

S P O K A N E F A L L S C O M M U N I T Y C O L L E G E

# Occupational Therapy Assistant Program

## Program Information and Application Booklet

For Admission: Fall Quarter 2018



**Community Colleges of Spokane**

**Spokane Falls Community College**

**Occupational Therapy Assistant Program**

2917 W Fort George Wright Drive

Spokane, WA 99224-5202

(509) 279-6073

[www.spokanefalls.edu/OTA](http://www.spokanefalls.edu/OTA)



**Associate in Applied Science Degree  
PROGRAM INFORMATION**

Occupational Therapy is a health rehabilitation profession that helps people of all ages to participate more fully in their day-to-day lives. Occupational therapy assistants work under the supervision of an occupational therapist to:

- Promote independence & participation in activities meaningful to the individual
- Adapt home, work, school, and play environments
- Teach adapted techniques for greater independence in self-care, home care and work performance
- Consult with businesses on proper ergonomic procedures to prevent worker injuries
- Provide assistive technology for increased independence at home, work, and school
- Help people gain greater self-esteem and self-confidence through activities

Occupational therapy practitioners work with people of all ages and are employed in a wide variety of settings including: hospitals and medical centers, rehabilitation centers, pediatric facilities or school systems, hand therapy clinics, home health care agencies, convalescent centers, extended care facilities, and mental health facilities.

Spokane Falls Community College (SFCC) offers a two-year associate in applied science (A.A.S.) degree program to prepare occupational therapy assistants for immediate employment. The program includes study in anatomy and physiology, social science, occupational therapy courses, and clinical education in area healthcare facilities.

Spokane Falls Community College is accredited by the Northwest Commission on Colleges and Universities. The OTA program is fully accredited through the Accreditation Council for Occupational Therapy Education (ACOTE®), through the American Occupational Therapy Association (AOTA). The program has been granted accreditation until review 2020. Questions about accreditation may be addressed nationally through the accreditation department at AOTA: 301-652-6611, ext. 2912.

**WHEN CAN NEW STUDENTS ENROLL?**

The occupational therapy assistant (OTA) program is a two-year program with applications due in the spring and coursework beginning in the fall after acceptance into the program. Admission into the program is limited and requires a specific application process. Upon review of applications, qualified applicants are invited to interview for selection. Please be aware that the admission process is competitive. The completion of all requirements **does not ensure** admission into the program. The program is designed to be completed in six full-time academic quarters. OTA courses must be taken in sequence and are only offered to students accepted into the OTA program. Students are encouraged to complete general education requirements and related coursework prior to entering the OTA program.

**WHERE CAN I GET MY QUESTIONS ANSWERED?**

OTA Program Application Booklets are available from Loren Pemberton, OTA counselor, 509.533.3503, or at the program location: SFCC Campus, Magnuson Building 27, Room 356 or online at: [www.spokanefalls.edu/OTA](http://www.spokanefalls.edu/OTA).

Questions concerning the application process or the OTA program may be addressed to the OTA Program Director, Sunny Anderson, M.Ed. at 509.279.6094 or e-mail: [sunny.anderson@sfcc.spokane.edu](mailto:sunny.anderson@sfcc.spokane.edu)

**THE DEADLINE FOR SUBMITTING ALL APPLICATION  
MATERIALS FOR FALL QUARTER IS FRIDAY, MARCH 16, 2018.  
PLEASE REVIEW THE OTA APPLICATION FOR THE NEXT DUE DATE!**

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## ADDITIONAL PROGRAM INFORMATION

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The OTA faculty coordinates the process of application for admission and in conjunction with the admissions committee of the OTA Advisory Board, determines eligibility for the program. Eligibility review includes academic achievement, writing competence, demonstration of understanding of occupational therapy through observation experiences, and in writing, letter of recommendation and ability to work within a group and communicate effectively.

The top students who are qualified for acceptance into the OTA program will be required to attend a group interview/activity process on the SFCC campus. Applications are reviewed and ranked. Those selected for an interview will be notified of the date and are required to attend a group interview and activity process. Additional scoring is provided to veterans.

