

**APPLICATION FORM  
VETERINARY MASSAGE AND  
REHABILITATION THERAPY POST-GRADUATE  
CERTIFICATION PROGRAM**

Name: \_\_\_\_\_

Degree (please circle appropriate profession): DVM, VMD, DC, CVT, LVT, RVT, RN, LMT, CMT, LPT  
Other: \_\_\_\_\_ (don't hesitate to get in touch with the office for confirmation if you have any doubt).

Address: \_\_\_\_\_  
\_\_\_\_\_

Work phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Emergency / cell # \_\_\_\_\_

Email (mandatory): \_\_\_\_\_

Requesting registration for program starting: \_\_\_\_\_ (Date of first module)

**Admissions requirements:**

1. Must be a licensed/registered or certified: Veterinarian, Chiropractor, Veterinary Technician, Massage Therapist, Nurse or Physical Therapist, are some of the licensed health care professionals allowed to attend the class.
2. If the adjunct health care professional does not require certification/licensure in their state or province, said documentation ***must be presented in writing*** with the rest of the requirements for this program.
3. Professionals registering from outside the North American continent please provide a copy of the pertinent Visa, Diploma and proper governmental licensure of the country in which you are licensed and currently practicing.
4. All applicants must include: COPY of your diploma and current (non-expired) license
5. Include two-character reference letters from non-family members. If self-employed, one of the two letters must briefly describe your practice.
6. Non-veterinary license professionals, please include the signed, initialed and complete waiver. ("Waiver for Non-Veterinary Licensed Professionals").
7. Two passport-size photos or similar pictures.
8. All applicants must include a letter stating that you understand your state's rules and regulations as they apply to integrative/complementary veterinary modalities.
9. Please include a \$200.00 (USD drawn on a US Bank) deposit with the application form. \*\*Deposit includes a \$100.00USD non-refundable fee.
10. Tuition and a non-refundable application fee is \$6,189.00 (drawn on a US Bank). The remaining tuition (\$5,989.00) is due during the interview (for a total cost of \$6,189.00). **No foreign checks.**

\*\*\*\*Please note that a 3.5% charge will be applied to all credit card transactions\*\*\*\*

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2555 Wisconsin St  
Sturtevant, WI 53177-1825  
262-898-1680; 262-886-6460FAX

[CONTACT@HEALINGOASIS.EDU](mailto:CONTACT@HEALINGOASIS.EDU) OR [WWW.HEALINGOASIS.EDU](http://WWW.HEALINGOASIS.EDU)

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**By signing above, you attest that you have read the school catalog and are currently in good standing with your regulatory / licensing board.**