

GoMidwife exists to see birth workers equipped and released throughout the nations to serve women through the childbearing years. Our focus is to use birth work as a tool to restore dignity, decrease mortality and express perfect love.

## Certified Childbirth Education Packet Requirements

- Fill out and submit Application, Form CB-100
- Submit copy of Childbirth Educator Course completion certificate
- Submit 3 Letters of Reference, Form CB-200 A-C from three clients.  
Letters should be submitted in sealed envelopes with mother's (client's) signature over seal
- Submit three Self-Assessments, Forms CB-201 A-C
- Submit copy of Class Outline, Form CB-202
- Submit copy of Curriculum Outline, Form CB-203
- Submit copy of Educational Resource Bank, Form CB-204
- Submit Declarations Statement, Form CB-205
- Submit \$100 certification and processing fee



**Form 200 A Letter of Reference**

Client Name: \_\_\_\_\_  
Last First

Contact Information: \_\_\_\_\_  
E-Mail

CBE Name: \_\_\_\_\_  
Last First

CBE Contact Information: \_\_\_\_\_  
E-Mail

Service Utilized:

- 2 weekend (4 day) intensive education
- 4 week education
- 6 week education
- 12 week education

Date of Services: \_\_\_\_\_  
Beginning Date Ending Date

The greatest educational aspect provided by my CBE was: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Suggestions for growth: (Please indicate here what was not effective during her time of service to you. This is to be beneficial for your CBE to learn how to better educate clients in the future.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Form 200 A Letter of Reference (cont'd.)**

Please write a brief summary of your childbirth education experience and how your CBE was best able to serve you during this time: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did your CBE provide: (Please place check next to all appropriate.)

- Interview
  - Education
  - Appropriate Resources
  - Appropriate and updated educational material Various methods and models of teaching and learning
  - Hands on activities
  - Authority and knowledge of pregnancy, labor and birth, postpartum, newborn care and breastfeeding
  - A professional appearance and manner while in service to you
  - Other \_\_\_\_\_
- \_\_\_\_\_  
\_\_\_\_\_

What did your CBE not provide that would have been beneficial and informative to you: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Form 200 A      Letter of Reference (cont'd.)**

Would you recommend this CBE to your family and friends: (Please circle)  
Yes      No

If NO, please indicate in detail: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Comments:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Form 200 B Letter of Reference**

Client Name: \_\_\_\_\_  
Last First

Contact Information: \_\_\_\_\_  
E-Mail

CBE Name: \_\_\_\_\_  
Last First

CBE Contact Information: \_\_\_\_\_  
E-Mail

Service Utilized:

- 2 weekend (4 day) intensive education
- 4 week education
- 6 week education
- 12 week education

Date of Services: \_\_\_\_\_  
Beginning Date Ending Date

The greatest educational aspect provided by my CBE was: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Suggestions for growth: (Please indicate here what was not effective during her time of service to you. This is to be beneficial for your CBE to learn how to better educate clients in the future.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Form 200 B Letter of Reference (cont'd.)**

Please write a brief summary of your childbirth education experience and how your CBE was best able to serve you during this time: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did your CBE provide: (Please place check next to all appropriate.)

- Interview
  - Education
  - Appropriate Resources
  - Appropriate and updated educational material Various methods and models of teaching and learning
  - Hands on activities
  - Authority and knowledge of pregnancy, labor and birth, postpartum, newborn care and breastfeeding
  - A professional appearance and manner while in service to you
  - Other \_\_\_\_\_
- \_\_\_\_\_  
\_\_\_\_\_

What did your CBE not provide that would have been beneficial and informative to you: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Form 200 B      Letter of Reference (cont'd.)**

Would you recommend this CBE to your family and friends: (Please circle)

Yes      No

If NO, please indicate in detail: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





**Form 200 C Letter of Reference (cont'd.)**

Please write a brief summary of your childbirth education experience and how your CBE was best able to serve you during this time: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did your CBE provide: (Please place check next to all appropriate.)

