Thank you for your interest in our 100-hour Certified Clinician of Whole Food Nutrition (CCWFN) certification program. Our emphasis is on health and primary prevention, not pathology and disease. The CCWFN course is designed to help you be able to implement what you learn into your practice efficiently and meet the needs of practitioners and their staff. Read this application in its entirety before submitting.

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

**(Print exactly your name to appear on your membership certificate; include your degree/credentials)**

Clinic: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_

Type of practice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 🞎 Retired

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞎 I give IFNH permission to send related material to my e-mail 🞎 Please don’t use my e-mail

# What school(s) did you attend? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type & date of degree(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_How long have you been in practice? \_\_\_\_\_\_

How long have you been using nutrition in your practice? 🞎 N/A \_\_\_\_\_\_\_\_\_\_\_

How many years experience do you have working in nutrition? 🞎 N/A \_\_\_\_\_\_\_\_

Do you use natural remedies? 🞎 N/A \_\_\_\_\_\_\_\_ Do you use Homeopathy? 🞎 N/A \_\_\_\_\_\_\_\_\_

Have you used any of the following clinical tools in your practice?

* Symptom Survey Software
* The Nutritional Exam
* Heart Rate Variability
* Bio Meridian Testing
* Page Body Measurements
* Blood analysis
* In Office Lab (urine, blood, etc)
* Hair Tissue analysis
* Saliva Testing
* Digestive Assessments

On a scale of 1-10, how comfortable are you using the Nutritional Exam? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which of the following books (from the required readings list) do you already own?

* 0101 – Nutrition and Physical Degeneration (Price)
* 0501 – Pottenger’s Cats (Pottenger)
* 0502 - Back to the Basics of Human Health (Frost)
* 0505 – The Skin, Tongue and Nails Speak (Wild)
* 1005 - The Real Truth About Vitamins and Antioxidants (DeCava)
* 1006 - Good Foods, Bad Foods (DeCava)
* 1007 – Know Your Fats (Enig)
* 1507 – Applied Nutrition (Hawkins, 1949)
* 1530 - Health vs Disease (Page)
* 1541 - Therapeutic Food Manual (Lee)
* 1542 – Product Bulletins (Lee)
* 1545 - Applied Protomorphology (Lee)
* 1546 – Vitamin News (Lee)
* 1601 – Clinical Reference Guide
* 2601 – An Endocrine Handbook (Harrower)
* 2605 – Common Glandular Dysfunctions in the General Practice (Schmitt)
* 2701 – Mastering Nutrition with the Symptom Survey
* 2800 – Laboratory Interpretation Desk Reference Manual (Kaslow)
* 2801 – Mastering Nutrition with Blood Chemistry (Kaslow)
* 3000 – An Introduction to Protomorphology (Lee)
* 3023 – A Discussion of the Forms of Blood Calcium booklet + calcium chart (Lee)
* 9021 – pH paper dispenser (or strips)
* 9022 – small bottle of iodine tincture
* 9024 – High intensity penlight with gauge
* 9025 – basal thermometer (mercury-free)
* 4305 – Harrower’s Endocrine chart

Circle the type of energy work you use in your practice: None CRA NET AK ART NRT other

Circle any certification in nutrition that you have already obtained: DACBN – CCN – CNC – NTT

Do you have any certifications that you use in your practice that were not listed? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When did you get certified? \_\_\_\_\_\_\_How many hours were required for certification? \_\_\_\_\_\_\_\_\_\_\_\_

How many staff members are in your practice? \_\_\_\_\_\_\_How many are used clinically? \_\_\_\_\_\_\_\_\_\_\_

What are their credentials? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many staff members are involved in your **clinical nutrition** practice? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Would your staff be interested in becoming a Certified Technician in Whole Food Nutrition? \_\_\_\_\_\_\_

List the types of patient education programs you use \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What points do you emphasize? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For additional educational programs: Circle the time structure(s) you would prefer:

(All Day - Saturday - Saturday & Sunday - 1 ½ hour - 2 ½ hour - Thursday - distant learning program)

For our distant learning program the weekly lecture will be conducted via phone conference. The PowerPoint presentations, videos, slides, and workshops are available in the online educational portal.

**Application overview**

The cost of materials alone for the course is approximately $6,500 by enrolling in the 100-hour CCWFN Certification Program and supporting IFNH you save around $1,700. The total costs for enrollees (includes contact hours) is $4,715.00. **The total cost includes all the required readings, if the applicant already owns any of the required readings, the cost of the book would be subtracted from the total cost**. The certification program is based on the Nutritional Exam and the Foundations of Nutritional Therapy (FNT) program, which encompass certain basic philosophies and procedures.

