



The Institute *for* Holistic Health

Transfer Student Application Form

A \$150 or \$300 application fee is required when submitting a Transfer Student application to **The Institute for Holistic Health**. Checks can be made out to **The Institute for Holistic Health**.

Applicant's Personal Information

Full Name: _____

Address: _____

Cellphone: _____ Home Phone: _____

Email: _____ Date of Birth (mm/dd/yyyy): _____ Age: _____

Are you a citizen of the U.S.? Yes No

Preferred and/or Previously Held Names _____

Please list all preferred and/or previously held legal names, including those that would appear on school transcripts or other admissions documents.

Ethnicity: White, non-Hispanic Black, non-Hispanic Hispanic Native American/Eskimo
 Asian/Pacific Islander Mixed Ethnicity

Gender: Male Female Unspecified Other _____

Have you ever been convicted of a felony or misdemeanor (excluding traffic violations) or are there any pending charges against you? Yes No

If yes, please explain: _____

How did you hear about **The Institute for Holistic Health**?

Referred by a friend

Google search

Facebook

Instagram

LinkedIn

Other _____

Education

You must have either completed high school, achieved a GED or the High School Equivalency (HSE) before enrolling at **The Institute for Holistic Health**.

High School Name and State: _____

Dates Attended From: _____ To: _____ Date Graduated: _____

If not a High School Graduate, did you obtain a GED or the equivalent? _____

College/Vocational School Name and State: _____

Dates Attended: From: _____ To: _____ Degree Earned: _____

Which massage therapy program/school did you attend?: _____

Dates Attended: From: _____ To: _____

Do you have any physical limitations that would prevent you from participating in the program or working as a massage therapist? Yes No *If yes, please explain:* _____

The Institute for Holistic Health can provide accommodations in the classroom for students who qualify. Please check YES or NO if you would like more information about applying for accommodations by meeting with the Educational Director. Yes No

Transfer Student Details

Please select which situation applies to you:

Transfer Student A (\$150 application fee)

You have completed all of a massage therapy program at an acceptable school of massage therapy in another state, country, or territory but the program was less than 500 hours.

OR

You completed some of a massage therapy program at an acceptable school of massage therapy in New York, another state, country, or territory but did not complete the program.

• **You will need to request that your official transcripts be sent to *The Institute for Holistic Health*.**

Please have the registrar of your prior massage therapy school send your official transcript to: Kristen@massageschoolny.com or attention Kristen Nelson, 35 Main St., 4th floor, Poughkeepsie, NY 12601.

• Please attach to your application: the website or printed version of a course catalog with the course descriptions that you have completed.

Transfer Student B (\$300 application fee)

You have completed a program of at least 500 classroom hours and have received a diploma or certificate.

• Please attached your deficiency letter that has been issued to you by the New York State Education Department.

• How many hours did you complete at your prior massage therapy school? _____

First Reference

Please include two professional references of a previous employer, colleague, professor, etc. References may not be related to applicants and applicants are required to know the reference for more than one year.

Full Name: _____ Relation: _____

Phone: _____ Email: _____

Second Reference

Please include two professional references of a previous employer, colleague, professor, etc. References may not be related to applicants and applicants are required to know the reference for more than one year.

Full Name: _____ Relation: _____

Phone: _____ Email: _____

Emergency Contact

Full Name: _____

Cellphone: _____ Workphone: _____

Signature

Applicant's Signature: _____ Date: _____

Thank You!

On behalf of every faculty and staff member at **The Institute for Holistic Health**, we would like to welcome you to our unique compassionate community of learning. We look forward to helping you become a successful massage therapist in New York!



The
Institute for
Holistic Health

PLEASE MAIL YOUR COMPLETED APPLICATION TO
35 MAIN STREET, 4TH FLOOR, POUGHKEEPSIE, NY 12601
OR EMAIL IT TO KRISTEN@MASSAGESCHOOLNY.COM