

**ITEA STUDENT APPLICATION FORM — PRACTITIONER TRACK**

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PLEASE PRINT. Additional comments may be included on a separate sheet stapled to this form.

Student's Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Age: \_\_\_\_\_ Gender:  Male  Female

**Ethnic Background (Optional)**

African American  Asian/Pacific Islander  Caucasian  Hispanic/Latino  Native American Other: \_\_\_\_\_

Present Occupation: \_\_\_\_\_

Website: \_\_\_\_\_

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

Mailing Address (if different then above): \_\_\_\_\_

Day Phone: ( ) \_\_\_\_\_ Evening Phone: ( ) \_\_\_\_\_

e-mail: \_\_\_\_\_ website: \_\_\_\_\_

**EDUCATION BACKGROUND**

| Accredited College/University* | Area of Study | Date Attended | Degree | Date Received |
|--------------------------------|---------------|---------------|--------|---------------|
|                                |               |               |        |               |
|                                |               |               |        |               |
|                                |               |               |        |               |
|                                |               |               |        |               |

\* The accrediting agency for the college/university must be printed on the transcript or legal documentation must be furnished by the college/university.

**PROFESSIONAL LICENSES:**

| License Type | Issuing Agency | Date Issued | Expiration Date |
|--------------|----------------|-------------|-----------------|
|              |                |             |                 |
|              |                |             |                 |
|              |                |             |                 |

Describe the type of acupuncture you practice, and your exposure to Classical Five-Element Acupuncture:

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



PROFESSIONAL BACKGROUND

| Place of Employment | Date | Position/Title | Duties/Responsibilities |
|---------------------|------|----------------|-------------------------|
|                     |      |                |                         |
|                     |      |                |                         |
|                     |      |                |                         |

Describe your current state of health, physically and emotionally (include any disabilities or special needs you may have):

\_\_\_\_\_

\_\_\_\_\_

Have you ever been arrested for a criminal act?  Yes  No      If you answered yes please explain:

\_\_\_\_\_

\_\_\_\_\_

REQUIREMENTS FOR ENROLLMENT

The ITEA Practitioner Track program assumes the applicant is already certified to practice acupuncture. It therefore assumes the following semester hours are completed outside the program, to be confirmed with our Registrar before receiving the degree Master of Acupuncture in Classical Five-Element Acupuncture:

- 4 semester hours of Chemistry
- 4 semester hours of Biology
- 8 semester hours of Anatomy and Physiology
- 8 semester hours of other biomed (student's choice, and may include psychology)

The following semester hours may be completed outside the program, or may be taken within the program:

- 1.1 semester hours of nutrition
- 6.2 semester hours of pharmacology (this course takes three years to complete at ITEA)
- 2.3 semester hours of pathology
- 0.5 semester hours of Western Medical Tests
- 2.3 semester hours of tuina or other like therapy

Please outline your plans relative to the above courses:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_