



Ayurveda Bodywork Specialist Program Application

* All fields are REQUIRED unless marked optional
Application fee: Non-refundable \$50.

First Name: _____ Middle Initial: _____ Last Name: _____

Street Address 1:

Street Address 2: (optional)

City: _____ State: _____ Zip: _____

Email Address:

Main Phone: () -

Mobile Phone: () -

Date of Birth: (MM/DD/YYYY) _____

Gender: Male Female

YOUR PERSONAL STATEMENT

What are your main reasons for wanting to become a Ayurvedic Bodywork Specialist?

EDUCATIONAL BACKGROUND

Highest Level of Education Completed: (select one)

- GED High School Diploma Some College College Degree

List courses that may be transferred to our ABS Program:

List your history of Ayurvedic training:

If your name was different when attending school, classes, or college please indicate that name:

Do you have any health conditions we should be aware of or that may impede your learning? If so, please describe:

Have you ever been convicted of a criminal offense? (If yes, please explain)

- YES NO

Have you ever been incarcerated? (If yes, please explain)

- YES NO
-

EMPLOYMENT HISTORY

Company Name:

Street Address:

City: _____ **State:** _____ **Zip:** _____

Telephone Number: () -

Person to contact at company:

Date(s) of employment (MM/DD/YYYY):

Briefly describe your job duties:

PLEASE READ THESE STATEMENTS AND ACKNOWLEDGE THAT YOU UNDERSTAND THEM.

Licensing of Ayurveda

Currently there is no licensing for Ayurveda, but we expect there will be something in place within the next 10 years. You will be one of Ayurveda's pioneers. Upon graduation, you will be registered to the SAMA record department and posted on our website on the graduate page.

SAMA encourages potential students to investigate the details of licensure laws in the state(s) and/or municipalities where they would like to practice. Admission specialists can provide information on where and how to obtain such licensure information.

✓ I understand that I may need to consult the board of health in the state where I plan to practice Ayurveda and massage.

Self-Employment Acknowledgment

Self-employment is a common vocational objective or outcome of our programs.

✓ I understand that I may be self-employed in my chosen field.

How to Enroll:

1st Step: Begin with either an email or phone introduction to discuss your vision and expectations and financial options.

2nd Step: Send in your completed application with the \$50 online fee or the \$40 personal check fee. Snap of photo of your application and attach it to an emailed or mail it via the US postal service to 26 Mumford Ave Newport, RI 02840.

3rd Step: Receive your Acceptance letter in your email inbox.

4th Step: Make your *Required Initial Deposit* or pay in full. Tuition and installments are outlined on our website.

Extra Fees: I understand there will be extra Fees: \$5-20 per seminar for supplies. Students bring their own supplies. SAMA will supply the large equipment such as massage tables and more.

SAMA is Approved... to operate as a school in the state of Rhode Island and is a continuing education provider for the National Certification Board of Therapeutic Massage & Bodywork (NCBTMB). Our Ayurvedic Bodywork Specialist Course provides unlicensed and licensed health and beauty professionals to become trained in Ayurvedic Bodywork Specialist Modalities. In the state of RI, unlicensed health and beauty professionals can legally operate under the title of Ayurveda.

Refund Policy:

If a student decides not to participate in our program and informs SAMA in writing 15 days prior to the agreed upon orientation (first day), a full refund will be provided minus a \$108 processing fee. The \$50 application is not refundable.

If a student decides to withdraw from our program within 2 weeks of the first day of the program, \$500 of the tuition is non-refundable.

If a student decides to withdraw from our program within 24-hours of, on, or after the start date, a minimum of \$800 of the tuition is nonrefundable. Any additional amount due/refundable will be calculated and prorated based on the date the letter of withdrawal was received by SAMA.

No refunds or credit will be issued for canceled/postponed seminars for inclement weather. Every effort will be made to reschedule such training sessions.

I have read chapters 23-74 under "*Unlicensed Healthcare Practices*" at this link:
<http://webserver.rilin.state.ri.us/Statutes/title23/23-74/23-74-1.htm>

The information I have provided is true and correct to the best of my knowledge. I have read and understand the above disclosure statements. I wish to have my application for admission considered by SAMA.

Please enclose your non-refundable application fee or pay online upon the submission of your application. If you are not accepted, you will be refunded.

To ensure an excellent educational experience, SAMA reserves the right to postpone the start date if the minimum amount of students for registration is not met. Students have a right to be notified within 1 month of the class start date in the unlikely event this should occur. By signing below, you agree that you have read all of the above and agree to the terms.

Signature: _____ Date: _____

“The doctor of the future will give no medicine but will interest hers/his patients in the care of the human frame, in diet, and in the cause and prevention of disease” – Thomas A. Edison

Infinite Gratitude & Light,

Namaste,

Karyn Chabot M.Ay, LMT, RYT

