



Vocal Sound Healing Academy

Level I Certification Training Application

Dr. Gwendolyn McClure, M.A., Ph.D., L.M.T.

Thank you for applying for the Vocal Sound Healing Academy Level I Practitioner Training Program. Please take the time you need to breathe into and dance with the depth of these application questions. Take breaks. How you answer these questions will in part qualify you for this Training Program. This Academy aims to attract high-quality people with integrity and pure-hearted intentions for their highest healing. If a question is not applicable to you, say so, and why. If you are stuck on a question, go to the next one and return when you are ready to respond. Some questions may overlap; if so, do your best to answer in ways that resonate with you. If you don't know how to answer a question, contact Gwendolyn for support: gwendolyn@vocalsoundhealer.com

This Training is Limited to 6 Students.

Submit the Academy Application Fee of \$300. USD. To Gwendolyn
The Application Fee is applied to the overall Tuition for the Vocal Sound Healing Academy.

Submit your completed application via email to:
gwendolyn@vocalsoundhealer.com, or via Telegram with Handle:
<https://t.me/gwendolynthepure>.

Once your application fee is submitted, your application is reviewed & your Interview scheduled.

There are Three Parts to this Application



- 6) **Have you read Gwendolyn's Doctoral Dissertation? If so, what aspect of this Dissertation strikes you the most? Request an e-copy of this document from Gwendolyn if you don't have it, as the first of two (2-5 page) required papers will be based upon it.**
- 7) **What intrigues you most about the medium of vocal sound? What makes the human voice such a potentially powerful healing modality?**



8) What skills & practices would you most like to receive from your participation in the Vocal Sound Healing Academy Level I Practitioner Training Program?

9) Are you already a Healing Practitioner by Avocation or Vocation? This is not required. If so, what modalities do you use?

If so, what is your experience of yourself as a Healing Practitioner?

If so, what level of trust do you have in your skills & intuition in this Practice, & how would you like to improve?



10) Have you begun using Vocal Sounding & Singing in your life or in your Healing Practice?

If so, in what ways?

How is that feeling for you?

Name one powerful experience of using your Voice in a healing capacity (solo or with others). If not, would you like to discover using your voice for healing?

11) Do you play any other instrument(s) besides your Voice? If so, what instrument is that? What differences do you notice between your Voice and another instrument in healing efficacy?



12) What is your current primary vocational/avocational area of interest as Vocal Sound Healer, Sound Healer, Musician, Music Therapist, Massage Therapist, Psychotherapist, Reiki Practitioner, Midwife, Doula, Veterinarian, Clergy, or, any other area of interest in life?

How long have you been involved in this Craft and how is it feeling for you at this stage of your journey?

13) What are important qualities in a Leader or Teacher who will mentor you?

What styles of mentorship work best for you?



- 14) Have you ever worked as a client with a Therapist, Psychologist, Music Therapist, Dance Movement Therapist, Art Therapist, Vocal Sound Healing Practitioner, Healer, or Expressive Arts Therapist in private sessions or in a group? If so, is there anything from that experience you would like to share? What did & did not work for you in this experience?**
- 15) Do you have a conscious relationship to your Inner Child (Children)? How is that relationship going? How proficient do you feel at listening and lovingly responding to your Inner Child and the voice of their needs, thoughts, & feelings?**
- 16) What is your relationship to your Body? How has your Body been a teacher for you on your journey, and what have you learned?**



- 17) Do you have any formal (or informal) Voice/Vocal Training? This is not required. If so, what was that experience like for you and how does it serve you now?
- 18) What is your relationship to your Voice? Do you like your Voice? Does your Voice serve you? How? How is your Voice not serving you? Is your Voice shut off in any way at any times? If/when your Voice is shut off, how does that feel in your body?
- 19) What was your exposure to singing growing up in your family/lineage/culture? If you sang growing up, how was singing for you? Was it positive, or not? Describe any significant experiences regarding your Voice & singing in your growing up process.



- 20) Have you ever performed vocally to any audience? Vocal performance experience is not required for admission. If so, in what settings? If so, what was your experience of yourself and your Voice while performing?
- 21) Do you feel you have a free Voice? What does having a free Voice mean to you?
- 22) Do you sing now? How is that for you? If not, why? Do you create vocal sounds now? If so, how is that for you? If not, why not?



- 23) In what ways do you feel your Voice as an instrument could be Strengthened?
- 24) What is your relationship to your breathing? Describe. What are any challenges, difficulties, or anything at all that you notice with your breathing? Where do you breathe into in your body? How does that feel?
- 25) Have you had any experiences of singing and/or vocalizing in connection to the Divine Light of Love, that is, experiences of being a conduit for Divine Light to come through your voice? Experience with this is not required. If so, how did that feel to you? If so, what were the results of this conduit experience?



- 26) Do you have a meditation/breathwork/vocal sounding/body-movement/consciousness practice to center yourself and regularly connect to Infinite Creator/the Frequency of Divine unconditional Love? Previous experience with such a practice is not required. If so, what does your practice entail? If so, how does this practice serve you and how important is it to you? If not, how do you feel about cultivating such a practice?
- 27) Have you had the experience of sounding/singing with or for Mother Earth & her creatures/plants? This is not required. If so, what was that like?
- 28) Have you had any significant experiences with animal, plant, mineral, elemental-realms Spirit Guides, angelic Guides, or any type of Divine Guides? This is not required. If so, name one experience and what effect it had on you.



29) What is one of your Psyche's Shadow Archetype pieces/ repressed elements you have become aware of on your life journey? What is one way in which you have defended yourself from becoming present to your Shadow?

30) What experiences or insights have allowed you to comfortably awaken to and effectively transmute your hidden Shadow aspects from unconsciousness to conscious awareness? What gifts have come to you from facing your Shadow?



31) Are you able to discern when a charged state of consciousness relates to either your energy, or to another energy separate from yours? Do you have a practice of identifying and integrating a personal charge in your system, or in identifying and clearing charged energy that is not yours? If so, how is this discerning, integrating & clearing process going for you? If not, are you open to cultivating such a practice for your energetic protection and overall health?

32) What else would you like me to know about your journey as it may pertain to your participation in the V.S.H.A. Practitioner Training Program? Please be specific & honest.



33) What would or could stop you from enrolling in *and* completing the Vocal Sound Healing Academy Training. Certification Training? What is your own response to any of your potential blocks to fulfilling your vision to be in and to complete this VSHA Training? If in the future you feel challenged in your commitment to complete the Academy Training journey, are you committed to both communicating these challenges to Gwendolyn and to receiving finely-tuned loving support to overcome them?



Part Three: Education & Work Experience

Education: Formal or School-of-Life

Degree Institution

Date begun and date completed:

Major/Area of focus:

License or Certification Acquired:

Is license/certification current?

Lessons from experience:

State if and how this Education or School-of-Life Education relates to your interest in the Vocal Sound Healing Academy.

Feel free to give further information about your education or school-of-life education if you are so called.



Work & School-of-Life Experience:

Work experience related to your vocational or avocational area of interest.

Employer

Duties/Activities

Responsibilities

Duration

Lessons from experience

State if and how this work or school-of-life experience relates to your interest in the Vocal Sound Healing Academy.

Feel free to give further information about your work experience if you are so called.

Thank you for your hard work in filing out this application!

I will get back to you with your admission decision shortly!

Dr. Gwendolyn McClure, Ph.D.