**Please read carefully before initialing:**

**Accreditation Status of the Occupational Therapy Assistant Program**

The Occupational Therapy Program (OTA) at Parker University has been granted **Full Accreditation Status** by the **Accreditation Council for Occupational Therapy Education (ACOTE)** of the American Occupational Therapy Association (AOTA), located at 4720 Montgomery Lane, Suite 200, Bethesda, MD, 20814-3449. The phone number for ACOTE is (301) 652-AOTA (2682), and its Web address is [www.acoteonline.org](http://www.acoteonline.org).

The OTA Program must be accredited by ACOTE in order for graduates to sit for the National Board for Certification in Occupational Therapy (NBCOT) Examination for the Occupational Therapy Assistant.

1. I understand that Parker University is accredited by the Southern Association of Colleges and Schools Commission on College (SACSCOC). \_\_\_\_\_ (initials)

2. I understand that the Occupational Therapy Assistant programs are accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association (AOTA). \_\_\_\_\_ (initials)

3. I understand that the Occupational Therapy Assistant programs at Parker University has been granted

**“Full Accreditation Status”** by ACOTE and earned accreditation in August 2016. \_\_\_\_\_ (initials)

4. I understand that ACOTE can be reached at:

 American Occupational Therapy Association (AOTA)

 4720 Montgomery Lane

 P.O. box 31220

 Bethesda, Maryland 20824-1220

 (301) 652-AOTA

 www.aota.org \_\_\_\_\_ (initials)

5. I understand that **ONLY** graduates of OTA programs that are fully accredited by ACOTE are eligible to sit for the national certification examination for the occupational therapy assistant administered by the National Board for Certification in Occupational Therapy (NBCOT) and be eligible for state licensure. \_\_\_\_\_ (initials)

6. I have had my questions pertaining to programmatic accreditation answered by my Admissions Counselor prior to enrollment. \_\_\_\_\_ (initials)

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Student name (print) Date

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Student Signature Date

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Admissions Counselor Signature Date