**Certificate of Achievement**

**This award is presented to**

**in recognition of successful completion of IoWA-PCIT**



**Therapist \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Imitate**

**Do what they do**