



ACUPUNCTURE &
INTEGRATIVE
MEDICINE
ACADEMY

Application Form

Acupuncture Diploma
TCM Practitioner Diploma
Advanced TCM Diploma

How to Apply...

Application Deadlines

Deadlines for programs vary depending on course start dates and a student's advanced standing when applicable. Please contact our Executive Director, Enza Ierullo to determine program start dates.

Enrolment is limited and applications are processed on an ongoing basis. Please submit your application as soon as possible in order to avoid disappointment.

Admission Requirements

- an Ontario Secondary School Diploma (OSSD) or its equivalent OR Mature Student Status;
- a sincere desire to learn the foundations and principles of Eastern Medicine and grow as a practitioner;
- experience receiving acupuncture in a Student Acupuncture Clinic or from a Registered Practitioner;
- successfully completed an interview with a program administrator.

Application Documents Required

- complete application
- application fee of \$50.00
- completed AIM Academy medical form filled out by your family physician indicating that you have received a full physical within the last year and that you are in good physical and general health, that you are free from communicable diseases and your tuberculosis status within the last year.
- proof of high school OR postsecondary education.

Additional documents required for the interview. Please present the original following identification documents:

- photo identification (e.g. driver's license, passport, age of majority card)
- your birth certificate
- your Social Insurance Number card

Completed applications and supporting documents can be dropped off or mailed to:

AIM Academy
455 Spadina Ave., Suite 300
Toronto, ON M5S 2G8

After you apply...

Interview

Once you have completed the application procedure (all documents received), we will arrange an interview.

Notification of Status

You will be notified within 30 days of the interview as to your acceptance into the program. Upon acceptance, you will be required to sign an Application for Enrolment form, to confirm your tuition payment plan, and to submit a non-refundable deposit.

Advanced Standing

Depending on your previous schooling, you may be eligible for advanced standing and reduced tuition for some programs. Please contact the school to discuss your situation.

NOTE: The school reserves the right to cancel or change start dates of programs if there is insufficient enrolment. Should the program be cancelled, the applicant will receive a complete refund for their registration fees and/or tuition.

AIM ACADEMY APPLICATION FORM

Program Applied:

Acupuncture Therapy
Diploma

Traditional Chinese
Medicine Practitioner Diploma

Advanced Traditional
Chinese Medicine Diploma

Start Date: September January **Year:** _____

PERSONAL INFORMATION

First Name: _____ Last Name: _____ Date of Birth: _____

Address: _____ City: _____

Province: _____ Postal Code: _____ Country: _____

Email Address: _____ Phone #: Cell _____ Work _____

Emergency Contact: _____ Relationship to Applicant: _____

Emergency Contact Phone #: _____ Other _____

FAMILY PHYSICIAN

Name: _____ Contact: _____ Location: _____

Illnesses within the Past Year: _____ From _____ to _____

EDUCATION HISTORY (High School or Post-Secondary etc.)

<u>Institution</u>	<u>Program/Course</u>	<u>Length of Study</u>	<u>Year Graduated</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

WORK EXPERIENCE

Present Occupation: _____ Duration: _____

Company: _____ Location: _____ Contact: _____

Previous Occupation: _____ Duration: _____

Company: _____ Location: _____ Contact: _____

TUITION PAYMENT PLANS: I plan to pay (check one)

In full Annually (2 payments) Monthly

Note: Payments can be made by e-Transfer and in Canadian funds. There is a late charge of \$10 per day on overdue accounts

AIM Academy reserves the right to make changes to any course, program, fee, policy or procedure with respect to availability, delivery mode, schedules, or course requirements described in this calendar, at any time, without further notice



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Formerly The Shiatsu School of Canada

Medical Form

Applicant Name:

Today's Date:

Date of Full Physical:

Aim Academy
455 Spadina Ave, Suite 300
Toronto, ON M5S 2G8

Telephone: (416) 323-1818 / 1-800-263-1703

Fax: (416) 323-1681

info@aim-academy.ca

www.aim-academy.ca

Please print and take this medical form to your medical doctor (M.D.) to be completed.

() **Is the above in good health and free of communicable diseases?**

Comments:

() **Results of T.B. Test**

Comments:

Is the above named person fit, healthy and able to work with the public?

Yes No (If No, please explain why? Thank you.)

Physician's Contact

Address:

Phone Number:

Doctor's Name (please print)

Doctor's Signature