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## ADDITIONAL STUDENT FEES/SPECIAL REQUIREMENTS

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***In addition to the usual tuition and fees charged at SFCC,  
OTA students will be responsible for additional costs.  
All prices are subject to change.***

Required OTA Textbooks	Based on approximate costs of textbooks for OTA technical courses: \$1,700+ for two (2) years
Name Badge	Included in lab fee
Watch with Second Hand or Digital Watch	\$30 approximately (to be purchased by student)
Professional & General Liability Insurance	\$8.00 per clinical course, paid with tuition
Injury Insurance	Medical insurance is strongly recommended; available to purchase through <a href="http://www.4studenthealth.com">www.4studenthealth.com</a> (student injury only insurance)
AOTA Student Membership	\$75 a year; included in lab fees
CPR Certification/First Aid for Health Care Professionals	Approximately \$100 for both Available through college or student may take privately. Due October 31 in first year of program. <b>Online not accepted.</b>
Immunization Requirements	Current 2-step TB test; proof of immunity (via blood titer) or immunization for: measles, mumps, rubella; chickenpox; tetanus/diphtheria; Hepatitis B (3 part series); flu shot (required by Year 2 students).
CastleBranch Credentialing Account	\$84--\$200 — Upon acceptance into the OTA program, all students will be required to create a <b>CastleBranch</b> account in June. The account covers National background checks and is also where immunization/test documentation will be kept and will remain accessible for fieldwork site documentation requests. More information will be available to the student upon acceptance. Costs beyond \$84 will vary depending on student's site-specific requirements.
Lab Fees	Approximately \$120 per course

**Information on financial aid is available in the Financial Aid Office.**

*(Be aware that Financial Aid has been decreased at the state level. Please make sure you have met with the Financial Aid Office to determine if you will qualify prior to applying for the program.)*

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## ADMISSION PREREQUISITES/REQUIREMENTS

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### A.A.S. Degree: SFCC

#### Admission Prerequisites/Requirements:

- Volunteer experience in at least two (2) facilities under the direct supervision of an OT or OTA. Minimum 30 hours to a maximum of 50 hours. Documentation/verification required. *(SFCC cannot assist in finding or securing volunteering opportunities).*
- Apply for admission to SFCC.
- Completion of the Occupational Therapy Assistant Program Application (*locations listed page 1.*)
- Biology 160 or permission of instructor to enter Biology 241.
- Biology 241.
- Completion of or eligibility for **one** of the following: Math 88, 92, 94, 96, Math 97, Math 107, or Business Math 123.
- Completion of ENGL&101 - English Composition I or equivalent.
- PSYCH&100 - General Psychology.
- Minimum GPA of 2.0 in all prerequisites.
- **Preference given to students who have completed the prerequisites prior to application.**
- If student is accepted, the student will be informed of documentation needed: current immunizations Washington State Patrol and national criminal background check, CPR, and first aid.

Applications are accepted during winter quarter for entry into the program the following fall.

1. The OTA program incorporates a selective process for admission. This admission process uses a grading system based on relevant coursework completed at the time of application and verification of paid and volunteer experience in occupational therapy settings, a letter of recommendation, essay question scoring and group and individual verbal communication skills. Please be aware that the completion of all prerequisites **does not ensure** admission to the program.
2. It is strongly recommended that students take the general education requirements prior to entering the program. These include Psych&100, **one** of the following: Math 88, 92, 94, 96, Math 97 or equivalent, Elementary Algebra II, Math 107, or Business Math 123, and ENGL&101 or equivalent. If not taken prior to admission, they will need to be taken during summer.
3. The OTA courses are primarily offered during the day Monday-Friday, but occasionally include Saturday and evening experiences. The courses are typically scheduled 8:00am - 7:00pm, Monday-Friday with limited breaks. Participation in this program is a full-time commitment and ability to work an outside job will be very limited.
4. TOEFL: Student who speak English as a second language may be required to take and pass the TOEFL test. Please contact the OTA Program Director for more details regarding score requirements.

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## SPECIAL REQUIREMENTS

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***Because the OTA program requires each student to complete approximately 1,000 hours of clinical education in health care facilities, there are several special requirements:***

1. Students are required to have access to reliable transportation. Clinic sites will be located throughout the greater Spokane area and beyond. Students may also be required to be on campus the same day. Bus service will not accommodate transportation needs and car pools are rarely feasible, as it is unusual for more than one student to be assigned to a site.
2. Students are required to have health insurance during the quarters that they are in clinics (*beginning fall quarter of the first year*). Injury insurance may be available through [www.4studenthealth.com](http://www.4studenthealth.com); although any private health insurance is acceptable.
3. Students are also required to have malpractice/liability insurance. This is billed at time of registration.

