



Tahoe Turning Point, Inc.
Addiction Counseling Program
PO Box 17509, South Lake Tahoe, CA, 91651
Office: (530) 541-4594 Fax: (530) 542-1226

Application for Admission

Applicant: Complete this form and return to Tahoe Turning Point, Inc. Please type or print clearly in ink.

Date: _____ SSN: _____

Name: _____ Male Female

Physical Address: _____

Mailing Address: _____

Telephone: Home: _____ Cell: _____

Email Address: _____

For which semester are you applying?	<input type="checkbox"/> Spring 2012
	<input type="checkbox"/> Summer 2012
	<input type="checkbox"/> Fall 2012
	<input type="checkbox"/> Winter 2013

Date of Birth: _____ Country of Citizenship: _____

If not an U.S. citizen, type of visa: _____

A full statement of your academic record is required for admission to the Addiction Studies Program. Please list the names of your high school, all colleges and/or universities.

Institution and Address	From (MM/YY) To (MM/YY)	Major	Degree Received

Have you been dismissed from any school or college? If so, please explain:

List occupations to date or please attach a current resume:

Professional Licenses and Certificates

List any professional licenses you hold. Please provide a copy of any license(s) or certificate(s) with this application form.

License or Certificate #	Date of Issue	State	Permanent or provisional	Areas, levels of validity	Expiration Date

All essays and supplemental statements provided with this application are my own original work. To the best of my knowledge, the information in this application is complete and accurate. If there are any changes in the information I have provided, I will notify Tahoe Turning Point, Inc. prior to matriculation. I understand that knowingly providing false information or failing to provide critical information relevant to this application may result in a denial of this application or subject me later to disciplinary action should I matriculate to Tahoe Turning Point, Inc.

Signature: _____ Date: _____

Personal and Professional Fitness (required)

Tahoe Turning Point, Inc. requires all applicants to complete this form. Because our students work with children and other vulnerable populations, it is important that we admit candidates who will maintain the standards of professional conduct required of counseling and educational fields.

You must answer each question either “yes” or “no,” whichever is true. For each “yes” answer you must provide a detailed explanation on a separate sheet and submit it with your application. Answering “yes” will not necessarily disqualify you from admission. However, failure to fully disclose information about prior criminal activity could lead to dismissal from academic status, school/clinical placements, employment, and certifications or licensing. Criminal history checks may be required before enrollment in specific classes.

Yes No 1. Have you ever left any educational or school-related employment, voluntarily or involuntarily, while the subject of an inquiry, review or investigation of alleged misconduct? Have you ever left educational or school-related employment when you had reason to believe an investigation for misconduct was underway or imminent?

Yes No 2. Are you currently the subject of an inquiry, review or investigation for alleged misconduct or alleged violation of professional standards of conduct by either an employer or a licensure agency?

Yes No 3. Have you ever been placed on leave by your employer for any alleged misconduct?

Yes No 4. Have you ever had any adverse action taken on a professional certificate, license or charter school registration? Have you ever been placed on probationary status for alleged misconduct while holding a professional license, certificate, registration, or credential?

Yes No 5. Have you ever been denied any professional license for which you applied or granted a professional license on a conditional or probationary basis for any alleged misconduct?

Yes No 6. Have you ever surrendered a professional license of any kind before its expiration?

Yes No 7. Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure?

Yes No 8. Have you ever been convicted or been granted a diversion or conditional discharge by any court for any: (a) Felony; or (b) Misdemeanor; or (c) Major traffic violation including but not limited to: driving under the influence of intoxicants or drugs; reckless driving; fleeing from or attempting to elude a police officer; driving while your license was suspended,

revoked or used in violation of any license restriction; or failure to perform the duties of a driver or witness at an accident?

Yes No 9. Have you ever been arrested or cited for any offense listed in section (8) above which is still pending in the courts? This includes any diversion, conditional discharge or postponed adjudication that has not been dismissed by the courts at the time this application is signed.

Yes No 10. Have you ever had any civil judgment or other court order, including but not limited to a restraining order, entered against you resulting from allegations of abuse, assault, battery, harassment, intimidation, neglect, stalking, or other threatening behavior toward other persons?

Yes No 11. Have you ever been dismissed from, suspended by, or subjected to academic or disciplinary sanctions or reprimands of any kind by any school, college, or university?

I hereby certify that the information I have submitted on or relating to the Personal and Professional Fitness form is true and correct. I also grant Tahoe Turning Point, Inc. permission to request that I submit civil or criminal records to verify any statement made on this form.

Name (print): _____

Signature: _____ Date: _____