

## MATRICULATION PROCEDURE

NAME*		
ADDRESS		
CITY	STATE	ZIP
STUDENT ID NUMBER	TELEPHONE	
*It is the responsibility of the student to provide Be	erkshire Community College with any changes to co	ontact information.

All boxes must be checked as complete before form can be submitted to the Admissions Office.

- 1. You have already applied to BCC and the Health Science-Massage Therapy Option (Pre-Massage program)
- 2. Your next step is to finish matriculating into the Massage Therapy Certificate Program by completing the following

  Submit official transcripts of any previous colleges attended
  - □ Demonstrated college level reading and writing skills through Accuplacer; HS/GED/HiSET GPA/transcript; or completion of English composition with a C or better
- **3.** Submit this completed form to the Admissions Office as soon as you meet all requirements. (Field Administration Building (in person) or via your BCC email: admissions@berkshirecc.edu ). Admission to the program is done on a space available basis. Students accepted into the program will receive an email confirmation to accept their seat in the program.

## **IMPORTANT NOTICES:**

Any prior criminal offense could hinder placement in clinical agencies. See "CORI" and "SORI" requirements in current College catalog for details: berkshirecc.smartcatalogiq.com/en/2019-2020/catalog/policies/admissions/special-requirements/criminal-and-sex-offender-record-information-checks-cori-sori/

## **Health Requirements**

Health and Immunization Policy, including required immunizations, health verification, essential functions, for the program can be found at BCC webpage: www.berkshirecc.edu/admission-and-aid/admission-process/immunization-and-medical-records.php

## Timeline for Health Records

Massage Therapy Certificate Program	Due by Date for Proof of Immunizations and Health Verification
Fall Start	August 1
Spring Start	December 1

Submit requirements to the Nursing, Health and Wellness Medical Records Office located in the Hawthorne building, Office #323, Berkshire Community College Main Campus.

Telephone: 413-236-4609; Fax: 800-724-9943; medicalrecords@berkshirecc.edu

Consequences of Failure to Comply: student will not be allowed to participate in clinical experiences without ALL health requirements fully completed.

I have read the health requirements and understand that it is my responsibility to fully comply.

I have completed all matriculation requirements.

SIGNATURE \_

Berkshire Community College is an affirmative action/equal opportunity institution and does not discriminate on the basis of race, creed, religion, color, gender, gender identity, sexual orientation, age, disability, genetic information, maternity leave, military service and national origin in its ducational programs or employment pursuant to Massachusetts General Laws, Chapter 151B and 151C, Title VI, Civil Rights Act of 1964; Title IX, Education Amendments of 1972; Section 504, Rehabilitation Act of 1973; the Americans with Disabilities Act, and regulations promulgated thereunder, 34 C.F.R. Part 100 (Title VI), Part 106 (Title IX) and Part 104 (Section 504). All inquiries concerning application of the above should be directed to the Director of Human Resources and Affirmative Action Officer, and Coordinator of Title IX and Section 504, located in the Susan B. Anthony Annex (A-21) at 413-236-1022. The Commonwealth of Massachusetts Community Colleges' Affirmative Action Plan, which is available in the Human Resources Office, contains a full explanation of this specific policy.