SPECIAL REQUIREMENTS (*continued on next page*)

## SPECIAL REQUIREMENTS *(continued)*

4. Student may be required to meet requirements of the fieldwork site including drug testing, additional background checks and fingerprinting.
5. Healthcare workers are required to have current TB tests, medical physicals, immunizations and CPR training; these are to be obtained the summer prior to entering the program and will be explained in detail at the student orientation.
6. The OTA program complies with the "Child/Adult Abuse Information Act." RCW 43.43.830 through 43.43.840. Each OTA student is required to participate in an investigation for criminal history information prior to entry into the program.
7. All tattoos and alternative body piercings are expected to be covered during clinical experiences, including guest speakers, clinical labs where guest participate, and during fieldwork.
8. During Winter and Spring quarters of the second year, students work in the clinical setting for 40 hours a week. Students pay tuition during this time. Outside employment is highly discouraged. Please plan ahead for this financial consideration.

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## REQUIREMENTS FOR SUCCESS FOR THE OTA PROGRAM

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The following information is provided to assist students in achieving a better understanding of the sensory, physical, communication, cognitive, behavioral, social, and professional skills necessary to successfully work as an OTA. These criteria are identified as being **essential job functions** for occupational therapy assistants and as such, closely match the abilities needed to successfully complete the clinical and laboratory components of the OTA program at SFCC. Students must be able to meet these minimum standards throughout the program, with or without reasonable accommodation, for successful completion of the program requirements. Please note that reasonable accommodation may be defined differently in the classroom, lab and clinical settings.

It is the policy of Spokane Falls Community College to provide reasonable accommodation to qualified students with a disability so that they can meet these required standards. If you are disabled and need some special accommodation, please contact the program supervisor of disability support services program at 533-4166.

### 1. **SENSORY/PHYSICAL SKILLS** *The student must be able to:*

- a) Provide general and emergency treatment to patients; including CPR.
- b) Execute actions which require strength and coordination of both gross and fine motor movements, balance and functional use of the senses of touch, vision and hearing.
- c) Observe and interpret patient movement, non-verbal communication, skin condition including changes in appearance or color, anatomical structure, etc.
- d) Read and interpret equipment dials, graphs, patient charts, professional literature, and notes from physicians and other professionals.
- e) Lift, carry, push, and pull patients, equipment and objects equivalent to:
  1. Lifting 0-10 lbs constantly, 11-35 lbs frequently, 36-50 lbs occasionally, and greater than 50 lbs seldom.
  2. Carry 0-25 lbs constantly, 25-35 lbs frequently, 36-45 lbs occasionally, and greater than 45 lbs seldom.
  3. Pushing 5 lbs of force (lbf) constantly, 6-3 lbf frequently, 31-50 lbf occasionally, and greater than 50 lbf seldom.
  4. Pulling 20 lbf constantly, 21-35 lbf frequently, 36-55 lbf occasionally, and greater than 55 lbf seldom.
- f) Manipulate equipment including bolsters, pillows, plinths, mats, and assistive devices to aid in positioning and moving or treating a patient effectively.
- g) Respond to a patient calling from behind a curtain, warning calls from anyone (patient, staff, etc.), bells, and alarms/signals.

## REQUIREMENTS FOR SUCCESS FOR THE OTA PROGRAM *(continued)*

- h) Adapts treatment to perform tasks safely and within safe physical limits to avoid injury to self patient and classmates.

### **2. COMMUNICATION** *The student must be able to:*

- a) Provide patients with clear instructions that are adapted to their cognitive levels and communication needs.
- b) Communicate effectively, compassionately and respectfully with patients, their families, and co-workers including perception of non-verbal communication.
- c) Document clear and legible progress notes in patient charts, written home programs and instruction to patients and family members.
- d) Interact respectfully and effectively with many professionals including members of a multidisciplinary team and convey essential information for safe and effective care.
- e) Deliver clear oral presentations to classmates and healthcare professionals.
- f) Communicate effectively 1:1, as well as in group settings.

### **3. COGNITIVE DEMANDS** *The student must be able to:*

- a) Concentrate and attend to detail amidst a variety of environmental distractions.
- b) Prioritize multiple tasks and carry out complex sequence of instructions.
- c) Read, measure, calculate, reason, and analyze information from a variety of sources accurately, thoroughly, and quickly.
- d) Use problem-solving skill to promote safety and to transfer learning from one situation to another and make appropriate decisions in a timely manner.
- e) Interact effectively and appropriately with patients of various ages, behaviors, cognitive abilities, cultures, and ethnic backgrounds.

