



## **American College of Sexologists**

The American College of Sexologists (ACS) was incorporated in the State of California on June 9th, 1978 for the specific purpose of providing professional standards for training and certification of Sexologists, as well as providing recognition of the works of other professionals involved in the fields of Sexology and Erotology. On January 1, 2002 the ACS became a part of the Exodus Trust in order for it to function as a non-profit organization with the same goals and purposes as the Exodus Trust.

### **Membership Criteria**

#### "Certified Sexologist" Requirements:

- 1. Academic or Professional Development/Training in meeting one (1) of the following criteria:**
  - A. Transcript, Diploma or Certificate of Graduation from an Academic Program focused on Sexology/Erotology (to be approved by the ACS Board of Examiners); **or**
  - B. Transcript(s) documenting 300 hours of academic training related to the field of Sexology/Erotology; **or**
  - C. Documentation of two years of full-time work as a Sexologist, Erotologist, Academician or Researcher in the field of Sexology/Erotology; **and**
- 2. Submission of a completed Membership Application, including required documentation.**

# THE AMERICAN COLLEGE OF SEXOLOGISTS

## Application for Membership as Certified Sexologist

Date \_\_\_\_\_

**Name** \_\_\_\_\_  
Last First Middle

Degree(s) and Title(s): \_\_\_\_\_

**Home Address:** \_\_\_\_\_

City / State / Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_

**Office Address:** \_\_\_\_\_

City / State / Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Office Phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

### **Educational Background:**

\_\_\_\_\_  
Institution Years Degree

\_\_\_\_\_  
Institution Years Degree

\_\_\_\_\_  
Institution Years Degree

\_\_\_\_\_  
Institution Years Degree

**Employment Experience** (Begin with current position):

Employer	Years	Title/Position
Employer	Years	Title/Position
Employer	Years	Title/Position

**Academic and/or Clinical Training in Sexology/Erotology:**

<b>1</b>		
Institution / Sponsoring Agency		Years / Hours
Department, Program, or Title / Description of Course		
<b>2</b>		
Institution / Sponsoring Agency		Years / Hours
Department, Program, or Title / Description of Course		
<b>3</b>		
Institution / Sponsoring Agency		Years / Hours
Department, Program, or Title / Description of Course		
<b>4</b>		
Institution / Sponsoring Agency		Years / Hours
Department, Program, or Title / Description of Course		
<b>5</b>		
Institution / Sponsoring Agency		Years / Hours
Department, Program, or Title / Description of Course		
<b>6</b>		
Institution / Sponsoring Agency		Years / Hours
Department, Program, or Title / Description of Course		

**Individual who will be submitting a reference form:**

**Name:** \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Documentation of training, work and/or accomplishments in the fields of Sexology/Erotology are attached.**

**Submission of \$250 (Applicants outside the U.S., please include an additional \$50 to cover shipping and handling) non-refundable lifetime application fee made payable to "The American College of Sexologists" in United States funds.**

**I hereby certify that the information submitted in this application is accurate to the best of my knowledge, and permit The American College of Sexologists to verify any information I have submitted.**

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

***This form should be mailed directly to:***

**THE AMERICAN COLLEGE OF SEXOLOGISTS  
Thomas Erwin Gertz, Ed.D., DASC, Executive Director  
Post Office Box 640405, San Francisco, CA 94164-0405, USA**

**ExecDirACS@aol.com — [www.AmericanCollegeofSexologists.org](http://www.AmericanCollegeofSexologists.org)**

***Certified Sexologists will receive:***

- > An attractive certificate, with your name and membership status, measuring 11" X 14" suitable for framing.
- > Lifetime membership in The American College of Sexologists.
- > The use of "ACS" following your name and degree(s) to show your membership status.
- > The option of listing your name, specialties and contact information on The American College of Sexologists website ([www.AmericanCollegeofSexologists.org](http://www.AmericanCollegeofSexologists.org)).

**THE AMERICAN COLLEGE OF SEXOLOGISTS**  
**Membership Application Reference Form**

*Please duplicate as needed*

**Applicant's Name:** \_\_\_\_\_

**City and State / Country** \_\_\_\_\_

**I, \_\_\_\_\_ (please print) have**

**known this applicant for \_\_\_\_\_ years in the following relationship(s):**

\_\_\_\_\_  
(teacher/colleague/partner, etc.)

**Please list your knowledge of the applicant's work and accomplishments in the fields of Sexology and/or Erotology.**

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

(Use the reverse side of this sheet if desired)

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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