



Enrollment Processing Services (EPS)
Attn: College of Allied Health and Nursing
Occupational Therapy Department
3301 College Avenue
P.O. Box 299000
Fort Lauderdale, Florida 33329-9905
www.nova.edu/ot

Occupational Therapy Department Master of Occupational Therapy Admissions Application

Thank you for your interest in the Occupational Therapy Department of Nova Southeastern University, College of Allied Health and Nursing. Please read the following information and fill out the application form completely.

- A nonrefundable application fee of \$50 must accompany this application. Check or money order should be made payable to Nova Southeastern University. Please include your name and Social Security number on your check or money order.
- Remember to sign the application form.
- The Office of Admissions works on a rolling admissions basis. Applications are accepted year round. To ensure that your application receives prompt consideration, you should apply early. All final documentation must be received by the Office of Admissions no later than one month prior to registration.
- The Committee on Admissions will consider no application until Nova Southeastern University has received all credentials and fees. All data submitted in support of this application becomes the property of the university and cannot be returned.
- Mail the completed application form and fee to Enrollment Processing Services at the address below. **All correspondence must be addressed and forwarded to the following address in its entirety.**

Nova Southeastern University
Enrollment Processing Services (EPS)
Attn: Occupational Therapy Admissions
3301 College Avenue
P.O. Box 299000
Fort Lauderdale, Florida 33329-9905

TO COMPLETE YOUR APPLICATION, YOU MUST ARRANGE TO HAVE THE FOLLOWING DOCUMENTS SENT FROM THE INSTITUTION OR SERVICE ISSUING THEM.

- official transcripts, certificate, and/or diploma from all previously attended undergraduate, professional, and graduate institutions
- official Graduate Record Examination (GRE) test scores (must be less than five years old)
- three letters of evaluation from individuals other than relatives, such as academic instructors and professors, health professionals, work supervisors, or volunteer supervisors (The evaluation form is supplied in the application package.)
- experience form showing proof of 40 hours of volunteer work in at least two different occupational therapy environments

It is your responsibility to inform the university of any changes in address or telephone number.



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To complete the admission process, please submit a nonrefundable, \$50 application fee and include your Social Security number on the check or call 800-338-4723, ext. 28000, with your credit card information. Also, please note, you will be charged the \$50, nonrefundable application fee for each application submitted to our institution. If you prefer to complete an online application, please visit our Web site at www.nova.edu/admissions and click on Admissions.

Please retain a copy of the application for your records.

Biographical Information

Please print in dark ink.

Name:

Prefix First Middle Initial Last/Family

Suffix (if appropriate) Maiden Name (if appropriate)

Do you have educational materials at NSU under another name, Social Security number, or ID? Yes No

If yes, what ID _____

**How did you learn about NSU?
 Please check all that apply.**

- Friend/Colleague/Relative
- NSU Employee
- NSU Student or Graduate
- Direct Mail
- TV or Radio Commercial
- SREB Electronic Campus
- eArmyU
- Web Site (specify)
- Newspaper (specify)
- Information Meeting (where)
- Conference (specify)
- Magazine (specify)
- Other (specify) (e.g., adviser)

Mailing Address

Street

City U.S. State, Territory, or Canadian Province ZIP/Postal Code

Nation

Is your permanent address the same as the address above? Yes No

Permanent Address

Street

City U.S. State, Territory, or Canadian Province ZIP/Postal Code

Nation

Business Address

Name of Company

Number and Street City

County State Country ZIP Code

Telephone Cellular/Pager

FOR NSU USE ONLY



Primary Phone Number (_____) _____ International Access Code (if applicable)
Permanent Phone Number (_____) _____ International Access Code (if applicable)
Cell Phone Number (_____) _____ International Access Code (if applicable)

Email Address _____

The university is required to collect the following information to comply with federal reporting requirements of the U.S. Department of Education. The collected information will not be used in any discriminatory manner.

Social Security Number _____

NSU ID# _____
(If known)

Birth Date _____
(mm/dd/yyyy)

Gender Female Male

Race

- | | | |
|--|--|--|
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Other Asian not listed | <input type="checkbox"/> White |
| <input type="checkbox"/> Asian Indian | <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> I decline to respond. |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Native American or Alaskan Native | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Japanese | |
| <input type="checkbox"/> Korean | <input type="checkbox"/> Thai | |

Ethnicity

- Mexican Puerto Rican Other Hispanic or Latino I decline to respond.

Citizenship

- U.S. Citizen Foreign (nonstudying in the U.S.)
 Resident Alien I decline to respond.
 Nonresident Alien

What is your nation of citizenship? _____

If you are an international student and will be studying at one of our U.S. locations, what will your Visa status be?

- Student Visa Dependent Other Visa Type _____
Indicate Visa Type

Is English your native language? Yes No If no, documentation of English literacy is required.

Military/Veterans Information

Are you a U.S. active-duty military service member? Yes No

Are you a spouse/dependent family member of a U.S. active-duty service member? Yes No

If "Yes" to either of the two questions above, what military branch of service is your affiliation? _____

What is the anticipated active-duty discharge date of the military service member? _____

Are you a U.S. military veteran? Yes No If a U.S. veteran, please indicate your veteran category.

