



RAA Mentor Qualifications & Application Form (9/2013)

NOTE: Applicant cannot be affiliated with a school of reflexology as an instructor. All information on this form is kept confidential by the Reflexology Association of America.

Name: _____ Date: _____

Please Print

Address: _____

City: _____ State: _____ Zip: _____

Home # () _____ Mobile # () _____ Work# () _____

Email: _____

Business Name: _____ Title: _____

of years in practice: _____

RAA Member ID: _____

Is there a Mentorship Fee involved with your services? Y N

*** RAA is not involved with or responsible for contracts entered into by mentor and mentee.**

Required of all applicants:

1. Applicants *must be currently* certified and in good standing with the American Reflexology Certification Board (ARCB) for a minimum of 5 years.

I am certified with ARCB. Year Certified _____ Certification # _____

2. RAA Mentor Applicants are obligated to meet the new reflexology certification standards that require a minimum 300 hours (effective for all new reflexology certificates as of July 2014). RAA requires the mentor applicant to submit, in addition to your original reflexology certificate, proof of additional hours of training & study in reflexology techniques and related topics, *if your original training was less than 300 hours.*

*** RAA reserves the right to determine if all submitted CEs meet educational standards and criteria.**

Submissions required along with this application:

1. A copy of your certification from ARCB.
2. If necessary, copies of post-certification CEs bringing total number of hours of study to 300.

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1. Why are you interested in mentoring?

2. What do you expect to gain personally from mentoring?

3. If you have relevant teaching and/or mentoring experience please describe:

4. Please list the skills or knowledge you would like to share through mentoring.

5. Describe any areas of expertise (in reflexology and/or business).

6. Please list the professional organizations you are currently affiliated with:

7. How will you determine, establish and assess your mentees needs?

8. Length of mentorship program: # of total hours _____ from _____
to _____.

9. Please submit to RAA a completed Activity Plan and the completed Mentee Evaluation form at the end of the mentorship program.