

Academy of Classical Oriental Sciences

Application Form

Complete applications are reviewed on an ongoing basis throughout the year for entrance to the Fall start in September. Applications received after June will be reviewed subject to availability of space. Applicants are strongly urged to submit application materials as early as possible due to limited class size. Please contact ACOS if you require assistance with this application.

I am applying for the:

- | | |
|---|--|
| <input type="checkbox"/> 5-year Doctor of Traditional Chinese Medicine Program | <input type="checkbox"/> Full-time |
| <input type="checkbox"/> 4-year Traditional Chinese Medicine Practitioner Program | <input type="checkbox"/> Part-time |
| <input type="checkbox"/> 3-year Acupuncturist Program | <input type="checkbox"/> New Student |
| <input type="checkbox"/> 3-year TCM Herbalist Program | <input type="checkbox"/> Transfer from _____ |

1. Personal Information

Full name: _____

Address: _____ City: _____

Province/State: _____ Postal Code: _____ Country: _____

Telephone (home): _____ Telephone (work): _____

Citizenship: _____ Email Address: _____

2. Education

Please list secondary schools and post secondary schools and degrees in the space below. Official transcripts are required from all post-secondary institutions.

Name of Institution	Province/State	From	To	Degree/Diploma Earned

3. Two Letters of Recommendation

These should include teachers and/or other professionals (exclude relatives and close personal friends) who can comment on your potential as a health-care provider and on your ability to succeed in the program at ACOS.

Name	Professional Title and Institution
_____	_____
_____	_____

4. Related Training

Indicate previous training in Chinese medicine and/or related fields. Please provide relevant documentation. If you are a licensed practitioner, please provide your registration number and registration jurisdiction.

5. Work experience

Submit your current resume indicating volunteer and paid work.

6. Interests

What do you like to do to balance your work/school life?

7. Finances

Explain how you will finance your tuition, books and supply costs and support yourself while attending the program.

ACOS is fully accredited and designated for Canada Student Loans. Do you intend to apply for Canada Student Loans?

Yes

No

8. Personal Essay

On a separate page, please discuss the process and experiences that have led you to want to study Chinese Medicine and how you envision your future in the TCM field.

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A. Review Your Application

A complete application contains:

- Application form. Use separate pages, if required.
- Official transcripts of all post secondary education, certificates, diplomas, etc. to be sent directly to ACOS or included in a sealed envelope with your package.
- Two letters of recommendation to be sent directly to ACOS
- Physician's certificate of health (Western, Chinese or Naturopathic physician); a general statement of your current state of physical and mental health.
- Your current resume
- Personal essay
- Application fee of \$100.00 CDN (non-refundable), payable to ACOS. Out-of-country applicants should submit the application fee in the form of a money order in Canadian funds. In case you have difficulty obtaining Canadian funds, please contact ACOS.

► The Application Committee may request a personal or telephone interview with any applicant.

B. Sign

I am aware that as a student of the Academy of Classical Oriental Sciences, I will be required to become a student registrant with the College of Traditional Chinese Medicine Practitioners and Acupuncturists of BC (CTCMA) and that the CTCMA requires all registrants to undergo a criminal record check.

I am aware that in order to write my licensing exams in BC, I am required to show proof of 2 years (60 credits) of university/accredited college studies to CTCMA.

I hereby attest that all information provided in this application is true.

Signature of Applicant _____ Date _____

C. Send

Applications should be sent to:

Academy of Classical Oriental Sciences
303 Vernon Street
Nelson, BC
Canada V1L 4E3

Toll free: 1-888-333-8868
Phone: (250) 352-5887
Fax: (250) 352-3458

General email: acos@acos.org
Regula Langenegger, Registrar: registrar@acos.org

If you are submitting application and/or reference information by email or fax, please send the original copies in the mail as well.

Applicants are advised to familiarize themselves with the current curriculum and policy information via our website and/or the information package. All fees, terms, courses and policies are subject to change without notice.

All materials filed in support of this application become part of your permanent, confidential record at ACOS: they will not be returned.