



**Membership/Certification Fee Waiver Committee**  
**Fee Waiver Application**

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DONA International is pleased to offer membership or certification processing fee waivers to qualified applicants. If financial concerns are keeping you from becoming or remaining a member of DONA International or from applying for certification you are invited to apply.

Complete the following information. We look forward to receiving your application. Please send the application and other required materials by mail or fax to the following:

DONA International  
Membership/Certification Fee Waiver Committee  
PO Box 626  
Jasper, IN 47547  
Fax: 812-634-1491

(Please note that applications will not be accepted by e-mail and the accompanying statements must be included **and signed**.)

Applicant Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**SIGNED STATEMENT:**

By signing this form, I am indicating that I have financial need and would not otherwise be able to (*check one*)  become a member of DONA International;  renew my DONA International membership;  apply for DONA International certification or  recertify with DONA International.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

1. Please describe the reason you are seeking a membership or certification fee waiver.
2. Please share what you see as your potential contribution to your community as a member of DONA International or DONA certified doula. Tell us about your long-term goals as a doula in your community.
3. Please tell us what personal circumstances motivated you to apply for the membership or certification fee waiver.
4. Please attach two letters of reference addressing the following:
  - In what capacity and what length of time have you known the applicant?
  - What strengths does this person offer the community as a DONA International member or DONA certified doula?