OCCUPATIONAL THERAPY ASSISTANT PROGRAM

2022 PRE-ADMISSION OBSERVATION FORM

Submit this completed document by email to apply@sunyorange.edu or mail to:
SUNY Orange
Office of Admissions
115 South St
Middletown, NY 10940

This form must be filled out by students wishing to be considered for entry into the Occupational Therapy Assistant Program and **must be returned to the Office of Admissions by the application deadline (February 1, 2022).**

1. NAME: ❑Mr ❑Ms _____
First Middle Last

2. YOUR STUDENT ID# (if known): A_____ 3. **DATE OF BIRTH:** Month_____Day_____Year_____

3. MAILING ADDRESS: _____
Number and Street City State Zip Code

4. TELEPHONE:_____ 6. **E – MAIL:** _____
Area Code and Number

Assignment and Videos to replace observations at 3 different practice settings.

Please watch the following videos of Occupational Therapy in different practice settings, including Mental Health, Physical Disabilities and Pediatrics/Developmental Disabilities. Complete a reflection paragraph on each of the 3 practice areas.

Physical Disabilities: Please watch both videos, write a 1 paragraph reflection.
https://www.youtube.com/watch?v=GfzCiFI45tI
https://www.youtube.com/watch?v=7y6x_L1VGHk

Pediatrics/Developmental Disabilities Please watch all 3 and write a 1 paragraph reflection.
https://www.youtube.com/watch?v=YUdsgQGHSR8

https://www.youtube.com/watch?v=wc2auOoAuy4

https://www.youtube.com/watch?v=3HcdaBFrT6Y

Mental Health Please watch both videos, write a 1 paragraph reflection.

https://youtu.be/lVX_h-OroF0

https://youtu.be/YqKwFtNQ-vY