

# Intercultural Communication Institute Professional 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
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Please provide:**

- A copy of the Intercultural Practitioner Certificate
- Formal documentation that you have completed an additional five days of related training from an approved source, including professional societies, graduate programs, or independent workshops.

After you have provided the required documentation, you will:

- Develop a professional portfolio that will be reviewed by an intercultural expert selected by ICI.
- Complete the Intercultural Development Inventory.
- Participate in a personalized feedback session with an IDI interpreter.
- Participate in a coaching session with a senior intercultural specialist.

**Evaluation Fee:** US\$2000

**Method of payment:**

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

Expiration date \_\_\_\_\_ Signature \_\_\_\_\_

**Mail or fax to:**  
 THE INTERCULTURAL COMMUNICATION INSTITUTE  
 8835 SW Canyon Lane, Suite 238, Portland, OR 97225 USA  
 Phone: (503) 297-4622 Fax: (503) 297-4695 Email: [ici@intercultural.org](mailto:ici@intercultural.org)  
 Website: [www.intercultural.org](http://www.intercultural.org)