



THE COLLEGE OF
OSTEOPATHS
ESTABLISHED 1948

COLLEGE OF OSTEOPATHS
Application for admission to the M.Ost/B.Ost
in collaboration with Staffordshire University

Year wishing to start programme 2013 <input type="checkbox"/> 2014 <input type="checkbox"/> 2015 <input type="checkbox"/> 2016 <input type="checkbox"/>		Indicate whether you are interested in a September or a January (Fast-track year 1 start) September <input type="checkbox"/> January <input type="checkbox"/>	
Surname		Title	
Forename(s)			
Home address			
Postcode		Email	
Home Telephone No.	Work Telephone No.	Mobile No.	
Place of Birth		Date of Birth	
Nationality			
Correspondence Address (if different from above)			
EDUCATION (School/College)			

[illegible]



EMPLOYMENT

Current Employment

Date Commenced

Name and Address of Employer

Position held and responsibilities

Previous employment and responsibilities

(continue on a separate sheet if necessary)

What are your current interests & Activities?



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What made you consider Osteopathy as a profession?

How did you first become interested in osteopathy?

Have you had any contact with osteopathy either as a patient or observer?



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What do you see as your strengths and weaknesses?

References

Please supply the names and addresses of two professional referees, not related to you, who have known you for at least three years.

Name

Address

Relationship

Name

Address

Relationship

Where did you hear about our programme of study?

Declaration

I confirm that all the enclosed information is true to the best of my knowledge

Signature

Date

Please return this form to:
Osteopathy Programme
Faculty of Health
Brindley Building
Staffordshire University
Leek Road
Stoke on Trent
ST4 2DF