

Application for Admission

MASTER OF SCIENCE IN OCCUPATIONAL THERAPY



An Education in the Franciscan Tradition

ALVERNIA
UNIVERSITY

ADMISSION CRITERIA AND PROCEDURES

ADMISSION CRITERIA

Quality of Previous Undergraduate and Graduate Work (Entry Level Only)

The minimum requirements necessary for admission to Alvernia University's MSOT Entry Level program will include an official transcript indicating that the applicant has earned an appropriate baccalaureate degree from an accredited college or university. A grade point average of 3.0 on a 4.0 scale for all previous undergraduate and graduate work is required for full acceptance.

Quality of Previous Undergraduate and Graduate Work (Master's Completion Only)

The minimum requirements necessary for admission to Alvernia University's MSOT Master's Completion program will include an official transcript indicating that the applicant has earned an appropriate baccalaureate degree from an ACOTE-accredited college or university in Occupational Therapy. Alternately, official transcript(s) indicating that the applicant has earned an appropriate baccalaureate degree from an accredited college or university in another field and completion of certification program in occupational therapy from an accredited program will also be accepted. A grade point average of 3.0 on a 4.0 scale for all previous undergraduate and graduate work is required for full acceptance.

Letters of Recommendation

The strength of letters of recommendation from persons competent to judge the applicant's probable success in graduate school will be evaluated. Each applicant will submit three letters of recommendation. Letters from former professors, employers, or supervisors familiar with the applicant's professional experiences, or from religious or community leaders must be forwarded directly to the School of Graduate and Continuing Studies at Alvernia University. Letters should be recent, and express how applicants might fair in a graduate school setting. At least one of the three letters should be from a person able to determine the applicant's academic capabilities (eg: a faculty member or academic advisor).

Applicant's Statement of Academic and Career Objectives

The applicant must submit a one-page statement that summarizes the value of the program of graduate study for his/her personal and professional growth and development. It is recommended that the applicant include discussion of understanding of the profession and include reference to any observations, visits, or experiences with occupational therapy/or therapists the applicant may have had.

Proof of current licensure and/or NBCOT board certification (Master's Completion Only)

Proof of current licensure and/or NBCOT board certification as a registered and/or licensed occupational therapist is required.

Additional Evidence of Potential for Success as a Graduate Student

Academic or professional awards, special certifications, samples of scholarly or creative work, completion of specialized examinations, and personal interviews will also be reviewed as evidence of potential.

Special Consideration of Applicant's Potential

Alvernia will weigh the evidence submitted by each applicant to assess the candidate's strengths and academic potential. Applicants to the MSOT degree program will be admitted as described:

Full Graduate Status: Students admitted to full graduate status must have submitted official documents demonstrating that they have earned a baccalaureate degree from an accredited college or university. These students must be fully qualified by the judgment of the Dean of the Graduate Programs. Students may opt for full-time or part-time enrollment.

Retention, Completion, and Degree Requirements

Students with full graduate status must respond to a written offer of admission that specifies the date of entrance into the MSOT program. This admission letter will serve as a permit-to-register for courses.

Progress toward completing the graduate degree will be evaluated by each student's advisor on a regular basis. Students with full graduate status must achieve and thereafter maintain a cumulative grade point average of 3.0 or higher to be retained in the program. Students will be required to submit proof of criminal background check, FBI clearance, child abuse clearance, recent physical, and private health insurance. Students who can't obtain clear records and/or proof of certifications/clearances will not be able to complete clinical portions of program and will be unable to graduate.

Additional Information

Students who have additional questions or would like more information should contact Graduate Admissions at 1.888.ALVERNIA (1.888.258.3764/1.610.796.8228) or graduate@alvernia.edu. More information on Alvernia's MSOT program can be found on the University's web site at www.alvernia.edu/academics/graduate/msot/index.html.

ADMISSION PROCEDURES (can be submitted on a rolling basis or all at once)

- Completed application form accompanied by a non-refundable \$50 application fee mailed to **Alvernia University, School of Graduate and Continuing Studies, 540 Upland Avenue, Reading, PA 19611**. Please make check payable to Alvernia University.
- Official college/institution transcripts
- Three letters of recommendation
- Personal statement.
- Academic or professional awards (not required, but encouraged)
- Proof of current licensure and/or NBCOT board certification (Master's Completion Only)

ADMISSION INFORMATION

Thank you for your interest in Alvernia University. We are pleased that you have decided to apply.

Alvernia University uses a rolling admission process, which means that we are constantly accepting and reviewing applications contingent on openings in specific academic programs. We prefer that you submit your application as

early as possible. Applications should be completed in ink or typed, and a non-refundable \$50 application fee should accompany the application.

Should you have questions about the application or Alvernia's admission process, please feel free to contact the School of Graduate Studies.

PERSONAL DATA

Name Miss Ms. Mrs. Mr. _____
LAST FIRST MIDDLE (JR., ETC.)

