

Documentation of Health Related Experience

This form is optional NOT mandatory to completing your online application.

Upload this form to verify any health related experience you wish to be considered as a part of your application and will be further discussed in the event of an interview. Examples of health related experience may include employment as an ATC, Physical Therapist Aide or Technician, EMT, Certified Nursing Assistant, First Responder, or as a volunteer in a hospital or nursing home setting, etc. A minimum of 1-year experience is considered fulfilling this option.

I, _____, authorize the release of information related to my experience in a health related occupation for consideration as a part of my PTA application.

Signature _____ DATE _____

Facility/Business _____ Phone No. _____

Mailing Address _____
Street, City, State, Zip

Supervisor's Name _____ Title _____

Dates Employed/Volunteered: From _____ To _____ Number of Hours _____ Title _____

Job Duties: _____

Facility/Business _____ Phone No. _____

Mailing Address _____
Street, City, State, Zip

Supervisor's Name _____ Title _____

Dates Employed/Volunteered: From _____ To _____ Number of Hours _____ Title _____

Job Duties: _____
