



PACIFIC COLLEGE OF KAUAI
Center for Awareness and Bodywork

Today's Date _____

APPLICATION FOR ADMISSION to CONNECTIVE BODYWORK TRAINING

NAME _____
Last, First Middle

MALING ADDRESS _____ PHONE #'S _____ / _____
Street (or Box number) Day Evening

_____ EMAIL _____
City, State Zip Code

BIRTH DATE _____ BIRTH PLACE _____ FEMALE/MALE _____

MARITAL STATUS _____ OCCUPATION _____

REFERENCES: Two People Other Than Immediate Family, Who Have Known You For More Than Three Years

Name

Name

Address

Address

City, State Zip Code

City, State Zip Code

Telephone Day Evening

Telephone Day Evening

WHICH CONNECTIVE BODYWORK TRAINING ARE YOU APPLYING FOR?

City _____ Month _____ Year _____

EMPLOYMENT BACKGROUND

Current Work _____ Title _____

_____ How long? _____ Where? _____

Previous relevant interests, experiences or work during the last five years _____

PREVIOUS EDUCATION

High School you graduated from	City	State	Date Graduated
List all Colleges, Universities, and Vocational Schools etc., you attended			
<u>Name</u>	<u>City</u>	<u>State</u>	<u>Attended from / to</u>
		<u>Major</u>	<u>Degree, Certification or number of credits</u>

ANY ADDITIONAL INFORMATION YOU WOULD LIKE TO INCLUDE REGARDING PREVIOUS TRAINING AND/OR EXPERIENCE IN BODYWORK, AWARENESS WORK, OR RELATED FIELDS? (Please use additional paper if necessary or include copies of course work Certificates if applicable)

Are you currently charged or have you ever been convicted or found guilty of violating any federal, state or municipal ordinances other than traffic or other minor offenses? Yes _____ No _____ If yes, please supply details

HOW DID YOU HEAR ABOUT PACIFIC CENTER FOR AWARENESS & BODYWORK?

PLEASE INCLUDE THE FOLLOWING WITH THIS APPLICATION:

- A brief biographical sketch explaining your motivation for study and your philosophy of wellness & balance. Include what you feel is your personal growing edge in your life. What are your current emotional obstacles and strengths? What would you like to gain or let go of personally, thru participating in this growth oriented professional program?
- A recent photograph of yourself for our files and identification
- Copies of transcripts or copies of certificates from any previous applicable training (or have them sent)
- \$50 APPLICATION FEE (non-refundable) **and**
- At least \$100 DEPOSIT toward your tuition.

*** Checks made payable to Pacific College ***

PLEASE NOTE:

Prior to final acceptance in the program, an interview with the Directors may be required.
 If accepted, a letter of intent will be sent to you to sign and return with your *additional tuition deposit.
 *At that time you will need to send at least \$400 ADDITIONAL DEPOSIT to secure your place in the class.
 This deposit and the previous \$100 Deposit will be applied toward your tuition balance.

Should you cancel your enrollment up to 14 days before the start of class, a full refund of all tuition paid will be given.
 Any cancellations made less than 14 days prior to start of class will forfeit the \$500 deposit. Any tuition paid over \$500 will be refunded to you. All refund checks will be mailed within 30 days of date of notification.
 A returned check fee of \$25 will be charged on any check returned for insufficient funds.

After completing this application, I have re-read it and state that it is complete and all information is true.

SIGNATURE _____ **DATE** _____

We look forward to meeting and growing with you...