

Applicant's Name: \_\_\_\_\_

*As Part of the Requirements for Application to the Physical Therapist Assistant Program:*

- Applicants are required to spend at least **two days** (16 hours) of observation time in a Physical Therapy department
- Applicants are instructed to call the selected Physical Therapy department to request a specific time which will be acceptable for observation/volunteer work.

*Important Note*

Please make certain that all appropriate signatures are present and this form is completed in its entirety. Applicants should return this form with their Nursing & Allied Health Application. This form is valid for 2 years.

Name of Physical Therapist/Assistant (please print): \_\_\_\_\_

Physical Therapy Department: \_\_\_\_\_

Types of Treatments/Techniques Observed: \_\_\_\_\_

*Times of Observation (Dates)*

Total Hours: \_\_\_\_\_

Applicant Comments: \_\_\_\_\_

Physical Therapist (or Physical Therapist Assistant) Comments: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Physical Therapist/Assistant: \_\_\_\_\_

Printed Name of Physical Therapist/Assistant: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Thank you for your willingness to assist these students and the Physical Therapist Assistant Program at Chattanooga State Community College.**