



Application for Admission

Thank you for applying to the Boulder College of Massage Therapy. We feel your experience at BCMT will prove to be rewarding and transformational for you, professionally and personally.

You will notice there are several parts to the application process. Your academic record and interview are the most important factors in the selection process. However, we would like to know about the combination of qualities and aspirations that make you distinctive. Please keep this in mind while responding to the essay questions and completing the application.

Please be sure all application materials are included in your application packet. Applications will not be processed until complete. Also, note the deadlines for applying. If you have any questions about the process please contact one of our Admissions Coordinators at 303.530.2100 or email admissions@bcmt.org.

Application Instructions:

- Complete Application:** Parts A, B and C
- Official Academic Transcript** of your most recent degree (high school, college or GED scores). Instruct your college or high school to forward an official copy of your transcript (or GED), which must have an official seal, to the BCMT Admissions Office. *Note: Transcripts may take 2 – 3 weeks to receive.*
- Massage Therapy Transcript** (for AOS-only applicants) showing completion of an approved certification in a massage therapy program of at least 500 hours.
- Resume or cover letter** (for AOS-only applicants) describing work experience as a massage therapist.
- Letter of Recommendation** from a professional reference (e.g. employer or teacher). Have reference include contact information and professional title. This letter can be mailed directly to the Admissions Office or included with your admissions packet.
- \$75 Application Fee** payable with Visa, MasterCard, personal check or money order. This fee is refundable if you choose not to attend, or are not accepted.
- Priority Deadlines** (deadline for fee waiver) If your application is received on or before the priority deadline for the corresponding quarter, the \$75 application fee will be waived.
 - Apply by November 1 – for January
 - Apply by February 1 – for April
 - Apply by May 15 – for July
 - Apply by August 1 – for October
- Tuberculosis (TB) Test** results received within the last year from your doctor or local clinic.
- Interview** scheduled upon receipt of a complete application packet.
- Photo** (optional)
- Signature** (required, see p.3)

Send complete application packet to:

BCMT
Admissions Office
6255 Longbow Dr.
Boulder, CO 80301



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Part A – Applicant Information (Cont'd)

5. Ethnic Background (For U.S. Government use in compliance with the 1964 Civil Rights Act)

- a) Are you Hispanic/Latino? Yes No
- b) Please select one or more races from the following five racial groups:
- African American Native Hawaiian/Pacific Islander Caucasian
- Asian Native American/Alaska Native

6. Previous Education: (List high school and all post secondary schools attended.)

High School/GED	City/State	Diploma, Certificate or Degree Earned	Completion Date
College/University/Trade School	City/State	Diploma, Certificate or Degree Earned	Completion Date
College/University/Trade School	City/State	Diploma, Certificate or Degree Earned	Completion Date

7. Have you ever been convicted of a felony or plead guilty to a charge of unlawful sexual behavior or any prostitution-related offense? Yes No

If yes, please describe the offense and conviction, including the date, place, charge and rehabilitation program completed on a separate sheet of paper. BCMT reserves the right to conduct a criminal background check. Disclosure of a conviction will not necessarily disqualify you from enrollment.

8. Have you ever applied to BCMT before? Yes No

If yes, please provide month and year: ____ / ____

9. Financial Aid (Please check all that apply.)

Students seeking financial aid or other financial assistance are encouraged to contact the Financial Aid Office for more information or financing options. The online application link for Student Aid is available on our website at www.bcmt.org.

- a) Are you applying for Federal Student Aid? Yes No
- b) Are you eligible for the Presidential Scholarship? Yes No
- (Note: Application must be received by Priority Deadline. For more information, visit: <http://www.bcmt.org/Prospective-Students/financial-aid.htm>.)
- c) Applying for VA Benefits? Yes No
- d) Applying for Vocational Rehabilitation? Yes No

10. Application Fee (Or include personal check made payable to BCMT):

Credit Card #	Expiration Date	Security Code (3-digits on back of card)
Name on Credit Card (please print)		Signature (required)

11. Signature (required) I certify that all information I have provided on and with this application is true and complete. By my signature, I authorize BCMT to investigate any or all of the statements I have made in this document. I understand and agree that making any false statement is grounds for my disqualification from consideration for enrollment or immediate dismissal in the event the false statement is discovered after enrollment.

Applicant Signature (required)	Date
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Part B - Confidential Health History Information

Please be aware that massage therapy is a profession that requires physical stamina and flexibility. You must be able to stand for lengthy periods of time, have flexibility in all joints, including wrists, elbows, ankles, and knees. You must be able to kneel on the floor, rise to a standing position from the floor, and sit comfortably. Pregnancy and short-term disability may hinder your ability to perform bodywork. Please inform BCMT of any physical conditions you have that may need special accommodations.

Note: Members of the school community are not required to submit to AIDS testing; any persons who have tested positive for HIV antibodies are not required to release that information as part of completing this form. However, the school encourages anyone with an infectious condition to consult with the Director of Education and/or a physician, for purposes of clarifying personal risks and special precautions applicable to his/her health and the ability to participate in the school environment. (Please see BCMT Student Handbook for complete policy on infectious conditions, including AIDS.)

1. Acute or Chronic Pain (Please check any you have experienced in the past two years.)

- Checkboxes for: Ankle/Foot Pain, Hip/Leg Pain/Knee, Shoulder Pain, Arm/Elbow Pain, Neck Pain, Skin Conditions, Back Pain, Sciatica, Wrist/Hand Pain, Carpal Tunnel Syndrome, Rheumatoid Arthritis, and Other.

If yes, you will be asked for additional information during your interview.

2. Diseases and Disorders (Please answer "yes" or "no.")

Do you suffer from any diseases or disorders (chronic fatigue syndrome, epilepsy, multiple sclerosis, Parkinson's, etc) that may limit your participation in program activities?

- Yes/No checkboxes

If yes, you will be asked for additional information during your interview.

3. Disabilities (Please answer "yes" or "no.")

Do you have a physical disability (visually impaired, hearing impaired, head injury, etc.), learning disability (ADD, ADHD, dyslexia, etc.) or psychiatric disability (depression, bipolar, panic disorder, etc.) that may require special accommodations by BCMT?

- Yes/No checkboxes

If yes, please submit a completed Special Needs form *prior to enrollment.

Note: The information requested regarding diseases, disorders and disabilities is intended for use solely in connection with voluntary action efforts to ensure full participation in BCMT programs. The information is being requested on a voluntary basis, and will be kept confidential. Refusal to provide it will not subject the applicant to any adverse treatment.

*To ensure that disability accommodations and/or services are in place prior to enrollment, BCMT requests that admitted students submit a completed Special Needs form and corresponding documentation prior to enrollment. Requests must be submitted at least six weeks prior to enrollment. BCMT cannot guarantee that the desired service will be available with less than six weeks notice, and some requests may take more than six weeks to process.

Part C - Essay Responses

To allow us to get to know you, thoughtfully answer the following questions, and submit them with your application. (Recommended length: 300 words per essay)

For CMT/AOS applicants:

- 1. Describe how a career in massage therapy will help you fulfill your personal and professional goals.
2. Describe your experiences of receiving professional massage therapy (e.g. thoughts, emotions, impressions. etc.).
Note: You must have had at least two professional massage therapy sessions before applying to BCMT.

For AOS only applicants:

- 1. Describe how advanced training in massage therapy will help you fulfill your personal and professional goals.