



## American Academy of Health and Wellness Application for Admission: DAOM Program

1. Name: \_\_\_\_\_ Gender: ☐ Male ☐ Female ☐ Other

Last

First

Middle

2. Address: \_\_\_\_\_

Phone: \_\_\_\_\_ (H/C) \_\_\_\_\_ (W) Email Address: \_\_\_\_\_

3. Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Place of birth: \_\_\_\_\_

4. Country of Citizenship: \_\_\_\_\_ 5. Social Security Number: \_\_\_\_\_

6. Ethnicity: ☐ White, non-Hispanic ☐ Asian / Pacific Islander ☐ Hispanic  
☐ American Indian / Alaska Native ☐ Black, non-Hispanic ☐ Ethnicity not reported

7. Please indicate your choice:

Beginning Year: \_\_\_\_\_

Beginning Trimester: ☐ Winter ☐ Summer ☐ Fall

8.. List the master's degree program in TCM, or other TCM-related degree program(s), which fulfill AAHW's application requirement for the DAOM program.

Institution	Date attended	Degree and Date

9. If you are currently working as an acupuncturist, indicate the state which issued your license, with license number and expiration date. If you are applying for licensure, indicate the state you will be licensed in.

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10. List any academic honors, research work, and publications (attach additional pages if desired)..

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11. Professional/Employment History. List the professional position(s) or job(s) you have held in the last 5 years.

Business or Employer Name	Position and Type of Employment	Dates

12. Have you ever had a credential or license denied, revoked or suspended? ☐ Yes ☐ No

If yes, please explain:

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13. Have you ever been convicted of a felony? ☐ Yes ☐ No

If yes, please explain:

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14. Letters of recommendation. Please list the names and addresses of two persons (non-family members) you are asking to send letters of recommendation. The writer should send the letter directly to AAHW.

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15. Personal statement. Please submit a 500-word essay (on a separate sheet) addressing the following questions: *Why have you decided to pursue a doctoral degree in TCM and integrative medicine at this time? Why did you choose to attend AAHW? What effects or benefits (if any) do you expect this degree to have on your professional life (i.e. career advancement, increased job satisfaction, etc)?*

16. List your hobbies or other interests you would like to share: \_\_\_\_\_

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**The following materials must be submitted to AAHW with this application.**

A. Completed Application for Admission Form.

B. A personal statement as described above (#15).

C. Application fee of \$100.00. Non-refundable.

D. Official transcript of relevant master's or TCM degree(s) earned (sent directly to AAHW Admissions Office from the institutions).

E. Two letters of recommendation (sent directly to AAHW Admissions by the writer).

F. Copy of current acupuncture license, if applicable.

G. Transcripts from foreign institutions must be evaluated by an NACES member before submission. You must submit the results of a recognized English-language assessment test if you have not completed educational training in English as detailed in "International Student Application" on page 28 of the DAOM catalog.

I hereby certify that the information given by me in this application is true and correct.

Signature: \_\_\_\_\_

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