



5749 NW 151 Street, Miami Lakes, FL 33014
www.sampoornacollege.com

APPLICATION FOR ADMISSIONS

- Sampoorna Ayurvedic College is recognized by the Florida Department of Education and Florida Commission on Independent Education under the authority of Florida State Statutes, Section 1005.06”.
- Applications are accepted year-round. Upon approval of the application, an interview must be scheduled with the College Director.
- There is a \$50 non-refundable deposit to submit the application for any degree program
- Proof of high school must be provided prior to enrollment

PERSONAL INFORMATION

Last Name	
First Name/ Middle Initial	
Date of Birth	
Social Security Number	
Mailing Address	
Daytime Phone Number	
Email	
Are you a U.S. Citizen/Permanent Resident?	
Country of Citizenship: Ethnicity: (<i>This information will not be used in a discriminatory manner</i>)	
Are you Hispanic or Latino:	Yes/No

How would you describe your racial background:	<input type="checkbox"/> Asian <input type="checkbox"/> Black African or American <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White
Are you employed?	
Where?	
Name of supervisor?	
How did you hear about Sampoorna Ayurvedic College?	
Did a student or graduate refer you? If so, please tell us who so that we can send a proper thank you.	

EDUCATIONAL INFORMATION

- You will need to supply the school with proof of High School Graduation or the equivalent.
- Verification of a high school level of education or equivalent is required.
- A copy of your High School diploma, transcripts, or equivalent will be needed to complete the admissions process.

Do you have a high school diploma or equivalency?	
HIGH SCHOOL	
Name of high school	
Address of high school	
Date of graduation	
GED/Other equivalency: Location/Date Completed	
COLLEGE	
Name of college	
Address of college	

Date of graduation (if applicable)	
Are you transferring an Anatomy/Physiology course? (Official transcripts and/or certificate must be provided)	
If applying for an ayurveda program, have you ever been enrolled in another Ayurvedic school or program?	Yes/ No If yes please specify

ENROLLMENT INFORMATION

Please check which program and level you would like to enroll in and desired start date

Desired Start Date	
Program	
Ayurveda	<input type="checkbox"/> Ayurvedic Health Counselor <input type="checkbox"/> Ayurvedic Practitioner <input type="checkbox"/> Doctorate Degree in Ayurvedic Medicine (Ayurvedic Doctor)

DISCIPLINE INFORMATION

Have you ever been placed on probation, suspended, removed, dismissed or expelled from any school or academic program? If yes, please explain.	Yes/ No If yes please specify
Other than traffic offenses have you ever been convicted of a misdemeanor, felony or other crime? If yes, please explain.	Yes/ No If yes please specify

ENTRANCE ESSAY: In no more than 500 words, explain why you would like to study Ayurveda.

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AFFIRMATIONS & AUTHORIZATIONS

I affirm that the information I have provided is accurate to the best of my knowledge.	
I authorize all schools you attended to provide all requested records and allow review of your application for the admission process chosen on this application.	
I affirm that a non-refundable fee of \$50.00 is required in order to submit my application.	
Signature	
Date	