MAIDEN/FORMER _____ NICKNAME _____

Date of Birth ____/____/____ Social Security # _____

Are you a U.S. citizen or legally authorized to attend an institution of higher education in the United States? No Yes
 U.S. Citizen Permanent Resident Other _____
 Country of Citizenship _____ (Additional documentation may be requested to supplement your application.)
 Visa Status _____

Address _____
NUMBER/BOX STREET

CITY STATE ZIP/POSTAL CODE COUNTRY

Home Phone (____) _____ Cell Phone (____) _____ E-Mail Address _____

Employer _____ Work Phone (____) _____

Title/Position _____

OPTIONAL INFORMATION

<p>Gender</p> <p><input type="checkbox"/> Male</p> <p><input type="checkbox"/> Female</p>	<p>Ethnic Origin</p> <p>Are you Hispanic/Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><small>Regardless of your answer to the previous question, please select one or more of the following ethnicities that best describes you:</small></p> <p><input type="checkbox"/> American Indian or Alaska Native</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Black/African American</p> <p><input type="checkbox"/> Native Hawaiian or Pacific Islander</p> <p><input type="checkbox"/> White</p>	<p>Marital Status</p> <p><input type="checkbox"/> Single</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> Divorced</p> <p><input type="checkbox"/> Separated</p> <p><input type="checkbox"/> Widowed</p>	<p>Religion</p> <p><input type="checkbox"/> Islam</p> <p><input type="checkbox"/> Jewish</p> <p><input type="checkbox"/> Protestant</p> <p><input type="radio"/> Baptist</p> <p><input type="radio"/> Lutheran</p> <p><input type="radio"/> Presbyterian</p> <p><input type="radio"/> UCC</p>	<p><input type="radio"/> United Methodist</p> <p><input type="radio"/> Other Protestant _____</p> <p><input type="checkbox"/> Roman Catholic</p> <p><input type="checkbox"/> Other _____</p>
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EDUCATIONAL HISTORY

COLLEGE/UNIVERSITY/INSTITUTION <small>(List all attended)</small>	LOCATION <small>(City/State/Country)</small>	DATES ATTENDED <small>(Month/Year)</small>	DEGREE EARNED	CREDITS <small>(completed)</small>
_____	_____	/ TO /	_____	_____
_____	_____	/ TO /	_____	_____
_____	_____	/ TO /	_____	_____

PROFESSIONAL HISTORY

EMPLOYER NAME AND ADDRESS	DATES	POSITION
_____	_____	_____
_____	_____	_____
_____	_____	_____

GRADUATE DEGREE PROGRAM

Master of Science in Occupational Therapy

Entry Level

Master's Completion

Indicate Board certification and/or license _____

MILITARY INFORMATION

Are you currently serving or have you ever served with any branch of the United States Armed Forces? Yes No

Will you be receiving Armed Forces educational benefits? Yes No

ACADEMIC INFORMATION

Please indicate the semester and year you plan to enroll. Fall _____ Spring _____ Summer _____
YEAR YEAR YEAR

Expected student status: Full Time Part Time

Have you previously applied for admission to Alvernia University? Yes _____ No
SEMESTER/YEAR

OTHER COLLEGES/UNIVERSITIES

Please tell us about other colleges and/or universities to which you have applied, or plan to apply, for graduate admission.

Have you visited Alvernia University? Yes No

Please identify siblings, parents, or close relatives who are current students or graduates of Alvernia.

Name _____ Years attended _____ to _____ Relationship _____
YEAR YEAR

Name _____ Years attended _____ to _____ Relationship _____
YEAR YEAR

HOW DID YOU HEAR ABOUT ALVERNIA? (check and fill out information about all that apply)

- | | | | |
|---|--|---------------------------------------|--|
| <input type="checkbox"/> Television | <input type="checkbox"/> Friend | <input type="checkbox"/> Billboards | <input type="checkbox"/> Internet _____ |
| <input type="checkbox"/> Alumni | <input type="checkbox"/> Co-worker | <input type="checkbox"/> College Fair | <input type="checkbox"/> Newspaper _____ |
| <input type="checkbox"/> Magazine | <input type="checkbox"/> Information Session | <input type="checkbox"/> Radio _____ | |
| <input type="checkbox"/> Alvernia Website | <input type="checkbox"/> Mailings | <input type="checkbox"/> Other _____ | |

SIGNATURE

To the best of my knowledge, the above information is true.

I agree that, if accepted, I will comply with the rules and regulations of Alvernia University.

SIGNATURE _____

DATE _____

Please complete in ink or type. Enclose a completed application form accompanied by a non-refundable \$50 application fee mailed to Alvernia University, School of Graduate and Continuing Studies, 540 Upland Avenue, Reading, PA 19611. Please make check payable to Alvernia University.

Alvernia University complies with all federal, state, and local nondiscrimination laws in the administration of its educational programs and services and in its employment relationships.

Official Office Use Only

Application Fee pd not pd waived Application Rec'd _____ Accept Date _____ Confirm Date _____