



146 4th Avenue North
Safety Harbor, FL 34695
(727) 724-9727
www.bhaktiacademe.com

APPLICATION FOR ADMISSION

Name of Applicant _____ Birthdate _____

Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Work (____) _____ Parents (____) _____

Soc. Sec. # _____ Marital Status _____ # of Dependents _____

Email Address _____

Anticipated Start Date _____ Anticipated Session (am/pm/both) _____

Educational Background

Do you have a high school diploma or GED? Yes No

If yes, please complete the following and **attach a copy of your diploma, transcript or GED.**

List all vocational, tech. schools, jr. college or university attended beginning with most recent.

Name of School _____ Dates Attended _____

Complete Address _____

Degree or Certificate _____

Name of School _____ Dates Attended _____

Complete Address _____

Degree or Certificate _____

Name of School _____ Dates Attended _____

Complete Address _____

Degree or Certificate _____

Employment Background

Please describe your employment history over the past 5 years. Include your work duties, name of employer, how long employed, reason for leaving.

Have you ever been convicted of a misdemeanor or felony? Yes No, If yes, please explain.

Should you become licensed in massage, what is your goal in terms of work setting, types of clients you wish to work with, and your purpose in entering the field?

Please list two people whom you will ask to send character references to *Bhakti Academe*. You may attach their references, or have them sent directly to us.

In completing this application, you are certifying that all of the information contained herein is truthful and correct.

Signature _____ Date _____

Bhakti Academe does not discriminate against any applicant due to factors of age, color, race, creed, religion, national origin, gender or sexual preference.