Review Committee as a Advanced Practitioner, you will receive correspondence from the Society of Ortho-Bionomy welcoming you as a Registered Advanced Practitioner member, as well as an Advanced Practitioner Certificate. **Please note it takes approximately 8 weeks from notice of your evolution for your certificate to be mailed.** Please remember, you must be in good standing with the Society to receive your certificate.

### **Registration as an Advanced Practitioner**

As a Registered Advanced Practitioner member of the Society, you will continue to have voting privileges, receive referrals through the Society office, and receive logo sheets from the Society. You will be entitled to use the words Registered Advanced Practitioner, Advanced Practitioner of Ortho-Bionomy on your literature and personal website. Your contact information will continue to be listed on [www.ortho-bionomy.org](http://www.ortho-bionomy.org) in the Practitioner/Instructor locator. You will continue to be entitled to use the Sand Dollar registered mark and all of the other benefits included as part of professional membership. In addition, you will be eligible for any workshop offered by the Society for professional members only.

### **Continuing Education Units:**

Sixteen units of continuing education are due every other year, along with the annual payment of membership dues to maintain active status as a Registered Advanced Practitioner. All Continuing Education must be taken with a Registered Ortho-Bionomy Instructor in good standing.

Congratulations on your decision to begin the Advanced Practitioner Training Program and enjoy your journey.



## Society of Ortho-Bionomy International Trademark Guidelines & Code of Ethics

### TRADEMARK GUIDELINES

*The Society of Ortho-Bionomy International, Inc. owns these registered trademarks:*

*Ortho-Bionomy<sup>®</sup>, Society of Ortho-Bionomy International<sup>®</sup>, and the Sand Dollar design.*

The Society encourages its members to promote their individual Ortho-Bionomy practices in ways that maintain the integrity and reputation of the Society's programs and services.

**STUDENT MEMBERS:** Student Members cannot use any of the Society's trademarks.

**ASSOCIATE MEMBERS:** Associate Members can use the term Ortho-Bionomy in promotional literature by listing "Ortho-Bionomy<sup>®</sup>" among the bodywork modalities that they practice. Associate Members can also state that they are members of the Society of Ortho-Bionomy International<sup>®</sup>. They cannot use the Society's trademarks in any way that suggests they specialize in, or exclusively practice, Ortho-Bionomy or in any way that suggests they have completed the Society's Registered Practitioner Program. They cannot use the words "registered," "practitioner," or "instructor" in conjunction with the term Ortho-Bionomy<sup>®</sup>. Associate Members cannot use the Sand Dollar trademark.

**PROFESSIONAL MEMBERS:** Professional Member can use the trademarks Ortho-Bionomy<sup>®</sup>, Society of Ortho-Bionomy International<sup>®</sup> and Sand Dollar design in promoting their Ortho-Bionomy practice or teaching. Practitioner Members can also use the phrase "Registered Practitioner of Ortho-Bionomy<sup>®</sup>" in promotional literature. Instructor Members can use the phrase "Registered Instructor of Ortho-Bionomy<sup>®</sup>." The Sand Dollar trademark may be used in any size, but it may not be modified in any other way. The Sand Dollar trademark must always be accompanied by the symbol "®". In order to ensure that Ortho-Bionomy training meets the standards of the Society, Instructor Members must submit their instructional materials to the Society for review and approval.

### CODE OF ETHICS

*As a registered member of the Society of Ortho-Bionomy International I agree to uphold the highest standards of professional behavior, guided by the Code of Ethics stated below.*

1. The philosophy and concepts of Ortho-Bionomy shall be the guiding principles in my work with clients.
2. I will at all times render the highest quality of services possible for the well being and benefit of my client.
3. I will only offer skills or services in which I have specifically been trained. For issues that fall beyond the scope of my practice, I will refer clients to other qualified professionals.
4. To protect the privacy of my clients, I will keep all communications, clients' records and client identity confidential.
5. Recognizing the vulnerability of the client in a therapeutic relationship, I will maintain the highest standard of professional conduct. I will show regard for common legal, moral and ethical standards.
6. To preserve the integrity of Ortho-Bionomy, I will make a clear distinction between Ortho-Bionomy and other modalities that I use.
7. I will bring to the notice of the Society any action of another member that appears to be ethically inappropriate or contrary to standards set by the Society.
8. I will use all Society trademarks only in accordance with the current established guidelines. Failure to follow guidelines will lead to suspension of said trademark use.
9. I will endeavor to improve my technical skills and professional standards through continuing educational training.
10. I will uphold professional relationships, never slandering a member of the Ortho-Bionomy community or the allied professional community.
11. Anyone in my employment will abide by the policies and trademark regulations set by the society of Ortho-Bionomy.
12. I will display a copy of this code of ethics in my work area where it is clearly visible.
13. I understand that transgression of the Codes of Ethics may result in the surrender of my membership.