- Vietnam Veteran Other Eligible Veteran Both Vietnam Veteran and Other Eligible Veteran

Are you eligible for veteran's benefits? Yes No If yes, under which law?

Academic Background

All official transcripts/documents are required from the applicant for ALL previously attended institutions for FULL admittance.

List ALL specific college academic institutions (in chronological order beginning with most recent) you have, are, or will attend prior to NSU matriculation.

Name of Institution	City	State or Country	Major	Degree	Approx. # of Credits Earned	Start and End Date (or expected end)

Have you ever been required to leave any college or denied readmission because of conduct or academic deficiencies? Yes No If yes, please explain.

Please fill in the year for the M.O.T. program in Fort Lauderdale.

Entry-level—Master’s Degree

Entering year: June _____

(Note: If you would like to be considered for more than one, please indicate your first choice.)

Additional Information

Have you ever matriculated in or attended any occupational therapy program which you did not complete?

Yes No If yes, please list the name of the school, the dates attended, and explain your reasons for not completing the program. _____

Have you ever had a professional license suspended, revoked, or otherwise acted against, including denial of licensure by the licensing authority of any state, territory, or country?

Yes No If yes, please explain. _____

Briefly describe your area(s) of computer competency. _____

In what languages are you fluent? Please provide information in regards to:

Speaking _____

Reading _____

Writing _____

List below the college courses in which you are currently enrolled, those you plan to complete prior to matriculation, and those you have taken towards a previously started advanced degree. (Note: If you make any changes in your planned courses, be certain to inform us.)

Institution	Course Title	Term in Progress or to be Taken

Describe your activities and/or employment during undergraduate or graduate school. List in chronological order, beginning with your current position.

Place	Position/Job Title	Job Description	Dates of Employment

Describe any special circumstances that you feel might aid the Admissions Committee in evaluating your application.

List any volunteer/community/extracurricular/professional activities you are/were involved with. _____

List any honors and/or awards you have received. _____

List all master's or doctoral programs to which you are applying this year or to which you have applied to in the past.

Year	Program/Institution	Interview?	Status

Note: Please be certain to read the following disclosure and sign the application for further processing. No application will be processed without your signature.

Disclosure Statement:

Have you ever been convicted in any state or country of a criminal offense, other than a minor traffic offense, where you have been found guilty by a judge or jury or entered a plea of nolo contendere (no contest); or any juvenile offenses; any offenses where the records have been expunged; or any conviction that the applicant is currently appealing, regardless of adjudication?

Yes No

If the answer is yes, please explain. _____

The disclosure is a continuing duty. All applicants must report to Nova Southeastern University (NSU) any such arrest or conviction after the filing of the application for admissions or during the time that the student is enrolled at the college. The admissions committee and NSU will consider new information submitted, and in appropriate circumstances, may change the status of an applicant or student.

Permission is hereby given to NSU to make any necessary inquiries and I voluntarily and knowingly authorize any former school, government agency, employer, person, firm, corporation, its officers, employees and agents, or any other person or entity making a written or oral request for such information.

Signature of Applicant _____ Date _____

Notices of Nondiscrimination and Accreditation

Consistent with all federal and state laws, rules, regulations, and/or local ordinances (e.g., Title VII, Title VI, Title III, Title II, Rehab Act, ADA, and Title IX), it is the policy of Nova Southeastern University not to engage in any discrimination or harassment against any individuals because of race, color, religion or creed, sex, pregnancy status, national or ethnic origin, nondisqualifying disability, age, ancestry, marital status, sexual orientation, unfavorable discharge from the military, veteran status, or political beliefs or affiliations, and to comply with all federal and state nondiscrimination, equal opportunity, and affirmative action laws, orders, and regulations.

This nondiscrimination policy applies to admissions; enrollment; scholarships; loan programs; athletics; employment; and access to, participation in, and treatment in all university centers, programs, and activities. NSU admits students of any race, color, religion or creed, sex, pregnancy status, national or ethnic origin, nondisqualifying disability, age, ancestry, marital status, sexual orientation, unfavorable discharge from the military, veteran status, or political beliefs or affiliations, to all the rights, privileges, programs, and activities generally accorded or made available to students at NSU, and does not discriminate in the administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other school-administered programs.

Nova Southeastern University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (1866 Southern Lane, Decatur, Georgia 30033-4097, Telephone number: 404-679-4501) to award associate's, bachelor's, master's, educational specialist, and doctoral degrees.

Acknowledgment Statement

I have read and understood the instructions. I certify that the information submitted in this application is complete and correct to the best of my knowledge. False and/or omitted information will invalidate this application and could result in rejection of the applicant or dismissal from the university if the applicant has already been admitted. Permission is hereby given to NSU to make any necessary inquiries and I voluntarily and knowingly authorize any former school, government agency, employer, person, firm, corporation, its officers, employees and agents, or any other person or entity making a written or oral request for such information. I agree that this information may be used by Nova Southeastern University for research and development purposes aimed at improving education and admissions programs.

Signature of Applicant _____ Date _____

09-037-09DBB