

Phone: 734-761-6268 Fax: 734-663-6861 Website: www.<u>m\_AppliedM</u>etapsychology.org

Email: info@AppliedMetapsychologymetapsychology.org

# LIFE STRESS REDUCTION FACILITATOR CERTIFICATION/ACCREDITATION APPLICATION

### *INITIALS*

A) I hereby apply for Certification/Accreditation	as a Life Stress Reduction Facilitator.
	TIR – Expanded Applications <u>&amp; Life Stress Reduction Techniques</u> ress Reduction <u>– Techniques and</u> Case Planning <del>Workshop Worksho</del> and
C) I attest that I have successfully completed an	Internship covering the materials of these workshops with Trainer(s) ered below.
	al hours of viewing sessions, on a good sampling of the techniques ients, under the supervision of an AMI Certified/Accredited <u>LSR</u>
	these hours I have delivered under this supervision. The session log the of each session, and the end result of each session (sample us/session-log-ex.pdf).
<b>FD</b> ) I have written LSR case plans for the succes to his/her satisfaction on Life Stress Reduction.	sful resolution of these client's issues, completing at least one person
of session" and end point as well as the facilitator training level, for review by the AMI Certification Certification/Accreditation is contingent on an au Committee. If the tape enclosed with this applica extended the opportunity to submit another tape (committee members reviewing your recording are The maximum number of tapes that will be reviewed.	s), CD, or DVD of a complete session (this includes pre session, "Sta's acknowledgment of the session ending), on techniques for this n/Accreditation Committee. I understand that dio, or video, tape being accepted by the Certification/Accreditation tion is not accepted, I will be informed as to what is unacceptable ar please ensure that the sound quality of the recording is good – if the unable to hear all parts of the session another tape will be requested wed by the Certification/Accreditation Committee is three. If all three a new application process, which includes paying another application
<b>HF</b> ) I enclose a signed copy of the client release	form for the above recording(s).
IG) I have personally received at least minimum level.	of -10 hours of successful <u>Life Stress Reduction</u> facilitation at this
	s level of Certification/Accreditation.
Certification/Accreditation application. I unde the validity of my Certification/Accreditation.	I am renewing my membership application along with this rstand that I need to keep my membership current in order to mainta a period of three years (with current membership) and that at the en
education in the field. I understand that I will onl  MEK) I understand that if I allow my Certificati supervision will be needed to the satisfaction of the	on/Accreditation, documenting at least 21 hours of continuing ty need to renew my highest level of Certification/Accreditation. on/Accreditation to lapse for a year or more that further training and the AMI Certification/Accreditation Committee my trainer for me to equired will need to submit send in a new tape recorded session before
<u>NM</u> ) I enclose the Certification/Accreditation ap	plication fee-and also my membership application, if necessary.
Signature:	Date:
Certification/Accreditation Application Fee:	\$ 125.00
Method of Payment Visa MasterCard <u>Discover</u>	Check in US dollars, drawn on US bank, payable to AMI
Card Number:	CCV Code (last 3 digits on back of card)
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Expiration Date:	Card Holder's Signature:	



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#### APPLICANT: PLEASE SEND YOUR COMPLETED APPLICATION & FEE(S) TO YOUR TRAINER.

TRAINER: Please send Certification/Accreditation application, session recording, and fee(s) to-AMITIRA 5145 Pontiac Trail, Ann Arbor MI 48105, USA, along with your letter of recommendation for Certification/Accreditation, when once you have accepted applicant's Facilitator's session-recording tape, and the completed Certification/Accreditation application.

## Release

, do hereby		
onsent to and authorize the use of any audio or audio-visual		
ape recording of me made during the course of my counseling		
r viewing sessions solely for the purpose of furthering		
rofessional education, training, and competence. Accordingly,		
hereby grant(facilitator),		
applied Metapsychology International, and their agents and		
rofessional associates the right to use all or parts of such		
ecordings for the purpose of review for supervision and		
Certification/Accreditation of the aforementioned facilitator, and		
release them and their colleagues from any and all actions,		
uits, and claims of damage based on their use of such		
ecordings for these purposes. In providing this consent and		
release, I affirm that my only consideration and compensation is		
ne personal satisfaction of knowing that I shall have contributed		
o enhancing the training and competence of helping		
rofessionals.		
IGNATURE: DATE:		



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## Written Exam for LSRF Certification/Accreditation

1.	The purpose of Life Stress Reduction is:
2.	A client has had a very upsetting performance review with his/her boss resulting in the client feeling stunned and invalidated. Name at least three ways you could address this situation (extra credit for more).
3.	What are the advantages of a written case plan?
4.	What strategy would you use to address a complicated bereavement (complicated bereavement is the state of being overwhelmed by grief and loss)?



<u>6.</u> Explain how you would address the situation of a viewer having a long term, very difficult relationship with his/her parents.

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7. Give 3 examples of how your training in Communication Exercises (CEs) has paid off in actual sessions with specific clients (to protect t client confidentiality do not include client names) at this level.

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8. Attach a case plan for the following client (*Please note, this is a composite case and does* \*
not consist of the issues of any one real viewer.) "D" = the viewer's distress rating for
this issue; "I" = the viewer's interest rating. It is fine to use any style of case planning, as
long as it is clear and easy to understand the plan.

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Basic information: Female, 25 years old, currently single, divorced, no children

Recent car accident D = 8B I = 6

6.

resulting in: Fear of driving (she still drives, but is very anxious) D = 9A I = 8ASerious damage to her foot. It had several bones broken and she now walks with a limp D = 10 C I = 5

Has had one operation so far attempting to correct this D = 8C I = 7

May have future operations but is very afraid of experiencing this D = 10A I = 9B

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<u>Difficult relationship with father, who is controlling and critical.</u> D = 10 B I = 8A"I'll never be able to please him, yet I keep trying" D = 9B I = 9A

Feels she is "going nowhere" in her career. Had idealistic ideas of what she would be able to accomplish as a social worker, but is now feeling disillusioned. D = 7 I = 8C

"I feel like a failure in life - have felt that way for a long time" D = 8 A I = 3

"A lack of love in my life" D = 6 I = 4

The divorce D = 5 I = 2

Loves to cook - "A bright spot in my life" D = 0 I = 9 C