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**Registered Advanced Practitioner Program Application Form**

*Please Type or Print Clearly*

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

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State/Province Zip/Postal Code

\_\_\_\_\_  
Country Phone

\_\_\_\_\_  
E-mail

**Entrance Requirements:**

Date of registration as a Registered Practitioner \_\_\_\_\_

**Advisor Information:**

Advisor Name (Please print legibly) \_\_\_\_\_

Advisor Signature \_\_\_\_\_

**Enrollment Fee: \$100**

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_ Billing Zip: \_\_\_\_\_ 3 digit code \_\_\_\_\_

**-----For Office Use Only-----**

\_\_\_\_\_ Date Received     Applicant Notified     ACT! Noted

## Checklist for Advanced Practitioner Program Record Form

**As you complete each class or requirement, check the appropriate box below:**

- |                          |  |   |
|--------------------------|--|---|
| <input type="checkbox"/> | 16 Units   | Phase IV  |
| <input type="checkbox"/> | 16   | Phase V   |
| <input type="checkbox"/> | 16   | Phase VI  |
| <input type="checkbox"/> | 8  | Phase VII   |
| <input type="checkbox"/> | 16   | Postural Re-education & Post Techniques   |
| <input type="checkbox"/> | 16   | Isometrics  |
| <input type="checkbox"/> | 16   | Exploration of Movement   |
| <input type="checkbox"/> | 16   | Chapman's Reflexes  |
| <input type="checkbox"/> | 16   | Ethics & Emotions   |
| <input type="checkbox"/> | 16   | Cranial   |
| <input type="checkbox"/> | 120  | Electives <i>Specify number of units below in each category</i>                           |
|                          | _____  | <i>Class Credits</i> _____ <i>Research Project</i> _____ <i>Community Service Project</i> |
| <input type="checkbox"/> | 40   | Residential (5 day minimum)   |
| <input type="checkbox"/> | 18   | Study Group (six 3/hour minimum)  |
| <input type="checkbox"/> | 8  | Sessions Received   |
| <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 3 Feedback Sessions   |
| <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 3 Evaluation Sessions (three attached)  |
| <input type="checkbox"/> | 8  | Consultations (formerly private discussion)   |
| <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/>                          | 150 Documented Sessions (some may be case studies)  |
| <input type="checkbox"/> | 1  | Supervised Demonstration (one)  |
| <input type="checkbox"/> | 1  | Essay   |
|                          | 502 Units  | Total   |

### Final Evolverment Portfolio Checklist Prior to Sending to the Society Office for review by the Practitioner Review Committee (PRC) & SOBI Board of Directors

- Letter announcing request to be registered as an Advanced Practitioner (Typed) - Applicant
- Confirm all curriculum requirements have been signed off by the instructor or your advisor
- Essay (Typed) - Applicant
- Letters of Recommendation including evaluation sessions documentation – Instructors
- Letter of recommendation from the Registered Instructor who observed your demonstration (Typed)
- Advisor Signature confirming completion of program and completion of evolverment portfolio
- 4 stapled copies of program records and support documentation (evolverment portfolio)
- Please keep a copy of completed evolverment portfolio for applicant's records**
- 1 copy of completed evolverment portfolio mailed to your Advisor
- Mail in your 4 stapled portfolio copies (mail marked "no Signature required") to the Society office **at least two weeks** prior to the next PRC deadlines - deadlines are March 15, June 15, September 15 and December 15. Only one level of evolverment will be reviewed at a time and the applicants must, be a member of SOBI, completed their Advanced Practitioner application and registered for the Advanced Practitioner Training program before they send in their final portfolio for submission.
- \$150 Evolverment Fee to the Society of Ortho-Bionomy International

You will receive notice from the SOBI office that your portfolio has been received either by e-mail or mail. The office will contact you if there are any questions regarding your completed portfolio, so please send it in early, so there is time for the applicant to add materials and still make the deadline.

