



MASTER OF OCCUPATIONAL THERAPY

Required Coursework Documentation/Form

Please complete the following table for the courses you completed/plan to complete in order to fulfill the MOT prerequisites. If you repeated a course, put the most recent attempt in this table. If you took a prerequisite course at another college or took an alternate course, please replace the Messiah University course on the form with the course or course(s) you completed. (For example, if you took AP Statistics instead of STAT 269, delete STAT 269 and type in the information for AP Statistics.) If a course has not been completed, indicated INC in the grade earned column. Applicants need to earn a C or better on all prerequisite courses.

THIS SECTION IS TO BE COMPLETED BY THE APPLICANT

Name of applicant (First Middle Last)

Email Address

Actual or Expected Date of Undergraduate Graduation

I certify that the information provided on this document is complete and accurate to the best of my knowledge. I understand that withholding or giving false information will make me ineligible for admission or result in my dismissal from Messiah University.

Applicant's Signature/Name

Date

I acknowledge that checking this box electronically serves the same purpose as affixing my original signature to this document.

Table with 7 columns: Required Course, Credits, Course #, Course Title/Date Completed, Credits, Grade, College or University. Rows include Anatomy & Physiology I, Anatomy & Physiology II, Abnormal Psychology, Life Span Development or Developmental Psychology, Statistics, and Medical Terminology.

Upon completion, please email this form to GradPrograms@messiah.edu