- Interview
  - Education
  - Appropriate Resources
  - Appropriate and updated educational material Various methods and models of teaching and learning
  - Hands on activities
  - Authority and knowledge of pregnancy, labor and birth, postpartum, newborn care and breastfeeding
  - A professional appearance and manner while in service to you
  - Other \_\_\_\_\_
- \_\_\_\_\_  
\_\_\_\_\_

What did your CBE not provide that would have been beneficial and informative to you: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Form 200 C      Letter of Reference (cont'd.)**

Would you recommend this CBE to your family and friends: (Please circle)  
Yes      No

If NO, please indicate in detail: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Comments:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**Form CB-201 A Self-Assessment (cont'd.)**

Weakest Topic and Why: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How you plan to correct this weakness: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What aspect of the class was most successful: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What aspect of the class was least successful: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What you will do differently the next time you have a client/class: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**Form CB-201 B Self-Assessment (cont'd.)**

Weakest Topic and Why: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How you plan to correct this weakness: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What aspect of the class was most successful: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What aspect of the class was least successful: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What you will do differently the next time you have a client/class: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





**Form CB-201 C      Self-Assessment (cont'd.)**

Weakest Topic and Why: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How you plan to correct this weakness: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What aspect of the class was most successful: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What aspect of the class was least successful: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What you will do differently the next time you have a client/class: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Form CB-202**

**Class Outline**

The class outline is an integral part of any teaching plan as it lays the groundwork for what will come during the rest of the course. It is important to be as clear as possible about the subjects you will be covering, the order in which they come, and the approximate amount of time it will take to cover each of them. It is not necessary to be detailed as to the specific information that will be taught in each section but the topic needs to be clear and concise. For example, you may want to have “Discomforts in Pregnancy” as a topic you teach on day four of the course. You determine this topic should cover 20 minutes and therefore in your class outline you will have this information listed. It is not necessary to list all of the discomforts in pregnancy you will be covering, only the topic.

Your outline might begin something like this:

**Day One:**

Introduction- (5 minutes)

Overview to Embryology and Development- (In the Womb Video-30 minutes)

etc.

**Please note that this outline will be given to students and must prepare them for not only what is coming in their week of teaching but also give them an example of what their own course outline will look like when they become teachers and trainers.**

**This form should be attached as the cover page to your class outline.**

**Form CB-203      Curriculum Outline**

The curriculum outline is a more detailed and thorough document. This will be used by you and your assistants in the training of parents, doulas, and so forth. It will contain all of the topics you will cover in the week, just as the course outline did. Here you will have more detail, however, as this is the material you will use to actually teach from. All of the topics will be listed here, in chronological order, with at least one of these topics in its full and complete exponential form. The reason for this is to show that you understand how to set up the training throughout your course curriculum outline. This exponentially listed topic will include the general topic along with all of the teaching points and concepts you will cover that pertain to it, listed in bullet point format.

An example of this exponential format might look like this:

Breastfeeding-

- I. Importance
  - A. Nutrition
  - B. Research
  - C. Tradition
  - D. Bonding
- II. Stereotypes
  - A. Challenges at work
  - B. Societal implications
- III. Latching
  - A. How to tell if successful
  - B. Switching sides
- IV. Timing
  - A. Length of time to nurse each feeding
  - B. Length of time at each breast
  - C. Length of time to nurse in months
  - D. How often you should nurse
- V. Common problems
  - A. Pain
  - B. Swollen breasts
  - C. Milk not coming in
- VI. When to seek help
  - A. Fever
  - B. Baby not feeding
  - C. Inability to latch
  - D. Frustration

**This form should be attached as the cover page to your curriculum outline.**

**Form CB-204      Educational Resource Bank**

Just as your class taught you the basics at the beginning of your journey with parents and pregnancy related issues so your class will be to them. It is each of our jobs to continue learning along the way, answering questions for those seeking answers, and becoming as thoroughly versed in our craft as possible. With this in mind it is important to have a solid research database that you can use as a reference for yourself as well as point clients to. This will eventually be a potential lending library but will in any case be a point of reference when situations arise you need to review as well as use as curriculum in your own teaching. This resource bank should contain at least 30 different sources of information that you can rely upon but can be longer if you wish. There are literally hundreds of possibilities here, but a good resource bank will have selections from as many categories as possible. An example of these categories includes, but is not limited to:

- pediatricians
- obgyn's
- midwives
- breastfeeding
- depression
- nutrition
- abuse/crisis counseling
- doulas
- herbs
- books
- videos

For the names of individuals you use as a resource please include their name, office address, and appropriate title(s). For programs such as a counseling service in your area include the name of the service and their office address along with a contact and phone number. For books, videos, and other published materials please use an appropriate and consistent citation style such as APA, MLA, Harvard, etc.

**This form should be attached as the cover page to your educational resource bank.**

**Form CB-205      Statement of Declaration**

I \_\_\_\_\_ declare that I have truthfully and

Print Full Name

to the best of my knowledge answered all questions completely and honestly. All information included in this application has been verified by me and I understand that any misrepresentation or falsehood can be grounds for a rejection of this application and/or a forfeiture of my certification with the Global Organization of Midwives.

\_\_\_\_\_  
Signature of Mother/Client

\_\_\_\_\_  
Date