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**Registered Advanced Practitioner Program Record Form (Pg 1 of 6)**

*Please Type or Print Clearly*

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

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State/Province Zip/Postal Code

\_\_\_\_\_  
Country Phone

\_\_\_\_\_  
E-mail

Date Enrolled in Advanced Practitioner Training Program \_\_\_\_\_

Date Completed Advanced Practitioner Training Program \_\_\_\_\_

**Advisor Information:** Advisor Name (Please print legibly) \_\_\_\_\_

Advisor Signature \_\_\_\_\_

**Matriculation Fee: \$150**

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_ Billing Zip \_\_\_\_\_ 3 digit code \_\_\_\_\_

**-----For Office Use Only-----**

- |                            |   |   |  |
|----------------------------|---|---|--|
| _____ Date Received        | <input type="checkbox"/> Applicant Notified       | <input type="checkbox"/> Advisor Notified | <input type="checkbox"/> ACT! Noted              |
| _____ PRC Results Received | <input type="checkbox"/> Web Notified             | <input type="checkbox"/> Newsletter       | <input type="checkbox"/> Certificate Spell Check |
|                            | <input type="checkbox"/> Cert. Sent for Signature | <input type="checkbox"/> Certificate Back | <input type="checkbox"/> Certificate Mailed      |
|                            | <input type="checkbox"/> Member Card Sent         |   |  |

**Advanced Practitioner Program Record Form (Pg 2 of 6)**

**Phase IV (16 units)**

Class	Location	Date	Units	Inst. Sign
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Phase V (16 units)**

Class	Location	Date	Units	Inst. Sign
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Phase VI (16 units)**

Class	Location	Date	Units	Inst. Sign
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Phase VII (8 units)**

Class	Location	Date	Units	Inst. Sign
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Postural Re-education & Post Techniques (16 units)**

Class	Location	Date	Units	Inst. Sign
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Isometrics (16 units)**

Class	Location	Date	Units	Inst. Sign
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Exploration of Movement Patterns (16 units)**

Class	Location	Date	Units	Inst. Sign
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Chapman's Reflexes (16 units)**

Class	Location	Date	Units	Inst. Sign
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Ethics & Emotional Issues (16 units)**

Class	Location	Date	Units	Inst./Adv. Sign
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Cranial (16 units)**

Class	Location	Date	Units	Inst. Sign
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



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5. Date: \_\_\_\_\_ Inst. Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Topic: \_\_\_\_\_  
\_\_\_\_\_

6. Date: \_\_\_\_\_ Inst. Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Topic: \_\_\_\_\_  
\_\_\_\_\_

**Tutorial (22 units)** It is recommended that for every 100 classroom units you complete, you receive 3 sessions, do 1 session for feedback and participate in 3 private consultations.

**Sessions Received (8 units)**

Date	Instructor/Practitioner	Date	Instructor/Practitioner
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Sessions for Feedback (3 units)**

**1. Session for Feedback** Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_

Focus of session, Instructor comments and recommendations:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. Session for Feedback** Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_

Focus of session, Instructor comments and recommendations:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. Session for Feedback** Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_

Focus of session, Instructor comments and recommendations:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Consultations (8 Units)

- 1. Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_  
Topic: \_\_\_\_\_
- 2. Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_  
Topic: \_\_\_\_\_
- 3. Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_  
Topic: \_\_\_\_\_
- 4. Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_  
Topic: \_\_\_\_\_
- 5. Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_  
Topic: \_\_\_\_\_
- 6. Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_  
Topic: \_\_\_\_\_
- 7. Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_  
Topic: \_\_\_\_\_
- 8. Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_  
Topic: \_\_\_\_\_

Evaluation Sessions (3 Units)

- Documentation of Session Attached  
Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_
- Documentation of Session Attached  
Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_
- Documentation of Session Attached  
Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_

Documented Sessions (150 Units) (Option: Some may be in case study format, but not required)

	Date	Units	Instructor/Advisor Signature
Reviewed	_____	50	_____
Reviewed	_____	50	_____
Reviewed	_____	50	_____



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**Supervised Demonstration (1 Unit)**

Documentation of Demonstration Attached

Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_

**Essay**

Typed Essay Attached

**Notes:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Advisor/Instructor Signature Confirming Completion of Program**

*(Advisor Name Printed)*

I \_\_\_\_\_ have reviewed the completed Record form and supporting documentation and the applicant has completed the required elements satisfactorily.

\_\_\_\_\_  
Advisor Signature

\_\_\_\_\_  
Date