



**BOARD OF NATURAL MEDICINE DOCTORS & PRACTITIONERS –
NORTH AMERICA (BNMDP-NA)
NATURAL MEDICINE CERTIFICATION COUNCIL (NMCC)**

CERTIFYING SUB-GROUP OF THE WORLD ORGANIZATION OF NATURAL MEDICINE (WONM REGISTRY)

MEMBERS ♦ CANADA ♦ USA

ASSESSMENT/APPLICATION FORM

NAME:		
ADDRESS:		
CITY:	STATE/PROVINCE:	ZIP/POSTAL CODE:
TEL HOME:		TEL BUSINESS:
E-MAIL:		WEB SITE:

EDUCATION

State highest level obtained and year of completion.

YEAR	LEVEL	COURSE	INSTITUTION

FIELD OF PRACTICE

Enclose certified photocopies of All Certificates, Diplomas ETC, or C.V.

OTHER EXPERIENCE

Provide data on any other position held/experience gained (i.e. Consulting, Lecturing, Management, Technical or Scientific papers printed or presented, etc) Give a brief description of your social or professional involvement, as well as interests in Natural Medicine.

Benefits of certification:

- Recognition throughout the Americas (United States, Canada and South America) and trademarked in the United States and Canada.

- Certification as a Doctor of Natural Medicine (DNM) Registered Naturotherapy Practitioner (RNP) are recognized as meeting the standards in traditional, natural medicine as established by the World Organization of Natural Medicine (WONM).
- Prestige of belonging to a vanguard organization that is composed of highly trained, qualified professionals with strong ethical principles.
- Opportunity to participate in WONM-Clinic for Humanity programs.
- Professional Continuing education workshops and Seminars.
- Regional Congresses and World Symposia with WONM affiliates worldwide.
- Doctoral (PhD) research and fellowship with WONM-research department.
- Internship and externship (in partnership with Clinics for Humanity™ program).
- North American Journal of Traditional Medicine and Integrative Medicine
- Eligibility for special group rate on malpractice insurance.
- Eligibility for reimbursement of service fee by certain major insurance companies (Canadian members).

Most of all, membership offers a sense of satisfaction and fulfilment to know that you are helping to propagate the effective delivery of Natural Medicine and traditional health care in North America and around the world.

REGISTRATION REQUIREMENTS FOR NEW MEMBERS

- Incomplete or illegible applications will be returned
- Only Certified copies will be accepted for assessment
- The assessment fee (\$200.00) is NON-REFUNDABLE and is NOT PART of the registration fee.
- Please enclose 2 passport size picture for your file (colour or black and white).

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REGISTRATION CRITERIA

DOCTORATE IN NATURAL MEDICINE (DNM) - CATEGORY II

- 4000 hours of training and experience in Natural Medicine
- (Post Graduate Doctoral (PhD), research program
- All Traditional Natural Medicine Practitioners

DOCTOR OF NATURAL MEDICINE (DNM) -CATEGORY I

- 1000 hours of training and experience in and training in natural medicine in addition to proof of doctor level diploma in healthcare discipline: This category includes but is not limited to; allopathic medical doctors, dentist, medical osteopaths and chiropractors. (Doctoral research and upgrading in natural medicine maybe required).

NOTE: Potential registrants with non-doctoral level of education cannot be registered as a Doctor of Natural Medicine or WONM Doctor of Humanitarian Services.

REGISTERED NATUROTHERAPY PRACTITIONER (RNP)/ CERTIFIED NATUROTHERAPY PRACTITIONER (CNP)

- Minimum of 2000 hours (two natural medicine modalities) of training and experience in at least two areas of Natural Medicine including basic sciences in Anatomy and Physiology.

Please note: all non-doctoral registrants will be registered at the practitioner level as per WONM standards.

FEES

3555 Don Mills Road, Suite 18-529 Toronto, Ontario M2H 3N3 Phone: 416-756-9355
www.boardofnaturalmedicine.org info@boardofnaturalmedicine.org

Assessment Fee: \$200.00 is (non-refundable and is not considered as part of registration payment. Registration fee will be communicated to you upon acceptance).

[Note: Please make assessment fee payable to the World Organization of Natural Medicine (WONM)]

AGREEMENT

Please read the following statements, sign and date at the bottom and submit this form along with the assessment fee and certified photocopies of your Certificates, Diplomas and/ or Curriculum Vitae.

- I have successfully completed the course of instruction as indicated on the enclosed documentation.
- I have enclosed a Money Order for \$200.00 or credit card information for the assessment of my application.
- I understand that the assessment fee is non-refundable and is not part of the registration fee.
- I understand the designation that I am applying for is not an academic degree; it is to validate my educational standing.
- I agree that designation must be renewed annually to validate my position on the registry with the Board of Natural Medicine Doctors & Practitioners – North America & Natural Medicine Certification Council.
- I understand that this certification serves to identify services, which meet the standards as established by the World Organization of Natural Medicine and must be surrendered when registration ceases or at the request of the disciplinary committee of BNMDP-NA/NMCC.
- I certify that the above information is correct to the best of my knowledge.

***Note:** BNMDP-NA reserves the right to conduct competency examination(s) or recommend upgrading when deemed necessary before certification will be granted.*

DATE OF APPLICATION

SIGNATURE

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