



ARIZONA WESTERN COLLEGE MESSAGE THERAPY PROGRAM APPLICATION

Turn in your application at:

Career & Technical Education Office located in the CTE Building next to the Math and Writing Labs or
2451 S Avenue A, Suite E101 – East of Kachina Medical Plaza
Applications Accepted Monday – Thursday, 9 AM to 1 PM

NON-DISCRIMINATION STATEMENT

Arizona Western College does not discriminate in admission or access to, or treatment in employment in, its services, programs, or activities on the basis of race, color, national origin, sex, religion, age, or disability.

DECLARACIÓN DE PRÁCTICAS ANTIDISCRIMINATORIAS

Arizona Western College prohíbe la discriminación en el empleo en base a la raza, el color, la religión, el sexo, la nacionalidad, la religión, la edad o la discapacidad de las personas. La habilidad limitada del idioma inglés no es una barrera para la admisión o la participación de las carreras técnicas y vocacionales disponibles en la institución.

(PLEASE TYPE OR PRINT LEGIBLY. YOU MUST FILL IN ALL THE INFORMATION)

NAME: Last: _____ First: _____ Middle: _____

FORMER NAME (S): _____

ADDRESS: _____

Street/Apt:

City:

State/Zip:

AWC STUDENT ID # _____

AWC TORO EMAIL ADDRESS: _____

PHONE NUMBER (S) Home: _____ Work: _____ Cell: _____

How did you hear about this program? Newspaper Radio Word of Mouth Other _____

Have you had a massage therapy or other health professional certification that was voluntarily surrendered or revoked in Arizona or another state? Please explain on the back of this application.

The following information is for institutional research purposes only, **not for admission**. Please place a ✓ mark in the appropriate box.

Male Female Date of Birth: _____

Ethnic Group: Hispanic American Indian/Native Alaskan White, Non-Hispanic
Asian or Pacific Islander Black, Non-Hispanic Other: _____ (Please specify)

When I begin the Massage Therapy Program, I will have already completed the following degree program:
None Associate Baccalaureate Master's Doctoral Study Major: _____

I am working toward: (check all that apply) Certificate Applied Associate of Science Additional Course for Licensing

I am planning to work as a Massage Therapist in Yuma , in Arizona , or another state

In planning for future growth, the LMT program may offer the lecture portion of core courses online. If available, do you wish to be considered for this online offering? No Yes (If Yes, please complete the "Is Online Learning for Me?" survey.)

I desire consideration for admission to the AWC Massage Therapy Program. I understand that my admission is contingent upon my ranking, based on reading and math placement test scores. I understand that as a condition of admission in the AWC Massage Therapy program, I must satisfactorily complete and pass the Pre-Admission Criminal Background Check and drug screening. I fully understand that if I fail to pass the Criminal Background Check or drug screening I will be disqualified from admission.

Please complete the following disclosures as per policy.

Felony Convictions: No Yes (If yes, please explain)

Misdemeanor involving prostitution or solicitation or other similar offense: No Yes (If yes, please explain)

Signature _____

Date _____