



THE NATIONAL INSTITUTE
FOR TRAUMA AND LOSS
IN CHILDREN

A STARR INSTITUTE
FOR TRAINING PROGRAM



TLC Accredited Membership

Individual Application

900 Cook Road
Grosse Pointe Woods, MI 48236
877-306-5256 • tlcinstitute.org

Directions: Complete this application. Please print clearly. Include requested attachments and PO or check for \$400 for a 2-year TLC Individual Accredited Membership (annual renewal is \$200/year). We will notify you of your acceptance and provide information regarding the use of the TLC Accreditation logo and a CD with logo options. For an additional \$50 we will send you an 11" x 14" framed certificate. Submit application and payment to: **TLC Accreditation, 900 Cook Road, Grosse Pointe Woods, MI 48236**

Include \$400 2-Year Accreditation fee Optional \$50 fee for framed certificate

Date _____

Individual Member Accreditation

Name _____

Degrees _____

Position _____

Agency/organization employed _____

Address _____ City _____ State _____ Zip _____

Business telephone number _____ Fax _____

Email Address _____

For profit Non-profit Total number of staff _____ Ages of children/adolescents served _____

Five major mental health problems presented by population (students/clients)

1. _____
2. _____
3. _____
4. _____
5. _____

List current licenses, certifications (attach copies)

List awards/honors received in the last five years (attach copies)

I have read the attached documents and agree to support the core values of TLC/Starr Commonwealth, TLC's Trauma Informed Lessons Learned and the ethical standards of my primary profession (education, psychology, social work, etc.)

I understand that Accredited Membership is not licensure and that TLC/Starr Commonwealth is not liable for claims that may be filed against our organization/institution.

Print name _____ Position _____

Signature _____ Date _____