



NASHVILLE ACADEMY OF REFLEXOLOGY
 4825 Trousdale Dr. Suite 222
 Nashville, TN 37220
 615-647-7244 615-934-1034 (Director)
 615-837-8833 (FAX)

**PROFESSIONAL REFLEXOLOGY CERTIFICATION PROGRAM
 STUDENT APPLICATION**

THIS APPLICATION MUST INCLUDE A CHECK FOR \$50 MADE PAYABLE TO NASHVILLE ACADEMY OF REFLEXOLOGY FOR THE NON-REFUNDABLE APPLICATION FEE.

Last Name:		First Name:	
Maiden Name if different from current last name:		Middle Name or Initial:	
Street Address:		Social Security Number:	
City		Home Phone:	
State:	Zip:	Cell Phone:	
Email Address:			
Age:	Marital Status:	Gender: Male or Female	Application Date:
Name and Location of High School or GED site:		Date of Birth:	Place of Birth:
Colleges or Vocational School(s) Attended:			
School Name:	School Address:	Program/Degree:	Dates Attended:
School Name:	School Address:	Program/Degree:	Dates Attended:
Please submit official transcripts of all institutions attended with this application.			

Occupation:	Employer:
Address of Employer:	Telephone Number of Employer:
Name of emergency contact:	Telephone Number of emergency contact:
Relationship of emergency contact to you:	Alternate Telephone Number of contact:
<p>REFERENCES: Please provide a letter of reference from two (2) references other than family, at least one of which is a person who knows you in a professional capacity.</p> <p>Each letter of reference must include the following information:</p> <p style="padding-left: 40px;">Your name in full as it appears on this Application Reference's Name, Street Address, City, State, Zip Code, Contact Telephone numbers for the reference How long and in what circumstances the reference has known you</p>	
<p>Have you ever been convicted of a felony? Yes_____ No_____. If yes, give details of this offense including the date.</p>	
<p>How did you hear about the Reflexology Certification Program at Nashville Academy of Reflexology?</p>	

Personal Statement:

In the space below, please write about your life. Include how you became interested in Reflexology and what professional and personal goals you have for your future. Please feel free to be creative and imaginative.

I am applying for the Professional Reflexology Certification Program on the ____ Fastrac Schedule / ____ Weekend Schedule, beginning _____, 2016 and ending _____, 2016 or 2017.

I have enclosed with this application:

- A \$50 check made payable to Nashville Academy of Reflexology
- Official transcript(s) from High School, GED, or College and/or Vocational School(s)
- A recent photograph
- 2 letters of reference from other than family

I verify that the above information is correct.

Name of Student: _____

Signature of Student: _____

Date: _____