

Tennessee State University  
Department of Occupational Therapy  
**Application Details**

**The completed application forms and all supporting documents need to be submitted via [OTCAS](#) no later than November 15<sup>th</sup>.**

- The process for admission into the Graduate Occupational Therapy Program is competitive. Completion of minimum requirements does not guarantee acceptance into the Masters in Occupational Therapy program.

**Minimum requirements for admission**

**All documents are now submitted via [OTCAS](#) , including:**

- **Official transcripts** from previously attended universities that verify 1) completion of a bachelors degree and 2) any completed prerequisites, must be sent **directly from your school** to:  
OTCAS  
Transcripts Dept.  
P.O. Box 9120  
Watertown, MA 02471
- **Official GRE scores**, sent directly from ETS Code: 1893
- **A minimum of three professional references or letters of recommendation** from professional and/or academic contacts. Family members or personal friends will not be accepted.
- **Documentation of a minimum of 30 hours of observation** with practicing Occupational Therapy practitioners at a minimum of two practice settings and populations. *Observation hours with an OT assistant can no longer be accepted.*
- **TSU OT Application Supplement Page**
- **After review of all submitted items by the admissions committee**, the applicant *may* be invited to participate in the open house/interview. An interview with the admissions committee is *required* prior to admission.

**For more information, please contact the appropriate department listed below:**

- Department of Occupational Therapy  
Mr. Scott St. Dennis, Administration Assistant  
Website: <http://www.tnstate.edu/OT/> Phone: 615-963-5891
- TSU Graduate Studies and Research  
Email: [jbrown25@tnstate.edu](mailto:jbrown25@tnstate.edu)  
Website: <http://www.tnstate.edu/graduate/> Phone: 615-963-7262
- Department of Financial Aid  
Website: [http://www.tnstate.edu/financial\\_aid/](http://www.tnstate.edu/financial_aid/) Phone: 615-963-5701

**TENNESSEE STATE UNIVERSITY  
DEPARTMENT OF OCCUPATIONAL THERAPY  
Document Submission Specifics**

- All OT application materials are now submitted via [OTCAS](#). All forms in our application packet, (Supplement, professional recommendations, GRE scores, transcripts, and documented observation hours) are to be uploaded there.

**1. To OTCAS**

TSU Graduate School Application fee (link is on OTCAS)
OTCAS Application (all documents)

All letters of Recommendation
Observation Hours Verification
Official Transcripts (send directly from your school(s) to OTCAS) Code: 1893
Official GRE Scores from ETS to OTCAS Code: 1893
OT Application Supplement (List of prerequisite courses)

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Tennessee State University  
 Department of Occupational Therapy  
**OCCUPATIONAL THERAPY APPLICATION SUPPLEMENT**

<b>Applicant Name:</b>	<b>Email:</b>
<b>Permanent Address:</b>	<b>Phone contact:</b>

**VERIFICATION OF UNDERSTANDING AND INTENTION**

- I understand that withholding information requested in this application or giving false information may make me ineligible for admission to or continuation in the Master of Occupational Therapy program at Tennessee State University.  
**Initials:** \_\_\_\_\_
- I understand that I must pay for and complete a criminal background check and drug screening in order to complete the program. I also understand that a felony conviction or positive drug test may affect my ability to sit for the NBCOT Board Exam and or to attain state licensure.  
**Initials:** \_\_\_\_\_
- I understand that I need to have earned a bachelor's degree prior to starting the MOT program. I earned my bachelor's degree on \_\_\_\_\_ (mo/yr) or will be completing my bachelor's degree on \_\_\_\_\_ (mo/yr). My current cumulative GPA is \_\_\_\_\_.  
**Initials:** \_\_\_\_\_

**Academic Preparation:** Pre-requisite course completion (6 of 9 must be completed by Nov. 15, 2015.)

Program Requirement	Req. credits	Course number and title	Institution	Term & Year	Grade
General Psychology	3				
Abnormal Psychology	3				
Developmental Psychology covering the lifespan	3				
Anatomy and Physiology I	4				
Anatomy and Physiology II	4				
Statistics	3				
Medical Terminology	1-3				
Physics with lab	4				
Introductory course in sociology or anthropology	3				

**For any missing classes, please indicate your plan for completing:**

Applicant signature: \_\_\_\_\_

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

**Tennessee State University**  
**Department of Occupational Therapy**  
**DOCUMENTATION OF OBSERVATION HOURS**

<b>Applicant name:</b>	<b>Applicant email:</b>
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- **Applicant:**  
Print your name and email. Give this form to your supervising OT practitioner.
- **Clinical Supervisor:**  
 This form will document the observation hours required for consideration for admission to TSU's Master of OT program.

Observation date	Number of hours	Supervisor's initials

<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <p style="text-align: center;">(Printed name of supervising OT)</p> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <p style="text-align: center;">(Signature)</p>	<b>Facility and Address</b>
<b>Type of Setting:</b>	
<b>Brief description of duties:</b>	<b>Total hours</b>