## Please review my certification and professional membership application

My signature indicates that I have read and understood the Prior Level of Skill needed, Practitioner Requirements, Minimum System & Equipment Requirements, Education Goals & Learning Objectives, and Disclosure Statements below.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**$25.00 Application Fee**

🞎 Check 🞎Amex 3-4 Digit Code: \_\_\_\_\_\_\_\_\_\_\_\_\_

🞎Visa 🞎 MasterCard \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EXP: \_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\* Upon review of the necessary courses and costs, there are two methods of payment available.**

🞎 *One Time (payment in full a $150.00 discount* will be applied to the total cost)

🞎 *Monthly Payment Plan* $700 minimum initial payment and 12 equal payments for the balance (an additional $4 monthly processing fee will be included).

***If you have any questions, concerns, and/or comments, please do not hesitate to email*** [***ifnh@ifnh.org***](mailto:ifnh@ifnh.org) ***or call us at 858-488-8932.***

***You may fax (858-488-2566), email or snail mail your application.***

*IFNH reserves the right to refuse membership to anyone who does not meet the criteria of the review board.*

Please visit our website for more details about the program: <https://ifnh.org/certification-program/>

***PRIOR LEVEL OF SKILL, KNOWLEDGE, OR EXPERIENCE NEEDED FOR EFFECTIVE PARTICIPATION:***

We offer two different certifications: the clinician certification for licensed practitioners (CCWFN) and the technician certification for staff members/Patient Advocates or non-licensed practitioners (CTWFN).

**Practitioner Requirements:**

You must be a licensed practitioner: MD, ND, LAc, DC, DDS, RN, RD or CN, etc. or have an advanced graduate degree in a related topic.

Possess or have access to the minimum system and equipment requirements below

Understand the education goals and learning objectives below

Understand the disclosure statements below

**Support Staff Requirements**: Applying as a Patient Advocate or Technician (CTWFN)

A letter of sponsorship from a licensed practitioner. This letter must be on the practitioner's letterhead and requires no other obligation.

Possess or have access to the minimum system and equipment requirements below

Understand the education goals and learning objectives below

Understand the disclosure statements below

\*The emphas*i*s in these courses *is* more directed towards general food-based nutrition, lifestyle and

diet for support in a practice.

**Non-licensed applicants** who would like to pursue the clinician certification (CCWFN):

Must pass all exams with an 85% average

Have completed Modules 1 & 2 consecutively

Complete Module 3: Nutritional Biochemistry

Document two years of practical experience in a clinical practice or equivalent

***MINIMUM SYSTEM AND EQUIPMENT REQUIREMENTS:***

Operating system

* Windows requirements: Windows 10 or later
* Mac requirements: MacOS "Big Sur" or later
  + **NOTE:** You can only run Nutritec under Windows emulation, not Macs at this time.
* Linux requirements: 64-bit, Ubuntu 20.04+, Debian 10+, openSUSE 15.4+, or Fedora Linux 35+
* iOS requirements: iOS 15 or later

Processor

* Windows requirements: Intel Core i5 (sixth generation or newer) or equivalent memory
* Mac requirements:  Intel Core i5 (sixth generation or newer) or equivalent memory
  + **NOTE:** You can only run Nutritec under Windows emulation, not Macs at this time.
* Linux requirements: Intel Core i5 (sixth generation or newer) or equivalent memory

Memory

* 2 GB minimum, 4 GB recommended

Screen resolution

* 1280x1024 or larger

Application window size

* 1024x680 or larger

Internet connection

* Required (desktops: ADSL or higher, mobile: 4G or higher)

Quality cannot be guaranteed for 512kbps. Users will need to have high internet speed.

***Educational goals and learning objectives:***

### Expiration date of enduring activity or materials:

Blended activity with a combination of a “live” weekly component and a provider-directed, learner-paced component

* Date(s) of pre work and/or post-activity work: September 2028
* Date of live portion of activity: “live” weekly lecture conference calls (Sept - June)

**Course Description:** Certified Clinician of Whole Food Nutrition certification program

**Course Objective:** The basic objectives and goals of continuing education are the growth, maintenance of knowledge and competency, the cultivation of skills, and greater understanding, with a continual striving for excellence in chiropractic care and the improvement in the health and welfare of the public. Furthermore, the certification program also seeks to define, analyze and prescribe a nutritional approach to balancing human biochemical functions at the cellular level for the purpose of facilitating the client’s state of physiologic homeostasis and optimum good health.

