

Application to Occupation Therapy Assistant Major

Name: _____ ID #: _____
 (Please Print) First Middle Last (Anoka Technical College Student ID #)

Address: _____
 Street City State Zip

Phone Number: _____ Email: _____

All admission requirements must be received as a complete packet during the application period.

Choose EITHER **Placement Exam** OR **Higher Education Degree** requirement and complete all parts of Option 1 or 2:

<input type="checkbox"/> 1. Placement Exam Requirements Requirement 1 (select one of each category): Reading Comprehension Requirement obtained within past 2 years: ___ Accuplacer Score of 78 or higher ___ ACT Reading Score of 21 or higher ___ ATC READ 0900 (grade of C or higher) Sentence Skills Requirement obtained within past 2 years: ___ Accuplacer Score of 86 or higher ___ ACT English Score of 18 or higher ___ ATC ENGL 0101 or 01020 (grade of C or higher) Arithmetic Requirement obtained within past 2 years: ___ Accuplacer Score of 81 or higher ___ ACT MATH Score of 22 or higher ___ ATC MATH 0801 (grade of B or higher) Requirement 2: Adjusted Individual TEAS Score of 70% or higher: ___ ATI TEAS	<input type="checkbox"/> 2. Higher Education Degree (Bachelor's or Master's Degree from Accredited College) Requirement 1 (select one): <input type="checkbox"/> Bachelor's Degree from Accredited College _____ Name of College <input type="checkbox"/> Master's Degree from Accredited College _____ Name of College Delivery Method of Official College Transcript (select one): <input type="checkbox"/> In person to Anoka Technical College Enrollment Services Room 117 <input type="checkbox"/> Electronic PDF file to: enrollmentservices@anokatech.edu <input type="checkbox"/> United States Postal Mail: 1355 W HWY 10 Anoka, MN 55303
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I have also attached the following:

- OTA Information Session Certificate of Attendance**

Signature: _____ Date: _____

For office use only:

Intake initials	Date received	P: drive	Scanned to Records	Notes