

Graduate from a MEAC-accredited Program

Graduates of a MEAC-accredited program must:

- A. Fulfill the General Education Requirements
- B. Complete the General Application Form 100 and **all requirements** on Checklist Form 130
- C. Submit Continuity of Care—Practical Experience Form 200, or school forms previously approved by NARM, documenting a minimum of three births with women for whom the applicant has provided primary care during at least four prenatal visits, birth, newborn exam and one postpartum exam.
- D. Submit Out-of-Hospital Birth Documentation Form 204 documenting functioning in the role of primary midwife or primary under supervision for a minimum of ten births in home or other out-of-hospital settings.
- E. Submit Document Verification Form 205b.
- F. Send a notarized copy of one of the following below. Official documents sent to NARM directly from the school do not need to be notarized.
 - original graduation certificate or diploma, or
 - a final transcript with the school insignia, or
 - a letter of intent of completion from the administrator of the program on school letterhead (this does not need to be notarized) **The applicant is responsible for sending a notarized copy of graduation certificate, diploma or final transcript to the NARM Applications Department prior to issuance of certificate.**
- G. Pass the NARM Written Examination. (If you have already taken the NARM Written Examination as part of your state licensing process, you may submit evidence of having passed it, and you may subtract the examination fee you paid from the certification fees.)

Notes:

Clinical experience must span at least one year prior to submitting application.

MEAC graduates are expected to apply for NARM Certification within **three years of graduation**. If application for certification is made after this time, NARM will require documentation of ten primary births, 25 hours of continuing education, and five hours of peer review within the three years prior to the application submission. Form available upon request.

Checklist, Form 130, page 1 of 1

Applicant's Name: _____ Social Security #: _____

Return this checklist along with the following:

- General Application Form 100 fully completed.
- Certification Application Fee of \$700 (***certified check or money order in U.S. funds***)
 - If you have already passed the NARM CPM Written Examination as part of a state regulatory process, please note: when it was taken: _____ where it was taken: _____
- A copy of ***current*** legal photo identification—passport or driver's license.
- A copy of both sides of ***current*** CPR (Adult and either Infant or Neonatal Resuscitation) Certification with applicant's signature on back of card.
- A head and shoulders photo taken within the last six months with the applicant's signature on back.
- The completed Continuity of Care—Practical Experience Form 200 or school form previously approved by NARM.
- The completed Out-of-Hospital Documentation Form 204.
- The completed Document Verification Form 205b.
- This completed Checklist Form 130.
- A notarized copy of one of the following:
 - original graduation certificate or diploma, or
 - a final transcript with the school insignia, or
 - a notarized letter of intent of completion from the administrator of the program (to be followed by original graduation certificate, diploma or transcript after graduation)(Original certificates, diplomas, final transcripts or letters of intent of completion on school letterhead sent directly to NARM by the school do not need to be notarized.)
- The following information about that program:

Program Name

Program Address, City, State and Postal Code

Contact person name, phone and e-mail

Are you a graduate from a MEAC-Accredited program?

- Yes, date of graduation: _____ No, anticipated date of graduation: _____

If no, I understand I must send a notarized copy of my original graduation certificate, diploma or transcripts along with a signed copy of both sides of my current CPR (adult and either infant CPR or NRP) to NARM applications in order for my application to be complete.

Program length in years/months: _____

Are you getting a midwifery degree or certification?

When the application documents are all complete, mail the original (and keep a copy for your records) to:
NARM Applications, PO Box 420, Summertown, TN 38483

*Applicants who graduated before the date their program was MEAC-accredited, **must** choose another educational category of application.*