

INTERNATIONAL KINESIOLOGY COLLEGE TFHKA USA CERTIFIED INSTRUCTOR AGREEMENT

The signing of this document implies that as a Touch for Health Certified Instructor I agree to accept the following:

1. I recognize the International Kinesiology College Ltd. (IKC) is the parent body for Touch for Health School Training, and the TFH School Trainer as representatives and administrators of the IKC's TFH School policy and its vision to train Instructors to teach the curricula as determined by the needs of the discipline as defined by the TFH School Faculty.
2. I understand that Touch for Health does not represent a clinic and does not give treatments. Anyone using Touch for Health School course techniques as treatment must already have the appropriate license to do so for their local jurisdiction.
3. Teaching Touch for Health courses does not qualify me, or my students, for any licensing but are considered as training in additional skills.
4. I understand that Touch for Health makes no claims for curing, healing, or diagnosing diseases and I will not imply that the use of these techniques will do so.

SYLLABUS AND TEACHING MATERIAL

1. TFH Certified Instructors teach as representatives of an international team and I agree to teach the current TFH School Workshop syllabus as published by the TFH School of the IKC to assure that all TFH School accredited courses have uniform content throughout the world.
2. I agree not to include methods or techniques in the TFH School courses I teach that are not covered in the syllabus published by the TFH School of the IKC.
3. I agree to update my syllabus material as required by the changes in the official syllabus. I agree to use only current versions of the approved official TFH School texts and manuals.
4. I recognize that TFH School courses may be included as part of a professional training course but its inclusion is limited to additional information and does not create TFH practitioners or therapists.

TOUCH FOR HEALTH CERTIFIED INSTRUCTOR STATUS

1. I agree to take a Proficiency Skills/ Instructor Update within 3 years of completing the ITW.

2. I agree to fulfill Touch for Health School Continuing Education (TFHSCE) requirements with an IKC authorized Trainer and to accrue 15 hours of TFHSCE each three years. Accrual of more than the required 15 hours within a three year period, cannot be rolled over into any other TFHSCE periods. If I do not accrue my TFHSCE units, I will be considered non-active as a Certified TFH Instructor.

3. Instructors who teach a minimum of fifteen students per 3 year period may fulfill their TFHSCEs in a variety of ways as outlined in the Rules and Regulations. If I have not taught 15 students then I must retake the Proficiency Skills class for my Update hours.

<https://ikcfaculty.us/instructor-re-certification-requirements/>

4. I agree to maintain a current yearly membership in the TFHKA USA in order to be recognized as an active Certified Touch for Health Instructor. I will submit a current resume every 3 years.

5. I understand that if I have not satisfied the TFHSCE requirements within five years, my certification will lapse, and in order to be reinstated, I must repeat the appropriate Training Workshops necessary for me to activate my teaching requirements.

6. I understand that further qualifications may be required to teach new programs the TFH School Faculty may introduce from time to time. Only currently certified Instructors will be eligible to teach TFH School endorsed programs.

7. If teaching ONLINE, I agree to abide by the guidelines of the IKC for teaching online.

<https://ikcfaculty.us/teaching-online/>

TOUCH FOR HEALTH SCHOOL CERTIFICATES/ROSTERS

1. I agree to submit to the TFHKA (www.touchforhealth.us) and IKC (www.ikc.global) my class roster and any fees necessary to register my students.

2. As an active Certified Touch for Health Instructor I will issue recognized IKC certificates to students attending my TFH School classes.

3. I agree to obtain these certificates through the IKC Faculty and to abide by the conditions set down by IKC in regard to the use and distribution of IKC certificates, including payment of any certificate fees that may apply. From time to time, TFHKA USA or the IKC may review or change the certificate fee/process and I will be advised accordingly.

4. I understand that if I choose not to maintain active certification, I may not be entitled to issue official IKC-TFH School certificates, and in some cases, my students may not have their hours of attendance credited towards other registration processes that may apply throughout the world.

5. I agree to register my students within fourteen (14) days of the completion of a class to TFHKA (www.touchforhealth.us), then pay for the official IKC certificate (www.ikcfaculty.us) and register, claim and distribute IKC certificates for my students thru the IKC international site: www.ikc.global

ETHICS

1. Because Touch for Health is a trademark and TFH materials are copyrighted I agree to obtain appropriate written permission to use the TFH materials and/or techniques for any use other than those designated in Touch for Health School workshops.

2. I agree to abide by the TFH School Code of Ethics. **Yes No**

<https://ikcfaculty.us/wp-content/uploads/2018/04/TFH-Code-of-Ethics.pdf>

3. I have read and understand the meaning of this agreement. **Yes No**

4. I have received and read the rules and regulations handbook or read the information on <https://ikcfaculty.us/tfh-instructor-requirements/> **Yes No**

5. I understand that if teaching online, I will need to sign the Online Teaching Agreement first in addition to this one. **Yes No**

Yes, I agree to all the above conditions (p. 1, 2, and 3)

No, I do not agree

I am free to offer feedback or comments in writing to the TFH School Faculty.

Name: _____ **Address:** _____ **City** _____

State: _____ **Zip Code:** _____

Phone Hm: () _____ **Mobile:** () _____

Email: _____

TFH Instructor Signature: _____ **Date** _____

TFH Faculty Signature: _____