

Oshio College of Acupuncture & Herbology (OCAH)
 (Royal Pacific Institute 加拿大太平洋中医学院)
 Suite 100-3491 Saanich Rd, Victoria, BC, Canada Postal Code: V8W1K7
 Tel: (250) 360-2700 Fax: (250) 472-6611
 Email: oshio@shaw.ca

APPLICATION FOR ADMISSION

Type or print. Use a separate paper if necessary.

Applying for: (circle one)

Tui-Na Therapeutic Massage Program

Traditional Eastern Natural Health Care for the Elderly program

3-year Acupuncture Program

4-year Traditional Chinese Medicine Practitioner Program

5-year Doctor of Traditional Chinese Medicine Program

To commence study in : January May September Year _____

1. Personal Information

Full name: _____ Date of Application: _____

Address: _____

Date of birth (optional): _____ Citizen of _____ Ferment resident of _____

Tel: _____ Email address: _____

2. Education. Please list secondary school and post secondary schools and degrees (attach extra sheets if needed).

3. Related training. Indicate previous training in Chinese medicine and/or related fields (attach extra sheets if needed):

4. Work. Indicate your work experience for the last five years if it is applicable:

5. Finances. Explain how you will finance and support yourself while attending the program (attach extra sheets if needed):

6. Personal essay. On a separate page, please discuss the processes and experiences that have led you to want to study Acupuncture/Chinese Medicine (maximum 500-600 words).

Summary:

A complete Application contains items A-D:

- a: Official Transcripts of all previous post secondary education or high school diploma.
- b: Non-refundable Application fee of \$250.00 CDN. (\$500 for International Students)
- c: Photocopies of diplomas, membership documents, or ID if available
- d: Personal essay.

Applications should be sent to:
 The Registrar
 Oshio College of Acupuncture & Herbology
 Suite 100, 3491 Saanich Road
 Victoria, BC, V8W1K7
 Canada

Please note:

Applicants are advised to familiarize themselves with the current Calendar. Occasionally it is necessary for us to change the order of presentation in a class or the instructor. In all cases we try to provide an equivalent educational experience and always provide instructors who are fully qualified.

The Application Committee may request a personal or telephone interview with any applicant.

All materials filed in support of this application become part of your permanent, confidential record at the OCAH. They are not returnable so provide copies.

I HEREBY CONFIRM THAT ALL INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND ACCURATE.

Signature of Applicant/

Date

Accepted for Oshio College/Title/

Date