

APPLICATION FOR ADMISSION



Please type or print legibly in ink and return with non-refundable \$75.00 application fee to:

Office of Admissions
Healing Tao Institute
 PO Box 9312, Austin, Texas 78766
 Voice (512) 447-9507 Fax (208) 248-6929

Name _____
Last First Middle

Address _____ Phone _____

City _____ State _____ Zip _____

E-mail address _____ Date of expected enrollment: Yr _____ March June Sept Dec

Date of birth _____ Place of birth _____ Male _____ Female _____

Country of citizenship _____ Social Security Number (if applicable) _____

Emergency contact _____
Name Address

Phone Relationship to You

List in chronological order colleges and universities attended, and degrees awarded. (Please have transcripts sent directly from each institution)

| Institution | Dates attended | Degree/date | Field of study |
|-------------|----------------|-------------|----------------|
| | | | |
| | | | |
| | | | |

What is your current occupation? _____

List in chronological order employment for the last three years. (Healing Tao Institute reserves the right to contact anyone listed.)

| Employer name | Employer address and phone | Approximate dates | Position and type of employment |
|---------------|----------------------------|-------------------|---------------------------------|
| | | | |
| | | | |
| | | | |

List names and addresses of at least two people you are asking to send letters of recommendation. (Additional references may be required.)

- _____
- _____
- _____

Please indicate how you plan to finance your education.

How did you find out about Healing Tao Institute's Medical Qigong Program?

Have you ever had a professional license revoked? _____ If yes, please give details on separate page.

Have you ever been convicted of a crime? _____ If yes, please give details on separate page.

The application process is not considered complete until all the following documentation has been received by the Admissions Office and an admissions interview completed. Please attach additional sheets where necessary.

- A. A completed application form
- B. A \$75 non-refundable application fee
- C. A typed résumé, outlining educational and professional development
- D. At least two letters of reference
- E. Official college transcripts sent directly from the colleges attended to Healing Tao Institute
- F. Copies of any professional licenses or certificates
- G. A health certificate completed by a licensed health care practitioner
- H. A handwritten statement of no less than 350 words to include:
 - your personal reasons for embarking on this particular course of study
 - proof of your understanding of the major commitment of time, finances, and personal dedication necessary for a successful academic career
 - your career plans

I hereby certify that the information given by me in this application is accurate.

Signature Date

HEALTH CERTIFICATE

The following person has applied for admission to Healing Tao Institute. As part of the admissions process, all applicants are required to have a health certificate completed and signed by a licensed health care provider. *Thank you for assistance with this application.*

Applicant's Name _____

How would you describe the overall health of the applicant?

Does this person have any communicable diseases or any other health problems that could affect his/her working in Student Clinic? If yes, please explain:

According to your intake, does this applicant have any of the following: **Y=Yes** **N=No** **NTF=Not Tested For**

Hepatitis B or a history of Hepatitis B Tuberculosis Communicable Diseases Chronic Fatigue Syndrome

Serious Blood Disorders Cancer Diabetes Hypertension

The two-year certification program at the Institute is a demanding program. Does this person have any health problems that might affect his/her being a student at the Institute? If yes, please explain:

Signature Date

Licensed Health Care Provider's Name Address Phone License #