



OCCUPATIONAL THERAPY ASSISTANT PROGRAM

2027 PRE-ADMISSION OBSERVATION FORM

Submit this completed document by fax* email/scan or mail to:

SUNY Orange
Office of Admissions
115 South St
Middletown, NY 10940
*Fax: 845-342-8662

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, 2027).**

☐ Mr

1. NAME: ☐ 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.

For 2025 you are required to 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 and 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 both and write a 1 paragraph reflection.

<https://www.youtube.com/watch?v=YUdsgQGHSR8>

<https://www.youtube.com/watch?v=WJs7dge75uM>

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

[NHSGGC - Occupational Therapy in Mental Health - How We Help People - Bing video](#) [Occupational Therapy Practice: Mental Health - Bing video](#)

<https://www.youtube.com/watch?v=5qNZIe7UTas>