

APPLICATION FORM

Okanagan Valley College of Massage Therapy Ltd. 200, 3400 – 30 Avenue, Vernon BC V1T 2E2



Please tell us about yourself:

Last Name:	Middle Name:	First Name:
Full Mailing Address: (with city and postal code)	Best Number to reach you at (with area code)	Email Address:
Residency Status: <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Landed Immigrant <input type="checkbox"/> Study Permit <input type="checkbox"/> Other <input type="checkbox"/> Work Visa		Date of Entry into Canada (if applicable): (Year) _____ (Month) _____
<input type="checkbox"/> Two Year Massage Therapy Diploma <input type="checkbox"/> Not seeking Advanced Placement <input type="checkbox"/> Advanced Placement Option <input type="checkbox"/> Kinesiology Degree/other <input type="checkbox"/> Transferring from another program ->		Start Date: January 20____ September 20____ School transferring from: _____

Graduates of OVCMT are eligible for BHSc credit at TRU/Open learning, and BTSM credit at SIT in New Zealand

Educational Information:

Previously attended schools must send transcripts directly to OVCMT, Attention: Admissions

High School Attended: _____ City and Province: _____ Grade 12 Diploma Achieved in: _____ (year)
Post-Secondary Education: _____ Degree, Diploma or Certificate earned: _____ Year: _____

Are you a student with a documented disability requiring accommodation? Yes No
 If yes, a current Psycho-Educational Assessment, or detailed description of physical accommodations required, must accompany this application submission.

How did you hear about OV College of Massage?

OV Sites <input type="checkbox"/> OV Website <input type="checkbox"/> OV Facebook Page	Internet Search <input type="checkbox"/> Google <input type="checkbox"/> Other: _____	Internet Ads <input type="checkbox"/> Facebook Ad <input type="checkbox"/> Google Ad <input type="checkbox"/> Other: _____	Word of Mouth <input type="checkbox"/> High School Counsellor <input type="checkbox"/> Friend <input type="checkbox"/> Other: _____
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Checklist

<input type="checkbox"/> Completed Application Form	<input type="checkbox"/> Employment Resume
<input type="checkbox"/> Application fee of \$150 (non-refundable)	<input type="checkbox"/> Student Budget Worksheet (completed in full)
<input type="checkbox"/> Application fee of \$225 for the Advanced Placement Option (non-refundable)	
<input type="checkbox"/> Health Assessment Form signed by both you & your physician	
<input type="checkbox"/> Application Essay (see following for requirements)	<input type="checkbox"/> Three reference letters (see the following page for requirements)
<input type="checkbox"/> Copies of High School Transcript and any educational degrees, diplomas, certificates, etc.	<input type="checkbox"/> Criminal Record Check (see the following page for requirements)

Payment Option:

E-transfer to payments@ovcmt.com *Auto deposit – add your name in the notes/comment section please.
 Credit Card# _____ Expiry: _____ CVS code: _____

Signature: _____ Date: _____

If completed electronically, please tick this box to confirm your typed name as your signature indicating that the information on this application form, along with the required documentation, is true and accurate to the best of your knowledge.

Application Essay Requirements

Please write a concise essay answering the following questions:

- Why do you want to become a Massage Therapist?
- What are your expectations of yourself as a full-time student?
- What are your expectations of this Massage Therapy program?
- What do you personally have to offer this profession?
- What has been your experience with Massage Therapy?
- What role do you think Massage Therapy should play in the allied health field?
- Describe and discuss three different types of Massage Therapy practices.
- What are the best aspects of the Massage Therapy Practices you have visited?
- What are your professional plans upon graduation?

Reference Letter Requirements

Three current non-family reference letters from people who have known you for at least five years. **These letters should be emailed directly to OVCMT at info@ovcmt.com** We request that at least one of these letters come from a colleague or employer. For students applying directly out of high school or college, we request at least one letter be from a teacher or school administrator. Please ask your referees to provide their contact information for checking references.

Criminal Record Check

Official documentation of a criminal record check is required before full acceptance into the program. Students are required to have a Criminal Record Check for “working with Children and Vulnerable Adults”, which is available through the Provincial Government. Criminal Records Check ***not through RCMP.**

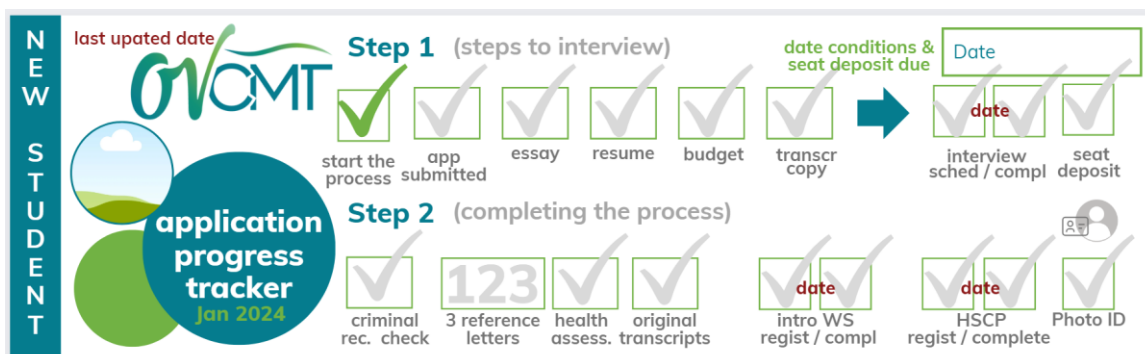
Link: <https://justice.gov.bc.ca/criminalrecordcheck>

Access code: FRCFUUJ3S4 Working with Children and Vulnerable Adults

Other Important Information

You are required to complete an Introductory Workshop, personal interview, and all academic prerequisites before final acceptance may be granted. It is possible to receive an acceptance conditional upon completion of the prerequisites.

Prospective students are advised to submit this application as soon as possible. Classes are limited in size. You may be waitlisted for a subsequent intake. Elements do not need to be submitted all at once. This is the visual tracker we will work together on, as you submit your information.



Your completed application and electronic documents can be forwarded to info@ovcmt.com. Original documents should be forwarded to: Okanagan Valley College of Massage Therapy Ltd. 200, 3400 – 30 Avenue, Vernon BC, V1T 2E2

If you have any questions or require any assistance,
please call: (250) 558-3718 or 1-800-701-8863