

<b>Office Use Only</b>
Date Received _____
Contacted _____
Notes:

Application for admission to:

## OCCUPATIONAL THERAPY ASSISTANT PROGRAM

820 West Panola  
Carthage, Texas 75633

**This application and all required documentation must be on file by Monday, June 4, 2012.**

**INSTRUCTIONS FOR COMPLETING THIS APPLICATION:** Please complete this application by typing in your responses. Bring the completed application and the observation verification forms to the OTA department located in the W.C. Smith Health Science Building or mail them to the address above. If you need further assistance, contact the Occupational Therapy Assistant Department by phone at (903) 694-4000. **PLEASE DO NOT FOLD, STAPLE OR PUT THIS APPLICATION IN A BINDER OR THREE HOLE PUNCHED FOLDER!**

If you have a change of name, address or phone after completing this application, it is your responsibility to notify the Occupational Therapy Assistant Department.

Today's Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Social Security Number: \_\_\_\_\_ Birth Date \_\_\_\_\_

Name in Full: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_  
Number and Street County City State Zip

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cellular Phone: \_\_\_\_\_

Email address \_\_\_\_\_

Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Have you ever submitted an application to any other allied health program? Yes No

If yes Degree earned or reason for non-completion: \_\_\_\_\_

What program? \_\_\_\_\_ Name of school: \_\_\_\_\_

Dates attended: \_\_\_\_\_

**Letter of Good Standing from all previous allied health programs is required if program was not completed.**

I have applied and have been accepted to Panola College Yes No

I have: met TSI requirements not met TSI requirements

Please check one:

Observation hours are attached.

Observation hours will be mailed separately by the OTR or COTA.

**Give information concerning high school graduation or G.E.D.:**

Name of School \_\_\_\_\_ City & State \_\_\_\_\_ Date of Graduation \_\_\_\_\_

GED date \_\_\_\_\_

**Give information concerning ALL college, university, vocational schools, and allied health schools attended and the number of credits earned:**

Name of Institution \_\_\_\_\_ City & State \_\_\_\_\_ Number of Credits Earned \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*You are required to send one (1) official transcript if you have attended a college or university (a minimum of 10 credit hours); or one (1) official copy of your high school transcript or GED certificate to the Registrars Office at 1109 W. Panola, Carthage, TX 75633 before submitting your application.*

List any scholastic honors: \_\_\_\_\_

List any licenses or certificates held (do not include Driver's License): \_\_\_\_\_

**Give information concerning last three (3) employers: (List more recent job first)**

Employer \_\_\_\_\_ Address: Street, City, State, Zip \_\_\_\_\_ Dates Employed \_\_\_\_\_ Position Held \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

How do you plan to meet the expenses of this program? (Check all that apply.)

- |                                    |  |
|------------------------------------|--|
| 1. Grant                           | 5. Part-time job (How many hours?)                         |
| 2. Loan                            | 6. Family Support [ Family Support Parents Other relative] |
| 3. Scholarship                     | 7. Government Agency V.A. TRC WIA Other                    |
| 4. Full-time job (How many hours?) | 8. Other (please specify _____)                            |

If you checked number 1, 2 or 3 above (Grant, Loan, Scholarship), have you already applied for financial aid at Panola College? Yes No

How did you find out about the Panola College OTA program?

- |                                     |                         |
|-------------------------------------|-------------------------|
| 1. High school counselor/instructor | 5. Through work         |
| 2. College Counselor/Instructor     | 6. Career Days          |
| 3. Classmate/friend                 | 7. Internet             |
| 4. Relative                         | 8. Other (specify_____) |

**Essay:**

Attach a 400 – 450 word, typed, double spaced essay explaining why you want to become a COTA.

**Complete the remainder in writing (no electronic initials or signatures)**

*I understand that if I have been charged or convicted of a felony offense that I might not be eligible for OTA licensure in Texas and/or certification by the National Board for Certification in Occupational Therapy.* \_\_\_\_\_ (initials)

The program for which you are applying may require extended travel for clinical assignments in the early morning, late evening and/or Saturdays. Are you prepared to meet this requirement? \_\_\_\_\_

I hereby certify that the information contained in this application is true and complete to the best of my knowledge. I understand that any misrepresentation or falsification of information on this or any part of the application process is cause for denial of admission or expulsion from the Occupational Therapy Assistant Program.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

*Panola College is an Equal Opportunity Institution that provides educational and employment opportunities on the basis of merit and without discrimination because of race, color, sex, age, national origin, veteran status, or disability.*

**ALL MATERIALS MUST BE RECEIVED BY THE APPLICATION DEADLINE**

*Any applications received after the deadline will not be considered.*

Any application that does not include all required material will be considered INCOMPLETE. If you are turning in your packet in person, please deliver directly to the OTA Department Secretary in office 152 of the Health Science Building located at 820 W. Panola Street, Carthage, TX. Office hours are Monday – Thursday 7:30 a.m. – 4:30 p.m. and Friday 8:00 a.m. to 12:00 p.m. If you have any questions please e-mail [mcash@panola.edu](mailto:mcash@panola.edu) or call 903-694-4000.

## **Check List**

Applied for admission to Panola College

Have met TSI requirements

OTA Application completely filled out

400 – 450 word essay attached to application

Observation Form(s) – enclosed in a sealed envelope or being mailed by OT or COTA

All official transcripts mailed to the Admissions Office