

# Intercultural Communication Institute Foundations Certificate Application

Name \_\_\_\_\_

Address \_\_\_\_\_

City and State /Province/ Prefecture \_\_\_\_\_

Zip or Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Fax Number \_\_\_\_\_ Email Address \_\_\_\_\_

Focus of your professional specialty \_\_\_\_\_

**Courses and Workshops Attended:**

Organization Source (ICI, SIIC, etc.)	Name of Course/Workshop	Faculty Member(s)	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Please provide:**

- A list of each activity that you have attended and are using to meet the requirements of this certificate. Please include copies of the Certificates of Completion; for each evening program, write a short paragraph that describes the event and its relevance to your intercultural learning.
- A copy of your current resume.
- A letter (2-4 pages) indicating how the training you received blends theory and practice in ways that are useful for you personally or professionally.

**Evaluation Fee:** US\$125

**Method of payment:**

U.S. bank check or money order (enclosed)  
 MasterCard  VISA  AmEx acct. # \_\_\_\_\_  
 Expiration date \_\_\_\_\_ Signature \_\_\_\_\_

**Mail or fax to:**  
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 Phone: (503) 297-4622 Fax: (503) 297-4695 Email: [ici@intercultural.org](mailto:ici@intercultural.org)  
 Website: [www.intercultural.org](http://www.intercultural.org)