# Alberta College of Acupuncture & Traditional Chinese Medicine

102, 1910 - 20th Ave NW, Calgary, Alberta, Canada T2M 1H5 Phone: 403-286-8788, Toll Free:1-888-789-9984 Email: <u>admin@acatcm.com</u> Website: <u>www.acatcm.com</u>

# **Application for Admission**

(2020 - 2021)

Apply for:	
First Name: Last Name:	Middle Name:
Gender: OMale OFemale Birthdate: MM/DD/YYYY	Current Occupation:
Permanent Address:	Mailing Address (if different from permanent address):
Street Address:	Street Address:
City:	City:
Province / State:	Province / State:
Country:	Country:
Postal/Zip Code:	Postal/Zip Code:
Home Phone: Cell Phone:	email:
Are you a: Canadian Citizen Canded Immigrant C	Visa Student Other:

#### Education Background - High School

Dates Attended	School Name and Address	Qualification and Grades Achieved

## Education Background - Advanced Education

Dates Attended	Institution Name and Address	Subject(s) Studied or Degree Title	Qualification and Grades Achieved

#### **Employment History**

<b>Dates</b> From / To	<b>Position</b> Please Indicate Full/Part Time	Employer Name and Address	Brief Description of Duties

#### **Additional Information**

Have you ever been convicted of any crime?					
	⊖ Yes	∩ No	(If yes, please enclose detailed descriptions.)		
Have you ever been diagnosed with any co	ntagious d	diseases i	n the past two(2) years?		
	○ Yes ○ No (If <i>yes</i> , please enclose detailed descriptions.)				
Has your application to ACATCM been ever	Has your application to ACATCM been ever denied?				
	○ Yes	○ No	(If yes, please enclose detailed descriptions.)		
Emergency Contact:			Relationship:		
Phone Number: email					

#### Please check submissions have been accompanied with this application:

Although you may complete and submit this application by email, printed application and associated documents are required in order to complete registration process.

A Letter of Intent

Transcripts from all post secondary institutions attended

- Copies of Certificate(s), diploma(s), and/or degree(s) awarded
- Two recent passport-sized photos
- Two referral letter from non-family members
- Application fee

Note: International applicant should also include copies of TOEFL or other English Equivalency test result.

A \$100.00 non-refundable application fee in Canadian funds must be included with this application. Please choose the form of payment enclosed:					
	Certified Cheque	O Money Order	O Bank Draft		

All Fees are payable to ACATCM in Canadian funds. Please do not send cash.

### DECLARATION

I certify that all statements on this application form and enclosed documents are true and complete in all respects, and no relevant information has been withheld. I agree to abide by the rules and regulation of this institute. I understand that "fees are established pursuant to regulatory authority and as such are subject to review and change as required".

Date:

Signature:

MM / DD / YYYY

For Office Use Only			Initial Here
Date Received:		Ву:	
Date Reviewed:		Ву:	
Date Approved:		Ву:	
Date Denied:		Ву:	