**Participant Objectives:**

At the completion of this 100-hour certification program, the participant will be able to (not limited to):

* Understand how the human body cannot perform its normal biomechanical functions without the proper nutritional support
* Identify nutrient rich versus nutrient deficient foods found in the standard American diet
* Perform a nutritional assessment and examination for the purpose of identifying common digestive problems and prescribing forms of nutritional support
* Describe forms of organ system compromise resulting from poor diet, including those seen in the stomach, liver, gallbladder, pancreas and adrenal glands
* Describe symptoms and/or complaints that may result from a congested hepatic system and how this may be related to improper dietary habits
* Analyze and describe cellular and organ system dysfunction as it relates to impaired carbohydrate metabolism and reactive hypoglycemia
* Identify remedies for digestive, blood sugar handling, and musculoskeletal imbalances based on workshop videos
* Identify remedies for endocrine and female/male hormone dysfunction as it relates to basic clinical endocrinology
* Provide sugar control dietary guidelines for common sugar handling problems
* Analyze and describe cellular and organ system dysfunction as it relates to impaired protein metabolism, including the anabolic and catabolic effects
* Analyze and describe cellular dysfunction and organ system compromise problems that result from impaired essential fatty acid and fat soluble factors metabolism
* Identify the types of calcium and its use biochemically, including the cellular effects of its overabundance or deficiency in the bloodstream and how this relates to the body’s calcium:phosphorous balance
* Describe the hormonal influence on calcium metabolism and its relationship to maintaining a balanced 10:4 calcium:phosphorous ratio
* Describe the far-reaching metabolic and physiologic effects of an imbalanced calcium:phosphorous ratio

***DISCLOSURE STATEMENTS:***

International Foundation for Nutrition and Health is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center’s Commission on Accreditation.

International Foundation for Nutrition and Health (IFNH) is recognized by the PACE program of the Federation of Chiropractic Licensing Boards. NOTE: States that do not accept PACE include Arkansas, Delaware, Hawaii, Illinois, Michigan, Mississippi, New York, Oklahoma, Pennsylvania, West Virginia, Wisconsin, Alberta, British Columbia, Manitoba, New Brunswick, Newfoundland/Lab, Ontario, PE Island, Quebec, Saskatchewan. To learn about the FCLB regulatory boards, please visit: <https://pacex.fclb.org/pages/RegulatoryBoards.php>

In order to obtain the CCWFN 100 certification hours for this program the learners must complete the following:

* Learner must be a licensed practitioner: MD, ND, NP, LAc, DC, DDS, RN, RD, DO, PA-C, BSN, etc or have an advanced graduate degree in a related nutrition topic
* Complete the three program modules consecutively
* Complete 77 contact hours of required course material, lecture slides, live weekly teleconference calls (recording available for one week), and post exams
* NOTE: The weekly teleconferences are review lectures for Modules 1 & 2 only, with Q&A time for

mentoring. All exams are open book. You are encouraged to fill in the answers in your exam booklet as you study the course material.

* Complete summative evaluation following completion of modules
* All exams must be passed with at least an 85% grade point (75% grade point for CTWFN participants)
* This program must be completed within 30 months of signing the enrollment form of Module 1. If each Module (Module 1-3) is not completed within 10 months of the enrollment form for that particular Module, a $100 reactivation fee will be required to further access this education activity in the learning portal. This will allow 3 additional months to complete the module.
* You have 10 months to complete each Module independently and they must be completed consecutively: 10 months for Module 1, 10 months for Module 2, 10 months for Module 3
* Balance paid in full for all three modules. Only Modules 1 & 2 for CTWFN participants need to be paid in full.

**Investment includes**: tuition, contact hours, transcript, certificate of completion, required textbooks, professional membership, live weekly teleconference lecture calls (Sept – June; recording available for one week following live lecture call), enrollment fee, shipping & handling, technical support

The CCWFN certification program is intended for licensed healthcare practitioners only.  The CTWFN certification program is intended for non-licensed practitioners, staff, and/or Patient Advocates. The information provided in this educational program is an introduction to the use of particular whole food concentrates and does not purport to be a complete discussion of nutrition and whole food concentrates.

The information contained in this certification program should not be construed as a claim or representation that any procedure or product mentioned constitutes a specific cure, palliative, or ameliorative for any condition. Although specific products and diagnostic equipment are mentioned, the opinions expressed concerning these products are not necessarily those of any particular ineligible company.

The only products mentioned are uniquely designed to accomplish a therapeutic effect or to illustrate a specific design concept. Faculty members Jay Robbins, DC, DACBN, CCN, Ernest Caldwell, DC, Michael Allen, DC, NMD, DAAPM, DIBAK, DABCN, Holly Carling, OMD, LAc, PhD, Jeremy E. Kaslow MD, FACP, FACAI, Dale Migliaccio, DC, and J. Rodney Shelley, DC have no financial incentive to endorse any Standard Process Labs products mentioned. They share observations that they have seen consistently in their multiple years of practicing.

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