

# ~ Application ~

Sedona School of Massage  
2945 Southwest Dr, Sedona AZ. 86336

**Please complete and return this application along with the following:**

- \$50.00 application fee made payable to the Sedona School of Massage:
- copy of a high school, GED or college transcript:
- brief biographical sketch, explaining your motivation for training in massage and your philosophy of healthcare.
- recent photograph of yourself

Last Name		First Name		Middle Name	Date
Mailing Address		City	State	Zip	Area Code & Telephone
Birthdate	Male	Female	email address		

**Semester Desired:**    Spring 2018       Fall 2018       Spring 2019

**How did you hear about our school?**

**In case of emergency, please contact:**

Name		Relationship to student			
Mailing Address	City	State	Zip	Area Code & Telephone	

**Education:**

Name of High School		Address	Certificate or Degree
Name of College		Address	Certificate or Degree
Name of Technical or Vocational		Address	Certificate or Degree

**Please list any previous experience or training in massage therapy:**

Have you ever been convicted of a felony?

Yes  No

Have you had any communicable diseases within the last two years?

Yes  No

If yes, give details: \_\_\_\_\_

Are you currently taking any medications?

Yes  No

If yes, please list: \_\_\_\_\_

Is there anything that would be helpful for us to know about your mental or physical condition while you are in massage school?

Please list two references (other than family members):

\_\_\_\_\_ Name

\_\_\_\_\_ Name

\_\_\_\_\_ Address

\_\_\_\_\_ Address

\_\_\_\_\_ City, State, Zip Code

\_\_\_\_\_ City, State, Zip Code

\_\_\_\_\_ Area Code and Telephone #

\_\_\_\_\_ Area Code and Telephone #

I have completed this application to the best of my knowledge and I state that the information given is true and correct. I have also read the Sedona School of Massage policies as stated in this catalogue.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian (if applicant is under age 18)

\_\_\_\_\_  
Date

Application Reviewed and Accepted by (school administrator)	Date