### **4. BEHAVIOR, SOCIAL, AND PROFESSIONAL SKILLS** *The student must be able to:*

- a) Effectively adapt to frequent changes in work environment and patient/client population. Tolerate emotionally stressful workloads effectively.
- b) Comply with legal and ethical standards set forth by the American Occupational Therapy Association and Washington State regarding Occupational Therapy.
- c) Adapt treatment styles to effectively work with a variety of different supervisors, coworkers and patients.
- d) Possess emotional stability in order to provide safe and effective care.
- e) Acknowledge and respect individual values, beliefs, and opinions to successfully foster harmonious working relationships with fellow students, patients, and other professionals.
- f) Self evaluate capabilities, needs, and performance.
- g) Maintain personal appearance and hygiene appropriate to classroom and clinic settings.

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## **EMPLOYMENT OUTLOOK**

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Regionally and nationally, job placement of graduates of Occupational Therapy Assistant programs is excellent. The OTA profession is rated by the United States Department of Labor Bureau of Labor Statistics as one of the fastest growing professions, and current projections indicate that this trend will continue. Graduates of SFCC's OTA program can expect to be hired immediately. There are many job opportunities, and career opportunities for pursuit in rehabilitation, including: school districts, acute care hospitals, home healthcare, geriatrics and mental health settings. Starting salaries vary in range depending on demand and usually include benefits.

S P O K A N E F A L L S C O M M U N I T Y C O L L E G E

# Occupational Therapy Assistant Program

## Application Booklet

For Admission: Fall Quarter 2018



**Community Colleges of Spokane**

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2917 W Fort George Wright Drive

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## APPLICANT CHECKLIST

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

**APPLICATION DEADLINE:** Noon, Friday, March 16, 2018 (or postmarked by March 16, 2018)

- Apply for admission to Spokane Falls Community College (SFCC).**  
Contact Admissions at 509.533.3503 or [www.spokanefalls.edu](http://www.spokanefalls.edu).
  - If you are enrolled at Spokane Community College (SCC), you still must apply to SFCC.
  - If you have previously been enrolled at SFCC, you must reactivate your application.
- Complete this application booklet.**
- Page 2:** Demographic Information and College Education
  - Request an **official transcript** from each college you have attended (*with the exception of SFCC and SCC*).
  - Have the transcript(s) sent directly to:  
Spokane Falls Community College  
Admissions Office MS 3011  
3410 W. Fort George Wright Drive  
Spokane, WA 99224-5288
- Page 3-4:** Student Essay Form (**10% of acceptance score**)
- Page 5-7:** Volunteer Experience Form (**15% of acceptance score**)
  - Complete a separate form for each experience (*photocopy as necessary*).
  - Each form must be signed by your supervisor. (*Supervisor must be an OT or OTA.*)
- Page 8:** Work Experience Form (**15% of acceptance score**)
  - For work completed in a health care or education setting, please submit signed copies of work experience forms (*photocopy as necessary*).
- Page 9:** Coursework Experience (**30% of acceptance score**)
  - **Include an unofficial copy of all of your transcripts** (*including SFCC and SCC*). A Degree Audit is not acceptable. (*If you don't already have a copy, most schools have the information available online*).  
*Note: This is in addition to your official transcript sent to admissions. Include this one with your application packet.*
  - Complete the form noting transfer courses where applicable.
- Page 10:** Letter of Recommendation (*one*), (**mailed by reference**), (**5% of acceptance score**)
- Prepare a cover letter:** The letter should be addressed to the **Admissions Committee** and should discuss what makes you an outstanding applicant for the OTA Program.
- Submit a resume** outlining all work, educational, and veteran information.
- Verify all parts of your completed application**
  - **Your application includes the following** (*in this order*):
 

1. Cover letter	4. Resume
2. Pages 2-9 of this booklet	5. Confirm letter of recommendation has been sent.
3. <b>Copies of all of your transcripts</b>	
- Letter of recommendation** (*sent separately by reference*).
- Submit your application.** It should appear professional and organized.

