

PHILADELPHIA UNIVERSITY

OFFICE OF CONTINUING AND PROFESSIONAL STUDIES

Application for Admission to Associate of Science Degree in Occupational Therapy Assistant Studies Program

To apply for application to Philadelphia University's Associate of Science Degree in Occupational Therapy Assistant Studies Program, please:

1. Complete all information on this application and submit it to the Office of Continuing and Professional Studies.
2. Submit a personal statement (1-2 pages, double spaced) answering the following:
 - Describe your career goals.
 - How will participation in Philadelphia University's Associate of Science degree in OTA Studies program assist you in achieving these goals?
 - Discuss some of the reasons you are considering OT as a career.
3. Submit a current resume as evidence of your work or extracurricular experiences.
4. Submit formal transcripts (sealed) from
 - the high school from which you graduated or GED certificate
 - any accredited colleges/universities (if applicable) that you have previously attended
5. Schedule and complete two occupational therapy site visits.
 - Candidates to the Occupational Therapy Assistant Studies program will be expected to share firsthand knowledge of Occupational Therapy gained through a minimum of visits to two distinctly different occupational therapy sites.
 - These **visits must be completed prior to** your interview and the Occupational Therapy Site Visit **form must be completed in full and submitted prior to** your interview.
 - Contact information for suggested visitation sites can be obtained by email from dahlm@philau.edu
6. Schedule and complete an interview with an OTA faculty member
 - Contact the Office of Continuing and Professional Studies to schedule your interview
 - Interviews are conducted on Main Campus Tuesday or Thursday by appointment.
 - Your appointment will be confirmed via email

If you have any questions, please contact Marianne Dahl at The Office of Continuing and Professional Studies at 215.953.4505

Please note: The Occupational Therapy Assistant Studies Program at Philadelphia University has applied for accreditation and has been granted Developing Program Status from the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association. Prospective students will be kept informed of the accreditation status throughout this process. ACOTE may be contacted for further information or clarification at: Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA) P.O. Box 31220, Bethesda, MD 20824-1220 Phone: 301-652-AOTA (2682) E-mail: accred@aota.org Website: www.aota.org

Only students interested in the undergraduate Associate of Science Degree in Occupational Therapy Assistant Studies Program should complete this form. International citizens who hold visas (I-20) must also apply through the Admissions Office. Students interested in graduate Master of Science in Occupational Therapy study must apply through the Office of Graduate Admissions.

PERSONAL INFORMATION

NAME: _____ Male Female
LAST NAME FIRST NAME MIDDLE NAME/INITIAL

HOME ADDRESS: _____
STREET

CITY STATE ZIP COUNTRY

SOCIAL SECURITY NUMBER: _____ PHONE: (_____) _____
AREA CODE

EMAIL: _____ DATE OF BIRTH: _____
MM/DD/YYYY

ETHNICITY: Hispanic or Latino Not Hispanic or Latino

RACE: (Choose one or more)

- White Black or African American Native Hawaiian or other Pacific Islander
 Asian American Indian or Alaska Native

YEAR YOU WILL BEGIN STUDIES: Sept. _____ (year)



PREVIOUS EDUCATION

List below each educational institution you have attended, beginning with high school. Attach a separate sheet, if necessary. Continuing and Professional Studies should receive an official transcript from each institution.

HIGH SCHOOL	CITY, STATE, COUNTRY	YEAR OF GRADUATION OR DATE GED EARNED	
NAME OF INSTITUTION	CITY, STATE, COUNTRY	DATE ATTENDED	DEGREE EARNED
NAME OF INSTITUTION	CITY, STATE, COUNTRY	DATE ATTENDED	DEGREE EARNED
NAME OF INSTITUTION	CITY, STATE, COUNTRY	DATE ATTENDED	DEGREE EARNED
NAME OF INSTITUTION	CITY, STATE, COUNTRY	DATE ATTENDED	DEGREE EARNED

EMPLOYER INFORMATION

NAME OF EMPLOYER		
ADDRESS	CITY, STATE, ZIP	TELEPHONE NUMBER
EMAIL		

Do you require any special services due to a disability? Yes No

How did you learn of Philadelphia University and its OTA Studies Program?

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Received Information in the Mail | <input type="checkbox"/> Friend or Relative | <input type="checkbox"/> College Fair |
| <input type="checkbox"/> Newspaper Ad | <input type="checkbox"/> Community College Referral | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Live in area/drive by | <input type="checkbox"/> Radio Ad | (Please specify) |
| <input type="checkbox"/> Postcard | <input type="checkbox"/> Internet | |

Signature _____ Date _____

RETURN THIS FORM TO:
Office of Continuing and Professional Studies
Philadelphia University
School House Lane and Henry Avenue
Philadelphia, PA 19144-5497
215.951.2900

OFFICE USE ONLY

Date Application Received _____

Initials _____