

Healing Touch Program Certification Application

Submission Date: 12/9/19

Name of Applicant (to appear on certificate): Karen Andre

Credentials: HTCP, RN

Address: 2625 Mt Pleasant Rd W

City: Mt Pleasant State/Province: NC Zip/Postal Code: 28124

Country: US

Include the phone number(s) and email address you want HTP to use for communication:

Home Phone: Home Email: andrekaren414@gmail.com

Cell Phone: 517-256-0890

Work Phone: Work Email:

Other:

Select the application you are submitting:

☐ Practitioner Certification Application

The Qualified Mentor overseeing my Practitioner Certification packet is:

Name:

QM#:

☒ Practitioner Certification Renewal Application

Expiration date: 01/13/2020

☐ Level 6 Application

☐ Instructor Certification Application

☐ Instructor Certification Renewal Application

Expiration date:

☐ Instructor and Practitioner Certification Renewal Application

Expiration date:

Practitioner Certification Renewal Application Checklist

To be used as your final checklist to insure all requirements are met and materials included. Include checklist with your application packet. Please organize materials in the same order as the checklist below.

Applicant's Last Name: Andre

Applicant's First Name: Karen

☒ **Application Form**

☐ **Payment Information Form (if submitting manually)**

☒ **Practitioner Certification Renewal Application Checklist Form**

Application Requirements as below:

1. Evidence of Participation

☒ Continuing Education Hour Worksheet

☒ Overall summary of your experiences in self and professional growth

2. Practice Development

☒ Summary of your growth in your Healing Touch practice including reflection statement

3. Assertion of Personal Responsibility

☒ Sign and submit the Assertion of Personal Responsibility form

Healing Touch Program Certification Renewal Worksheet Continuing Education Hours Log

Name: Karen Andre

Please show **75 total hours** of continuing education.

*Official CEs of at least 37.5 hours *Energy based education of at least 37.5 hours

*Healing Touch Program sponsored education of at least 20 hours (counts toward official CEs and Energy)

*Each book, audio book or DVD is worth 2 hours - maximum allowed in this area is 10 hours

Date	Title/Author	Hours Attended	Official CE Hours Given	Healing Touch Program	Energy Medicine	Professional Development	Self Care/Spiritual	Books, Audio Book, DVD
1/9&10/15	Emotion Code class	10	10		10	10		
4/17/15	Back Chakra class- Franny Harsey	6.5	6.5		6.5	6.5		
3/23/16	AHNA Charlotte Regional Conference- Self Care	6	6		6		6	
8/19,20,21/2016	Healing Touch Conference- Charlotte NC	12.75	12.75	12.75	12.75	12.75	12.75	
8/21/16	Energy Medicine with Veterans and Families- breakout session	3	3	3	3	3		
11/1&2/18	Helper Healing Touch Level 3 with Jean Pruitt	16	16	16	16			
11/5/18	Qi Gong with Ann Cathcart recording	1	1	1	1	1		
11/5/18	AHNA- Intro to Herbal Adaptogens recording	1	1		1	1	1	
11/30/18	Reader at Level 5 class Ashville, NC	6		6				
1/3/19	Simple Ask and Receive Training	2			2	2	2	
2/23/19	Life Force Healing- Jane Hightower	8	8		8	8	8	
5/2/19	Level 1 HT for Animals	5	5	5	5	5		
6/1/17	Book- Ask Your Guides- Croquette						2	2
8/10/19	Book- Core Light Healing- Brennen						2	2
8/25	Advanced Chakra Diagnosis and Treatment with Janna Moll	19.5	19.5		19.5	27.5	27.5	
Total		97.75	88.75	43.75	97.75	60.75	45.25	4

My Healing Touch Practice

I have not pursued a private practice with much energy and have been happy to volunteer and treat friends and family. My philosophy is that everyone should have access to Healing Touch despite financial limitations.

