



The American Handwriting Analysis Foundation

Application for Certification & Proficiency Examinations

Date: _____

1. Personal Data:

Name: _____ E-mail Address: _____

Preferred Phone _____ Website: _____

Address: _____ City _____ State _____ Zip _____ Country _____

2. Certification Program: Check the examination for which you are applying:

Part One Part Two Grandfathering (Offer expires 12/31/13)

3. Education: Copies of transcripts or certificates of completion are requested.

College/University & Handwriting Training Courses	Dates	Major	Degree Awarded

4. Do you currently work as a handwriting analyst? Full Time Part Time

5. Are you certified? Yes No By whom: _____

6. Years of experience as a handwriting analyst since completion of training: < 1 Year 1-5 Years 5-10 Years > 10 Years

7. Are you a member of any of the following organizations:

- American Handwriting Analysis Foundation American Association of Handwriting Analysts
- International Graphoanalysis Society National Association for Graphology
- American Society of Professional Graphologists Other _____

8. Documentation of the information requested below may be emailed or scanned onto a CD or flash drive and mailed to the address below.

- A) Occupational History:** A summary of previous employment, outlining employers, responsibilities and accomplishments.
- B) Specialized Training:** Please provide details (e.g., company training programs; professional association certificate, military training programs, etc.)
- C) Independent Reading List:** (graphology, psychology, marketing, employment practices, etc.)
- D) References:** two personal recommendations, preferably known handwriting professionals.
- E) Example of your work:** a copy of a professional analysis you personally prepared for a client (personal information redacted). Include the handwriting sample.
- F) Marketing materials:** examples of marketing materials you use to promote your graphology practice
- G) Handwriting sample:** a specimen of your handwriting, outlining why you wish to become certified through AHAF
- H) Code of Ethics:** a signed copy of The AHAF Code of Ethics

9. Have you ever been disciplined for an ethics violation by any organization? No Yes (if yes, please detail separately)

10. Have you ever been denied certification by any organization? No Yes (If yes, which one?)

11. Have you ever been convicted of a felony? No Yes (if yes, please detail separately)

Appropriate fee may be paid by check or PayPal on our secure website: ahafcertification2013@gmail.com

\$25 nonrefundable application fee \$75 Part One Examination \$200 Part Two Examination

My signature below certifies that I have read and understood The AHAF Syllabus, Code of Ethics, and fee policy as listed above.

Applicant's Signature

Date:

Please return this application as an attachment to Ralph Zackheim:

spen28@yahoo.com

Date application received:
