

This form is only used to purchase the online 40 hour course and/or to attend one of the scheduled Peer Review Practicums. The dates for the scheduled practicums are listed on the [Scheduled Practicums] section of our website.

Please indicate if you are requesting to purchase the online 40 hour online course or if you are requesting to attend one of the scheduled peer review practicums or both. Applicants who complete both are eligible to apply for certification; Certified Child Forensic Interviewer (CCFI) with no prior interviews completed.

If you complete the online course alone, you qualify for the registration credential; Registered Child Forensic Interviewer (RCFI). This credential indicates you have been trained in the core knowledge competencies of child forensic interviewing and is the entry level credential for child forensic interviewers. If you have current interview training and experience you do not need to attend a practicum to apply for Certification. (See applicant's handbook).

Applicants Demographic Information

Applicants Full Name: _____ Job Role: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Home/Cell Phone: _____ Email: _____

Please indicate which services you are requesting

		Check Here
Online Course		
Peer Review Practicum	Provide date you wish to attend below	

Current Employment Information

Agency Name: _____ Web Address: _____

Agency Function: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Office Phone: _____ Work Email: _____

Supervisors Name: _____ Phone: _____ Email: _____

Payment Form

Make checks or money orders payable to:

NACCFI Member Services
38 Noel Drive
Fredericksburg, VA 22408
Pay by Phone: 540-891-7891
Secure FAX: 540-891-2031
Email: nacffiadmin@nacffi.com

Services Description:	US Dollars	Mark Next to Fee
<p>You may purchase the online class and purchase the practicum at a later time. There are limited seats for the practicum (12). The seat is reserved only when payment is made.</p> <p>Completing this form authorizes NACCFI to complete the purchase for the amount indicated in the Total column.</p>		
Child Centered Approach 40 hour Online Training Course	\$ 225.00	
Peer Review Practicum	\$ 225.00	
TOTAL		

To pay with a Debit or Credit Card:



*Card Type:

*Name on Card:

First:	Last:	MI:
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*Credit Card Number:

*Expiration Date:

Month:	Year:
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*Credit Card Code:

Three digit numbers behind the card

*Billing Street Address:

*State:

*Country:

*Zip Code:

Total Amount Payed:

\$	
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