

# Application Form for The Herbal Apprentice Level One

Date:

Contact Information

Name:

---

Email:

---

Phone number you prefer:

---

Address:

---

Age: \_\_\_\_\_

Tell me about yourself:

Tell me about your education and learning style:

What is your experience with plants?

What is your experience taking care of people? (Just a note: Herbal medicine is about the relationship between people and plants.)

Why do you want to take this course?

Tell me about 3 strengths you have:

Tell me about 3 challenges you have:

What brings you joy?

What disturbs your peace of mind?

Anything else you think would be useful for me to know:

Once you have sent me back this form, we will set up a time to chat over the phone or via zoom. This is an opportunity for you to ask me questions about the course, as well as for me to get a feel for you.