My Friend, Cathy Carson, is the HTCP at the local hospital and has my cards to give anyone who wants to continue getting sessions at home. I offer the first one for free but have not received any calls from this source. Other than this, I haven't pursued a practice.

I volunteer monthly at a Healing Touch Clinic at the Rocky River Presbyterian Church. This is Julia 's church and she has set this up. We offer 30-minute sessions to church members and others for free or a donation to the church. This clinic has been successful and we have many return clients. It is also a venue for Healing Touch students and apprentices to come and practice.

The Concord hospital has a monthly Lavender Friday in which they offer healing energy modalities to the staff there. These sessions are only in a 5 -10-minute time frame but does help introduce staff to energy work and we sometimes can get MDs, NPs and PAs to stop and have a session. It also provides some relaxation to busy and stressed staff.

I am currently working closely with my sister who was recently diagnosed with vaginal cancer and is undergoing chemotherapy and radiation treatments. We have been doing remote sessions twice a week to support her throughout the treatments for pain control and limiting other side effects.

I have provided long-distance sessions for family and friends and they know they can ask for one anytime. My friend Marianne had a knee replacement done and I visited her at her home to help with side effects and provide a soup with ingredients she needed.

This is the extent of my practice so far although I would welcome it to become more expanded. I have taken more classes and feel much more confident in myself so I will see what comes my way!

Karen Andre, HTCP

Self and Professional Growth

Over the last 5 years I have tried to continue my education in Healing Touch and other energy modalities to the extent that I can afford it. It has become cost prohibitive for some of these classes. Also traveling for 2-3 days is not feasible for me at this time so I am thankful for local events and on-line options.

I am thankful for the 2 volunteer opportunities I have monthly to help keep my skills up and for the friends and family who trust me to tend to their energy needs. All these things help increase my skills and self confidence in my energy practice. I am continually learning what skills I have and potential niches that may work best for me and trusting my intuition more and more.

The classes I have taken have been wonderful as are the conferences I have been able to attend. The knowledge I have obtained is considerable as there are so many incredible teachers out there. It was an awesome experience to be able to be a reader for the first time in Asheville, NC for a level 5 class last year. I met one of the ladies I read for this year at Janna Moll's class and it was great to get to follow up with her and hear about her progress.

I also love to encourage others who have an interest in energy work to start taking Healing Touch classes as we need more practitioners!

My hope for the next 5 years is to take additional Healing Touch for Animals classes and Anatomy for Healers courses. There is so many exciting classes out there it's hard to decide what to take!

Karen Andre, HTCP

Practitioner Certification Renewal Assertion of Personal Responsibility

Applicant's Last Name: Andre

Applicant's First Name: Karen

- ☒ I can demonstrate and use all the techniques and sequences taught in the Healing Touch Program classes Levels 1 – 5.
- ☒ I understand the principles and concepts of using an informed consent form with clients.
- ☒ I take personal responsibility for clarifying and interpreting the content and scope of Healing Touch within Healing Touch Program and I maintain confidentiality of my healing activities and the documentation of all care provided.
- ☒ I have read and understand the Healing Touch Program Code of Ethics and the Statement of Scope of Practice and I attest that my practice adheres to these standards.
- ☒ I carry an active professional liability insurance policy for my Healing Touch Practice. Policy issued through EMPA insurance company.
- ☒ I take responsibility to obtain and maintain appropriate legal credentials, permissions or qualifications necessary to touch the human body as required in my state or geographical area.

I understand that violations of the HTP Code of Ethics or Scope of Practice may result in consequences up to and including revocation of certification, and I recognize and accept that the HTC GC has the final authority to determine those consequences.

Have you ever been convicted of a felony? ☐ Yes ☒ No

If yes, please explain:

Signature of Applicant: Karen Andre

(If submitting electronically, please type your name.)

- ☒ By checking here, I am providing my electronic signature approving all the information entered.

Date: 10/20/2019