**HAND DELIVER by Noon, Friday, March 16, 2018 to:**  
SFCC – OTA Program Office  
Magnuson Building 27, Room 357  
2917 W. Fort George Wright Drive  
Spokane, WA 99224-5202

**OR Postmarked by March 16, 2018 to:**  
OTA Admissions Committee MS 3029  
SFCC – OTA Program  
Magnuson Building 27, Room 357  
2917 W. Fort George Wright Drive  
Spokane, WA 99224-5202

**PLEASE NOTE:** If you meet ALL the basic acceptance requirements of the OTA program, you will be required to attend a ½ day in-person and group interview process on the campus of SFCC. You will be notified by April 27, 2018 if selected for an interview. Participation in the interview is required.





**DEMOGRAPHIC INFORMATION**

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Address \_\_\_\_\_ Apt. No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone (day) \_\_\_\_\_ (evening) \_\_\_\_\_

E-mail \_\_\_\_\_

1. Do you meet the Special Requirements as outlined on pages 4-5 of the *Occupational Therapy Assistant Program Information* section.     Yes     No
2. Are you currently enrolled at SFCC?     Yes     No    At SCC?     Yes     No
3. Are you attending college Winter Quarter 2018?     Yes     No    If yes, which school: \_\_\_\_\_
- 3a. What classes are you taking Winter Quarter 2018? \_\_\_\_\_  
\_\_\_\_\_
4. Are you attending college Spring Quarter 2018?     Yes     No    If yes, which school: \_\_\_\_\_
- 4a. What classes are you taking Spring Quarter 2018? \_\_\_\_\_  
\_\_\_\_\_
5. Are you a veteran of the US Armed Services?     Yes     No
5. Are you a spouse of a US Armed Services member/veteran?     Yes     No

**COLLEGE EDUCATION**

Institution	Location	Degree/Diploma	Dates Attended
1			From ___/___ to ___/___
2			From ___/___ to ___/___
3			From ___/___ to ___/___
4			From ___/___ to ___/___



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## STUDENT ESSAY

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Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Please **handwrite** answers to the three questions below.  
(Use the paper provided on the next page).

1. In your own words, please describe what occupational therapy is and what an average day in the life of an OT practitioner might look like. Please include reflections from your volunteer or work experience.
2. How did you become interested in the field of occupational therapy? Include information regarding prior work, educational or personal experience and exposure to people with disabilities.
3. As an OTA, how would you describe your role as a member of a health care team?

**STUDENT ESSAY** — Please answer the three questions below. Maximum of 1 page for all 3 questions.



**VOLUNTEER SUMMARY SHEET**

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

The OTA program requires 30 total hours of volunteer experience divided between at least **two** occupational therapy settings and with an Occupational Therapist/Occupational Therapy Assistant for admission to the program. It is recommended you obtain additional hours (*to a maximum of 50*), and the quantity of your total hours will serve as 15% of your acceptance score.

**Please summarize your volunteer experience.**

**1. Volunteer in occupational therapy setting (*clinic, hospital, nursing facility, school, etc.*)**

SETTING NAME	SUPERVISOR	OT or OTA	HOURS
1		<input type="checkbox"/> OT/OTA	
2		<input type="checkbox"/> OT/OTA	
3		<input type="checkbox"/> OT/OTA	
4		<input type="checkbox"/> OT/OTA	
5		<input type="checkbox"/> OT/OTA	
6		<input type="checkbox"/> OT/OTA	

*For each setting listed above, a **Volunteer Experience Form** needs to also be submitted.*



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**VOLUNTEER EXPERIENCE VERIFICATION FORM**

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*(Make copies for each volunteer experience)*

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

Name of Facility \_\_\_\_\_

Facility Address \_\_\_\_\_

Dates volunteered: from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Total hours volunteered: \_\_\_\_\_

Duties and responsibilities performed or observed:

I certify that the above information is correct.

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Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_



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**VOLUNTEER EXPERIENCE VERIFICATION FORM**

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*(Make copies for each volunteer experience)*

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

Name of Facility \_\_\_\_\_

Facility Address \_\_\_\_\_

Dates volunteered: from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Total hours volunteered: \_\_\_\_\_

Duties and responsibilities performed or observed:

I certify that the above information is correct.

