



Congratulations on your decision to become an Upledger Institute International CranioSacral Therapy Technique Certified! We believe you are taking an important step in your career, as well as supporting the efforts to achieve governmental and insurance recognition for CranioSacral Therapy.

**Your Applicant Data Form follows.** Please type or print legibly in black ink as thoroughly as possible and return it to us.

After we receive and review the completed Applicant Data Form, we will forward the Techniques exams for the certification process. The exams will be "open book" and may cover the following topics (including appropriate anatomy, techniques, clinical significance, physiological significance, uses, and/or treatment):

Here is a helpful [video](#) with ways to help you prepare for your Certification exams.

### **Techniques Exam**

- Palpation
- Diaphragm releases
- Pressure stat model
- CV-4 and Still Points
- Ten step protocol
- Whole body evaluation
- Energy Cysts
- Sutherland model and techniques
- Contraindications to CST
- Treatment of children
- Compression triad
- Clinical applications and indications for CST
- Hard palate
- Intracranial and dural tube membrane system
- Facilitated segments
- Direction of energy and V-spread

We will keep you informed of what you'll need to do next for each step of the certification process. Following a successful review of your essay exam, we will provide you with a list of certified examiners and their contact information so that you can schedule your objective (closed-book multiple choice/true false) and practical (hands-on) exams, which will be given concurrently.

Please be sure to send a photograph and copy of license (if applicable) as requested on the applicant data form. Again, we appreciate your dedication to the profession and look forward to working with you on your certification.

We look forward to hearing from you.

Regards,

The Upledger Institute International

The Upledger Institute International  
*Member: International Alliance of Healthcare Educators*  
11211 Prosperity Farms Rd, D325  
Palm Beach Gardens, FL 33410  
[www.upledger.com](http://www.upledger.com)  
[800.233.5880](tel:800.233.5880)/[561.622.4334](tel:561.622.4334)

## CST Technique Applicant Data Form

*Instructions:* Please type or print legibly in black ink. Include additional sheets if necessary, clearly marking category headings. This form **MUST** be used. We recommend that you keep a copy for your records.

Please mail to UII Certification Coordinator, 11211 Prosperity Farms Rd, D325, Palm Beach Gardens, FL 33410 **OR email with all attachments to [essay@upledger.com](mailto:essay@upledger.com)**.

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

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

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Website:** \_\_\_\_\_

*Licenses Held:*

Type/Issued by (state, county, etc) License # - include scan or copy of license/s:

---

---

*Education (college and/or vocational):*

School name, location, date attended, degree\certificate:

---

---

Continuing education (**outside of UII**) - location, date, sponsor:

---

---

Professional experience (last 10 years) - location, specialty, title:

---

---

Professional affiliations (last 10 years) - group name, your function:

---

---

Client/patient population summary:

---

---

CS Goals:

---

---

Has any malpractice claim or suit ever been brought against you? \_\_\_\_\_ If so, please include description.

Have you been the subject of disciplinary action, reprimanded, refused admission or suspended before any court or administrative agency or otherwise disciplined as a result of an investigation of your professional conduct at the local, state/province or national level? \_\_\_\_\_ If so, please include description.

**Enclose or include with email:** A recent photograph and a copy of all Healthcare Related Professional Licenses or equivalent documentation providing the legal ability to practice hands-on therapy for payment.

**Ethics:**

As a practitioner using therapies taught through Upledger Institute International, you are expected to adhere to the highest professional standards. Among these are the commitment to provide quality therapy to all persons without discrimination, to seek educational opportunities to enhance therapeutic skills, to respect each client's right to privacy, and to accept the responsibility to do no harm to the physical, mental and emotional well-being of self, clients and associates.

**Maintaining Certified Status:**

UII requires that each therapist certified in CranioSacral Therapy through the UII certification program must complete 24 hours every four years of UII-approved continuing education. This may be in the form of UII CST courses (participating or assisting), mentor programs, symposiums, research conferences, or preceptorships. UII reserves the right to revoke certification for actions deemed inappropriate by the certification ethics committee.

I acknowledge that the above information is true and accurate. I hereby apply to The Upledger Institute International CranioSacral Therapy Certification Program and will abide by the rules and regulations thereof. I further acknowledge that this certification, upon awarding, is not intended to be used as a hands-on license.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*For UII Office Use Only: Date Received: / / By: \_\_\_\_\_*

*Date Verified Pre-Requisites: / / Transfer: / /*