NORTH AMERICAN TRAINING ACCREDITATION BOARD

FGNA FELDENKRAIS GUILD® of North America

This form is to be used to assist in carrying out the following point of the Training Accreditation Policy.

#43. A trainee who wants to transfer from one training program to another must receive a letter from the educational director and the administrative director of his/her original program, indicating fees paid, number of days of training completed, which parts of the program completed, and a recommendation to continue the training elsewhere.

TRANSCRIPT OF TRANSFERABLE EDUCATIONAL CREDIT

This is certify that _____ has completed ____ days of transferable education in the _____ *Feldenkrais*® Training Program that began (give start date of training) _____ and that all fees owing are paid.

Additional information:

	Experience	live	recording
Total days in attendance (incl made-up days)	year 1	_____	_____
Total days in attendance (incl made-up days)	year 2	_____	
Total days in attendance (incl made-up days)	year 3	_____	
Total days in attendance (incl made-up days)	year 4	_____	

	Trainers	Assist. Trainers	Exper. Practitioners
Total number of training FIs received	_____	_____	_____

Trainers with whom the trainee has work and number of days:

1. _____ nr of days: _____
2. _____ nr of days: _____
3. _____ nr of days: _____
4. _____ nr of days: _____
5. _____ nr of days: _____

Reason for transfer _____

_____

_____

Remarks by Educational Director _____

_____

We recommend that the above named trainee continue in a *Feldenkrais* Training Program ___ ___
yes no

_____ _____

Signed and dated by Educational Director | Signed and dated by Administrative Director

Printed name _____ Printed name_____

Revised 02/2018