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Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_



**WORK EXPERIENCE VERIFICATION FORM**

OTA applicants have often been employed in facilities in which they work with individuals with disabilities. Please reflect on your work experiences related to working with individuals with disabilities, or during employment situations in which you used skills and knowledge which contribute to your understanding of occupational therapy. Each work experience needs to be verified by completion of this form. *(Make additional copies as needed).*

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

Name of Facility/Business \_\_\_\_\_

Facility Address \_\_\_\_\_

Dates worked: from \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_

Hours per week: \_\_\_\_\_ Total hours worked: \_\_\_\_\_

Job duties and responsibilities included:

I certify that the above information is correct.

Supervisor Signature

Date

Title



**COURSEWORK EXPERIENCE FORM**

Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Based on your transcripts, list your grades for the classes taken.

**Note:** Academic work **older than 5 years** shall be evaluated on a case by case basis.

**IMPORTANT:** The Application Committee must have a copy of your transcript(s) to evaluate this section of your application (*this includes classes taken Winter Quarter, 2018*).

**PREREQUISITES**

- **Biology&160:** General Biology with Lab: 5 Credits Grade \_\_\_\_\_  
 School where taken \_\_\_\_\_ Course No. \_\_\_\_\_
- **Biology 241:** Human Anatomy and Physiology: 5 Credits Grade \_\_\_\_\_  
 School where taken \_\_\_\_\_ Course No. \_\_\_\_\_
- **Psych&100** (or equivalent *Introduction to Psychology*): 5 Credits Grade \_\_\_\_\_  
 School where taken \_\_\_\_\_ Course No. \_\_\_\_\_
- **ONE OF THE FOLLOWING MATH COURSES:**
  - **Math 88:** 5 Credits Grade \_\_\_\_\_  
 School where taken \_\_\_\_\_ Course No. \_\_\_\_\_
  - **Math 92, 94, or 96:** 5 Credits Grade \_\_\_\_\_  
 School where taken \_\_\_\_\_ Course No. \_\_\_\_\_
  - **Math 97:** 5 Credits Grade \_\_\_\_\_  
 School where taken \_\_\_\_\_ Course No. \_\_\_\_\_
  - **Math&107:** 5 Credits Grade \_\_\_\_\_  
 School where taken \_\_\_\_\_ Course No. \_\_\_\_\_
  - **Business Math 123:** 5 Credits Grade \_\_\_\_\_  
 School where taken \_\_\_\_\_ Course No. \_\_\_\_\_
- **English&101** (or equivalent *English Composition Class*): 5 Credits Grade \_\_\_\_\_  
 School where taken \_\_\_\_\_ Course No. \_\_\_\_\_

**Previous Degrees:**

**Comments about Coursework:**





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**LETTER OF RECOMMENDATION**

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Student Name \_\_\_\_\_ SFCC ID# \_\_\_\_\_

Please give this form to the person from whom you are requesting a letter of recommendation.

**Note:** Your recommendation needs to be from someone who has known you in a volunteer, work or educational setting. A letter from an occupational therapy practitioner is recommended, but not required.

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Dear Colleague:

\_\_\_\_\_ is applying to the Occupational Therapy Assistant Program at Spokane Falls Community College. This is a competitive application process, and your letter of recommendation is important to the Application Committee. In your letter, please address as much of the following as you are able:

- How long you have known the applicant and in what capacity.
- Your opinion regarding the candidates ability to relate to others, work behaviors, and/or personal characteristics that would contribute to their ability to be a successful OTA.
- Any concerns you have regarding this applicant entering the health care field of occupational therapy.
- Your credentials and letter should be on your professional letterhead, if possible.

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Please mail your letter **directly** to the OTA Admissions Committee at the address below.

***Letters received directly from applicants will not be considered.***

OTA Program Director, MS 3029  
Spokane Falls Community College  
2917 W. Fort George Wright Drive  
Spokane, WA 99224-5202

The OTA program is accredited by the Accreditation Council for Occupational Therapy Education (ACOTE®), of the American Occupational Therapy Association (AOTA). Information regarding accreditation can be obtained at:

ACOTE  
4720 Montgomery Lane  
Suite 200  
Bethesda, MD 20814-3449

301-652-6611, ext. 2914  
accred@aota.org

Most states require licensure in order to practice, however state licenses are usually based upon the results of the NBCOT examination. **Be advised that a criminal record may render an individual ineligible to take the certification exam and consequently ineligible to practice as an occupational therapy assistant.** If you have concerns pertaining to a past criminal record, you should contact NBCOT at (301) 990-7979 to determine your eligibility for the exam.



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