



# Application for Admissions

Attach two  
Passport  
Sized photos  
HERE

## Arizona School of Acupuncture and Oriental Medicine

### Personal Information:

\_\_\_\_\_  
(First Name) (Middle Initial) (Last Name)

<input type="checkbox"/> Male <input type="checkbox"/> Female	Country of Birth: _____		
	Race (required for NSLDS reporting):		
	<input type="checkbox"/> Black or African American	<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander
	<input type="checkbox"/> Asian <input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> White	<input type="checkbox"/> Other: _____

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Email Address (mandatory for admissions): \_\_\_\_\_

Social Security #: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Marital Status (circle one): Married / Single / Divorced / Widowed

In case of emergency, contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

- Phone #: \_\_\_\_\_ Address: \_\_\_\_\_

Other names used: \_\_\_\_\_

Is English your first language? Yes / No

- If no, what is your first language? \_\_\_\_\_
- How many years have you spoken English fluently? \_\_\_\_\_

### Education

Post Secondary Education

Institution:	City/State:	Years Attended:	Degree(s) Earned:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Healing Arts/Health Professional Education & Certifications:

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

## Physical/Mental History

1. Have you been diagnosed and/or treated for any mental/emotional or physical conditions, other than colds or minor injuries, in the last five years? Yes \_\_\_\_\_ No \_\_\_\_\_
  - If Yes, please attach an explanation on a separate sheet.
2. Have you ever been diagnosed with a learning disability? Yes \_\_\_\_\_ No \_\_\_\_\_
  - If Yes, please attach a separate sheet explaining how you plan on approaching your studies.
3. Do you have any special needs for accommodations? Yes \_\_\_\_\_ No \_\_\_\_\_
  - If Yes, please attach an explanation on a separate sheet.
  -
4. Have you ever been convicted of a felony or a misdemeanor? Yes \_\_\_\_\_ No \_\_\_\_\_
  - If Yes, please attach an explanation on a separate sheet.

## Financial Aid

Will you be applying for financial aid? Yes \_\_\_\_\_ No \_\_\_\_\_

If not, how do you plan to pay for your education? \_\_\_\_\_

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## Application Fee (check one & please include a check or money order):

- New Student \$150 Ck# \_\_\_\_\_
- Transfer Student \$200 Ck# \_\_\_\_\_
- Special Student \$25 CK# \_\_\_\_\_

## Program Applying for (check one):

- Master's in Acupuncture (M.Ac.)
  - Master's in Acupuncture and Oriental Medicine (M.Ac.O.M.)
  - Asian Body Work Therapy Tuina Certificate
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## Signature

By signing below I attest that the information I've given in this application is correct to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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*Please make a copy of this application for yourself and mail this application with the appropriate fee, made out to ASAOM. Mail to:*

Arizona School of Acupuncture and Oriental Medicine  
**ATT: Admissions Department**  
2856 E. Fort Lowell Rd.,  
Tucson, AZ 85716

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# Arizona School of Acupuncture and Oriental Medicine

## Application Supporting Documents

*Please use this document as a checklist for your records. During any point of the process, please let me know if I may be of further assistance. Congratulations on taking the first steps on a beautiful new journey!*

*In service and solidarity,*

*Tim Dunn, MAcOM  
Admissions Director*

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*“The Master views the parts with compassion,  
because he understands the whole.”*

*~ Tao Te Ching, #39, Stephen Mitchell*

Once you have submitted the 1) application form in full, 2) application fee and 3) all supporting documents, you will be contacted for an interview with the Director and your application will be reviewed by the Admissions Committee for final approval. The application fee holds your place in the program, pending the submission of the following supporting documents.

Supporting documents required for full acceptance:

1. Official transcripts from a baccalaureate college documenting a minimum of 60 semester credits (90 quarter credits). Have them mailed directly to the school. Att: Admissions
2. An official transcript from high school attended or GED. Mailed – Att: Admissions
3. Two passport sized photos (you may attach with your application, or send separately).
4. Essay of intention, 350 word minimum, stating:
  - a. Reason for undertaking this program
  - b. Understanding of the commitment of time, energy and dedication to succeed
  - c. Your vision post-graduation
5. Letter from a licensed acupuncturist stating you have had two acupuncture treatments.
6. A statement from a physician (can be your acupuncturist), stating you are in good health to complete a medical degree, and participate in physical activities such as Tuina (Asian Bodywork Therapy) Taichi and Qi Gong.
7. Proof of negative PPD test (tuberculosis skin test).
8. A typed professional resume.
9. 2 professional letters of reference.
10. A scheduled appointment (via telephone or in person) with Financial Aid Director.