



SUNNY MOUNTAIN SCHOOL OF NATURAL HEALING
P.O. BOX 369 MOUNTAINDALE N.Y. 12763 -- (845) 436-6286

ENTRANCE EXAMINATION APPLICATION & COURSE EXEMPTION APPLICATION

Full Name: _____

Present Home Address: _____

State: _____ Zip: _____ Country: _____

Telephone: _____

Date of birth: _____

I hereby apply for Sunnah's entrance examination

A \$100.00 exam application fee must accompany this form.

SIGNATURE: _____ **DATE:** _____

THIS PART BELOW IS ONLY FOR COURSE EXEMPTION APPLICANTS :

COURSE TITLE: _____

COURSE NUMBER: _____

BASIS FOR EXEMPTION – (Check one or more that apply).

Same or similar course taken at another college or university or on the job.

Through life or work experience.

Passed an equivalent examination at another similar school.

DOCUMENTATION provided to substantiate exemption

(i.e., proof of employment, dates employed, duties, whom we can contact, copies of certification, etc.) Include copies of the documents and explain below. _____

I hereby certify that the information provided here is truthful and correct to the best of my knowledge.

SIGNATURE: _____

DATE: _____

PRINTED NAME: _____

STUDENT ID OR SS# _____