Elective: _	
_	

# Hands on Healing Institute Elective Application



Name:				18 1115
First	Middle	Last	HHI Alum	ni: □ yes □ no
☐ Check here if new rea	istration. (Fill out both sides	of application)	If <b>no</b> then	
	ormation since last application.		School Na	ame
Date of Birth:		-	* Transo	cripts needed
Street Address:				·
City	State	Zip	-	
Phone: Home	Work	ζ.	Cell	
E-mail				
How did you hear about ι	us? Friend Yellow pag	es Flyer Internet	Other	
EMERGENCY CONTAC	T (nearest nerson):			
	(nearest person).			
Phone:	Relation	onship		
<b>EDUCATION</b>				
	ols, colleges, universities, busi	iness or trade schools that	t you have attended:	
Name & Address			ates Attended	Degree & Major
<u>HEALTH HISTORY</u>	e you ever been under the care	o of a doctor halistic or at	horwico? Voc No.	
	•			
Have you ever had psych	natric care? Yes No II	yes, please elaborate:		
Are you currently on any	medications? Please list.			
Please list any major sur	geries, illnesses, injuries, conc	cussions, accidents, etc.:		

Hands on Healing Institute 6708 Foothill Boulevard, Tujunga, CA 91042

Phone (818) 951-5811 Fax (818) 951-5813 E-mail: administration@gotohhi.org www.gotohhi.org

# **FEMALE APPLICANTS ONLY**

Are you pregnant? Yes No Maybe

# **ALL APPLICANTS**

Please mark each item that applies with a "P" for past condition or a "C" for current condition. If you have a condition that is not listed below, please mark "Other" and specify in the space provided.

Cardiovascular:ArteriosclerosisHeart attackHypertensionMurmursStrokeOther	Gastrointestinal:ConstipationDiarrheaGastritisHepatitisHerniaOther:	Respiratory:AsthmaBronchitisEmphysemaPneumoniaTuberculosisOther:
Musculoskeletal:ArthritisFascia diseaseJoint diseaseTendonitisVaricose veinsOther:	Head, Eyes, Nose, Throat:  Cataracts Dizziness Impaired hearing Loss of consciousness Nosebleeds Other:	Endocrine:AnemiaCancer (Which part of the body?DiabetesEpstein-Barr SyndromeAny communicable disease? Specify: Other:
Skin:Athlete's footHivesPsoriasisOther:	Urogenital:HerpesCandidiasisGonorrhea	Other
I DECLARE UNDER PENA	ALTY OF PERJURY THAT THE ABOV	E INFORMATION IS TRUE AND ACCURATE.
Signature:		
Dato		

Hands on Healing Institute 6708 Foothill Boulevard, Tujunga, CA 91042

Phone (818) 951-5811 Fax (818) 951-5813 E-mail: administration@gotohhi.org www.gotohhi.org

ELECTIVE FEES, POLICIES & REGISTRATION						
Elective:End Date						
I have already taken this course and will be auditing at a 50% reduction in the course price. Audit Fee \$		School Use Only  Cash/check#/  Date Amount cc#(last 4/exp) Balance Init				

### **Payment Policy:**

You may reserve your space in a class with a \$25 deposit. This deposit will be applied to the class cost. **Note:** Six students need to be enrolled for a class to be held so it's important to at least put a \$25 deposit down **5 business days prior to start date** so class is not cancelled.

\*21 hours or less: Full tuition fees are due upon enrollment.

<u>22 hours or more:</u> Tuition fees may be divided into two equal parts: The first part of tuition is due upon enrollment; the second part is due midway through the class. Student will not be permitted to continue class unless second payment is made on time.

Attendance, Cancellation and Withdrawal Policy: Students must cancel at least 2 business days prior to class start date in order to receive credit or refund. No shows are not eligible for refund or credit. Students are expected to arrive on time (15 minute early first day) and to attend all scheduled classes (no classes are scheduled on major holidays). The instructor of each class with record absences and tardiness. Students must complete missed classroom hours and instructional materials no later than 30 days from end of class. Missing more than 15% of class hours will result is an automatic DROP, forfeiting all hours and payment. Failure to complete hours of classroom attendance required on time, will result in a "Failed" grade.

**Tutoring**: All missed hours can be made up with individual tutoring at \$18/hour. One hour of tutoring equals one hour of class time. It is the responsibility of the student to arrange with the instructor make-up sessions and to obtain homework assignments and other materials distributed during missed sessions.

#### **Required Material:**

Students must bring their own basic supplies (e.g. linens, lotion, pen and paper, etc.) and any required material for course. See web site for Course requirements - http://gotohhi.org/electives/

#### Note:

Class schedules are subject to change. Please check the online "Calendar" link on our web site for the most current information, updates and class schedules. Hands on Healing Institute reserves the right to add, cancel or postpone classes, change dates, instructors, or policies, and/or raise tuition from any published literature.

Hands on Healing Institute is licensed to operate by the Bureau of Private Postsecondary Education for our MT300 & MT500 Massage Therapy Programs and all continuing education courses.

Provider Approved by California Board of Registered Nursing.

MT300 Program pending Approval for Veterans

Hands on Healing Institute 6708 Foothill Boulevard, Tujunga, CA 91042

Phone (818) 951-5811 Fax (818) 951-5813 E-mail: administration@gotohhi.org www.gotohhi.org

## **CLASSROOM PROTOCAL FOR HHI ELECTIVES**

**Class time:** Please arrive at least 15 minutes prior to class start time out of respect for the instructor, fellow classmates and the material being taught.

**Opening Circle for Meditation and/or Stretching:** Many of our classes begin with an opening circle. Please make yourself comfortable with pillows or chairs.

Class Materials & Information: You may already have some knowledge of the class materials. We ask that you put that aside and be open to receiving the wisdom of our instructors. Please refrain from engaging in debates with the instructor and bringing in your own ideas on the subject matter unless the instructor has opened the class up for input or discussion. Always follow the stroke sheets and the instructor's directions; DO NOT PRACTICE ANYTHING OTHER THAN THE TECHNIQUES BEING TAUGHT. If you are unable to follow these guidelines, you will be asked to leave the class.

**Student Behavior/Dress Code:** All incidents in which a student is misbehaving or dressed inappropriately (Comfortable, loose clothing should be worn. No short skirts, short-shorts, low-cut tops, underwear showing, low-riding pants or bare midriffs. Clothing should be professional.), will be written up on an Incident Report form and turned into the office. The student may also be sent home if the situation isn't resolved promptly.

**Classroom Discussions:** Please do not discuss politics, any sexual matters or your own personal story if it does not pertain to the class materials. Solicitations or promotions of any kind will not be tolerated.

**Proper Disrobing in class:** Use the provided changing rooms and toga-style wrapping with the top sheet when disrobing to receive a massage.

**Use of Essential Oils, Sage or Incense:** Please do not use Essential Oils unless it is an Aromatherapy class. If you feel the need of the benefits of Essential Oil, please go outside while this is being done. Please do not use sage or incense. Please refrain from using cologne or perfume on class days.

My signature below certifies that I have read, understood, and agreed to my rights and responsibilities, and the guidelines and policies of Hands on Healing Institute.

X Student's Signature:	Date:
Registrar's Signature:	Date:
PRINT NAME FOR CERTIFICATE*	
*Certificates available upon request only.	

Hands on Healing Institute 6708 Foothill Boulevard, Tujunga, CA 91042

Phone (818) 951-5811 Fax (818) 951-5813 E-mail: administration@gotohhi.org www.gotohhi.org