



EXAM CHECKLIST

EXAM ELIGIBILITY REQUIREMENTS:

To Qualify for the National Board Certification Exam you must:

1

» complete an **NBHWC approved training program.**

2

» complete **50 health & wellness coaching sessions.**

3

» have an **associate's degree or higher or 4,000 hours work experience** (any field).

EXAM APPLICATION STEPS:

To Apply for the National Board Certification Exam

a

Create an account on the National Board of Medical Examiners:
www.mynbme.org.

b

Register and pay for the exam

- » The application fee is \$100 (non-refundable.)
- » The exam fee is \$400.
- » Fees must be paid prior to submission.
- » Click **here** to read our Fee Policy.

c

Upload the following documents before the application deadline:

- » Letter of Completion from an **Approved Training Program.**
- » Your **NBHWC Coaching Log.**
- » **Education or Work Experience Attestation Form**



NBHWC HEALTH AND WELLNESS COACHING LOG

To sit for the HWC Certifying Examination, all health and wellness coaches are required to provide a written log of 50 health and wellness coaching sessions that meet the following criteria.

Health & Wellness Coaches may begin recording coaching sessions in their coaching log after they have completed a Practical Skills Assessment (PSA) provided by their NBHWC Approved Training Program. If you have questions regarding when you passed your PSA, please contact your program directly.

Only coaching sessions that occur after passing the PSA may be included in the coaching log.

Each coaching session must be a minimum of 20 minutes in duration.

75% of each coaching session must be devoted to coaching facilitation and not education.

Coaching sessions **may not be** with friends, family or classmates.

Coaching sessions can be paid or pro bono.

Coaching must be facilitated in person, by phone or using live interactive technology such as Facetime or Skype.

For each coaching session your log must include:

1 A coded identity for your client to retain confidentiality.

2 The date of your coaching session. mm/dd/yyyy

3 The length of your coaching session.

4 A general overview of the topics discussed with your client.

Example:

| Coaching Session | Client's coded identity | Individual/Group (If you are coaching a group, please list the number of participants) | Date of coaching session | Length of coaching session | Session # with coaching client | Topics discussed during the coaching session |
|------------------|-------------------------|---|--------------------------|----------------------------|--------------------------------|--|
| 1 | X23 | Individual | 3/3/12 | 30 min. | 6 | Test results, fears, goals |
| 2 | X24 | Group, 6 participants | 6/5/13 | 60 min. | 1 | Children and stress |
| 3 | X25 | Individual | 7/17/14 | 30 min. | 3 | Sleep and eating habits |



COACHING LOG

Complete the log below and submit it when you apply for eligibility to sit for the National Certification Examination.

| Coaching Session | Client's coded identity | Individual/ Group (If you are coaching a group, please list the number of participants) | Date of coaching session mm/dd/yyyy | Length of coaching session | Session # with coaching client | Topics discussed during the coaching session |
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| Coaching Session | Client's coded identity | Individual/ Group (If you are coaching a group, please list the number of participants) | Date of coaching session mm/dd/yyyy | Length of coaching session | Session # with coaching client | Topics discussed during the coaching session |
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On my honor, I attest/certify/promise that I provided the above listed coaching sessions as noted. In each listed session, at least 75% of the time was spent coaching, rather than solely educating.

Signature _____ Date _____



Documentation of Education

Attestation Form

On my honor, I attest that I have an associate's degree (or higher) and am eligible to sit for the Health & Wellness Coach Certifying Examination. I am aware that I may be audited and asked to present a transcript of my completed education.

Signature

Date



WORK EXPERIENCE OPTION

I have neither an associate degree or higher, nor 60 college credits.

Please summarize your 4,000 hours of work experience to meet the eligibility requirements to sit for the Health & Wellness Coach Certifying Examination.

Please provide the following information using the form below:

- 1 A summary of your 4,000 hours of work experience
- 2 Names of your previous employers (towards the 4,000 hours)
- 3 Manager or Supervisor Contact Information

- 4 Job Title
- 5 Dates Employed
- 6 Average Monthly Hours
- 7 Total number of work experience hours

| Employer | Manager or Supervisor Contact Information | Job Title | Dates Employed | Total # of Hours in this position |
|----------|---|-----------|----------------|-----------------------------------|
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On my honor, I attest that the above information is accurate and true.

Signature _____ Date _____