



NATIONAL ACADEMY OF ANIMAL ACUPUNCTURE

Animal Acupuncture Program Application

Application for enrollment in the Animal Acupuncture course at the National Academy of Animal Acupuncture. Applications will be reviewed and applicants who are chosen for a zoom interview will be notified.

Date of Application: _____

PERSONAL INFORMATION

Name: _____
Last First Middle

Other Names Used: _____

Date of Birth: ____ / ____ / ____

OFFICIAL MAILING ADDRESS/CONTACT INFORMATION

(All correspondence will be sent to this address)

Address: _____
Street

City State Zip Code

Cell Phone: _____

Email: _____

BUSINESS CONTACT INFORMATION

(Complete only if different from official address)

Business Phone: _____

Email: _____

Website: _____

FORMAL ACUPUNCTURE EDUCATION

School Name: _____

Location: _____

Graduation Date: _____

LICENSES

List your current license(s) in Acupuncture. Please list all other occupational licenses – (nursing, veterinary, chiropractic, etc.). Include State of issue and license # and date of issue.

Acupuncture License - Number & State:

Other Licenses - Number & State:

PERMISSION TO USE PHOTOGRAPH

I grant the National Academy of Animal Acupuncture (NAAA) the right to take photographs or videos of myself in connection with activities I attend at the NAAA, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that the NAAA may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

Applicant's Signature: _____ **Date:** _____

STATEMENT OF ACKNOWLEDGEMENT

I hereby certify that the information I provided on this application and in any supporting documents is accurate, and true, to the best of my knowledge. I acknowledge and agree to abide by the policies, procedures, and Code of Ethics promulgated by the American Board of Animal Acupuncture (ABAA). I agree to inform and release to ABAA and the NAAA and their designated agents all pertinent information about my qualifications or about other matters that may arise in connection with my application. I agree that I am prohibited from transmitting information about examination questions or course content in any form to any person or entity and that my failure to comply with this prohibition may result in my scores being cancelled. I understand that acceptance into the course is not automatic upon application.

Applicant's Signature: _____ **Date:** _____

Please submit your application along with the following to:

NAAA

Info4naaa@gmail.com

- **Resume**
- **A thoughtful essay about the following:**
 - **Your current acupuncture practice and any specialties**
 - **Your experience with handling and caring for dogs and/or horses**
 - **Your interest and goals in taking the Animal Acupuncture course and becoming an Animal Acupuncturist**
- **Photo**
- **3 References and their contact information**
- **A copy or photo of your current, active acupuncture license**

After receipt and review of your application, an NAAA instructor will contact you to schedule a Zoom interview.