

I am apply for:	plying Advan- Creder		ced Birth Doula ntial			Advanced Postpartum Doula Credential			
Name:									
Address:									
City:					State/Province:				
Country:					Zip/Postal Code:				
Phone:				Email:					
Website:									
DONA Inte	ernationa	l Mer	nbership	Expiration					
Please complete the following applicable birth or postpartum information:									
Birth Doula	a Certific	ation	Identific	ation No.:					
Original Bi Certification (Month/Yea	n Date	a				Birth Doula Certification Expiration Date (Month/Year):			
No.:		dentification							
Original Postpartum Doula Certification Date (Month/Year):				Postpartum Doula Certification Expiration Date (Month/Year):					
Please us	e the fo	llowi	ing chec	:klist to ensure t	hat you	hav	e inclu	ded all the ap	plication
	documents:								
	The completed descriptions of how I meet the eligibility criteria, included on pages 2 and 3 of th form.								es 2 and 3 or tins
My resume or curriculum vitae, highlighting any additional training, certification and/or licensure in related field(s) during my tenure as a DONA certified doula								nd/or licensure in a	
One (1) letter of reference from a person who has worked with me on my contribution(s) in some capacity or who has first-hand knowledge of such								ution(s) in some	
Evidence of payment of the \$100.00 non-refundable application fee <i>per application</i> in the DONA Online Member Center									
Iw	I will submit this completed application and all documentation to <a href="mailto:certification@DONA.org">certification@DONA.org</a> no later than 11:59 p.m. CST on October 31, 2020. I acknowledge that if I fail to submit a complete and								
	legible application, my application may not be accepted.								
	_			erifies that the in knowledge.	formation	on p	rovide	d in and with t	his Application
Signature:									
Date:									



Please use the following format to describe how you meet the eligibility criteria. Use

succinct statements, etc.).
List any book(s), journal articles, or industry magazine article(s) online or print (blog posts from your own personal or business website or the personal or business blog of a colleague do not meet this criteria) on the topic of doulas, birth, breastfeeding, parenting or postpartum issues that you authored during your tenure as a DONA certified doula. Include the title, name of the publication, publisher (if any) and date of publication. Include a web address of available.
List any presentation(s) of an educational session(s) on the topic of doulas, birth, breastfeeding, parenting or postpartum issues at a national or international conference(s) (not a local event) during your tenure as a DONA certified doula. Include the title and objectives of the session, the name(s) of any co-presenter(s), and the name of the organization, title of the conference, conference date(s) and conference location.



List any outstanding achievement(s) you have been awarded and describe why you feel they meet this criterion. Volunteer work or awards should not be included here. Outstanding professional achievements show your desire to excel in your field and take personal initiative to be a leader.
List the major contribution(s) you made locally, regionally, nationally and/or internationally to advance the mission and purpose of DONA International and/or the recognition of doulas and/or made a significant contribution to, or as a leader in, the maternal-child field, other than that which promotes or supports your own personal or business endeavors. Include details that will help the committee understand the extent of your contribution(s), including the date(s) and timeframe, those who were affected by those contribution(s) and how, and the effect your contributions had on the community(ies):