QUANTUM-TOUCH® Level 1 Instructor Application Form

Name:	Date:	
Address:	City:	
State/Province:	Zip/Postal Code:	Country:
Phone # (include Area Code or Country/Region Code):		
Email for QT Business:		
Business Names: 1)		
2)		
Website Domain Name(s)		
DATE of Certified Practitioner Status:		
Write the DATE, INSTRUCTOR, & LOCATION of ALL Level 1 Quantum-Touch workshops you have attended:		
1,		
2		
3		
4		
Write the DATE, INSTRUCTOR & LOCATION of ALL Level 2 Quantum-Touch workshops you have attended:		
1		
Have you attended a Self Created Health workshop? YES NO		
If YES: Was it: ONLINE or IN PERSON? Who was the instructor?		
Your signature	Date si	igned

PLEASE NOTE: There will be a 30% commission payable to Quantum-Touch Headquarters on the gross revenue you receive from each Level 1 workshop.

NEXT STEPS: Your application will go through a review process. Quantum-Touch Headquarters (QTHQ) will talk with a few of your Level 1 Instructors and in general assess your readiness to proceed. Headquarters will let you know whether you are cleared for the next step, which is the interview process. You will then choose a Certified Level 1 Instructor Trainer from the approved list online, and together, an interview will be scheduled. The Trainer will conduct the interview, and it should take about one hour of your time. You will be asked about your goals as a future Level 1 Instructor, your experiences with Quantum-Touch (both personally and in your private practice), favorite breathing or other techniques from Quantum-Touch, and why you wish to teach Level

1. There may be other questions as well, but this is the general content of the interview.