1693 S. Hanley Rd
St. Louis, MO 63144
314-416-2236
www.challengingdisorganization.org
icd@challengingdisorganization.org

LEVEL I – CERTIFICATE OF STUDY IN UNDERSTANDING THE NEEDS OF THE AGING CD CLIENT

Name used when attending teleclasses: Today's Date: _____

Last Name: _____ First Name: _____

Name as desired on certificate:

Last Name: _____ First Name: _____

Company: _____

Address: _____

City: _____ State/Province: _____ Zip Code: _____ Country: _____

Phone (Day): _____ Phone (Evening): _____

Fax: _____ Email: _____

QUALIFICATIONS FOR CERTIFICATE

☐ I certify that I am a member in good standing with ICD.

☐ I certify that I have attended the following teleclasses within a three (3) year period of time.

Please Note: *If you intend to pursue the Level II Aging Specialist Certificate, then the teleclass "Advanced Issues in Working with the Aged: Organizing with Grace & Dignity (AGE-260)"* ***cannot*** *be listed on this application. It is the required teleclass for the Level II Certificate, and cannot be applied towards both certificates.*

Title	Date
1) Understanding the Physical & Mental Challenges of the Aging CD Client (AGE/ELD-100)	_____
2) Working with Aging CD Clients Who Hoard (AGE/ELD-230)	_____
3) _____	_____
4) _____	_____
5) _____	_____
6) _____	_____

☐ Fee: $114.00 (Applications submitted in error will be subject to a $15.00 non-refundable processing fee. Errors include two (2) or more of the classes not qualified for the specialty, incorrect dates and/or titles, classes listed without credit received, classes that have been used more than the maximum allowable number of times, classes which are listed in advance of the actual teleclass date, or illegible listings.)

☐ Mail check made payable to ICD and application to:

ICD-Certification Program
1693 S. Hanley Rd.
St. Louis, MO 63144 USA