

# **UNIVERSITY OF NATURAL MEDICINE**

Submit your application for acceptance to the university to:  
**admissions@universitynaturalmedicine.org**

## **INSTRUCTIONS:**

Fill out this form completely and attach all requested documents for your application as instructed within the document. You will be asked for a form of payment for the application fee, to be eligible for consideration by the Admissions Committee. Once all documents and payment are received, you will be sent an email acknowledgement that your application has been accepted and is in the queue for the review process. Please allow 2-4 weeks for the committee's decision to be returned to you.

Date of Application: \_\_\_\_\_

Full Name of Applicant: \_\_\_\_\_

Current Street Address: \_\_\_\_\_

Current Mailing Address (if different): \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Present Occupation / Title: \_\_\_\_\_

Employer / School: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Native Language: \_\_\_\_\_

## ***Please Check (all) Degree(s) you are seeking:***

### **General Studies:**

Bachelor of Natural Health Sciences (B.S.)

### **School of Natural Medicine:**

Master of Natural Health Sciences (M.S.)

with a Concentration in:

Clinical Nutrition

Botanical Medicine

Homeopathic Medicine

Doctor of Natural Medicine (D.N.M.)

Traditional Naturopath (T.N.)

Doctor of Philosophy in Natural Health Sciences (Ph.D.)

### **School of Integrative and Naturopathic Medicine:**

Master of Integrative Medicine

Doctor of Philosophy of Integrative Medicine (Ph.D.)

Doctor of Integrative Medicine (D.I.M.)

Doctor of Naturopathic Medicine (N.D.)

### **School of Mind / Body Medicine:**

Master of Mind-Body Studies (M.A.)

Master of Transformational Therapy and Contemplative Studies (M.A.)

Doctor of Philosophy of Transformational Therapy and Contemplative Studies (Ph.D.)

### Diploma & Certificate Programs

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|--|--|------------------------------------|
| <input type="checkbox"/> Nutritional Consultant                  | <input type="checkbox"/> Botanical Medicine            | <input type="checkbox"/> Iridology |
| <input type="checkbox"/> Homeopathic Medicine                    | <input type="checkbox"/> Ayurvedic Therapies           |                                    |
| <input type="checkbox"/> Integrative Medicine & Holistic Nursing | <input type="checkbox"/> Natural Animal Health Studies |                                    |
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### **Incoming Credit:**

The University accepts incoming credit toward a student's first undergraduate or graduate degree program. The University may also recognize knowledge gained through professional and personal experience as well. Thus, incoming credit may be considered for life and work experience. If you are applying for incoming credit for life and work experience, please indicate below and submit your portfolio for incoming credit with your application.

- I am applying for incoming credit with my academic transcripts.  yes  no  
*Please send transcripts to be considered with this application to be considered.*
- I am applying for incoming credit for life and/or work experience.  yes  no  
*Please send work and life experience portfolio with this application to be considered.*

### **1. Undergraduate / Graduate Institutions you have attended:**

Begin with last school attended. If attaching list separately, clearly mark with same headline. Transcripts and copies of degrees / diplomas earned must be received with this application to be considered for incoming credit. Copies of your transcripts are permissible for consideration of your application. However, upon acceptance to the University, Official Transcripts must be submitted before class registration may begin.

<b><u>Institution</u></b>	<b><u>Address</u></b>	<b><u>Dates</u></b>	<b><u>Degree / Credits Earned</u></b>

**2. List Publications, Honors, Awards:**

*List most recent first. Please use a separate sheet if necessary.*

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**3. Comments:**

*Briefly, describe the challenges and accomplishments of your educational experience.*

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**4. Employment:** *List most recent first. Please use a separate sheet if necessary.*

<b>Name/Address:</b>	<b>Dates</b>	<b>Position / Title</b>
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**5. Community/Volunteer Activities:** *List most recent first. Please use a separate sheet if necessary.*

<b>Name/Address:</b>	<b>Dates</b>	<b>Position / Title</b>
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**6. Associations, Memberships or Organizations:**

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**7. Comments:** *Briefly, describe the most important job skills and interpersonal skills you have developed through work or activities:*

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### 8. College Admissions Essay:

Your essay, along with your completed application and additional materials, is an opportunity for the Admissions Committee to assist you in the process of designing your program and educational curriculum to best fit your individual needs and professional goals. Because the programs offered require the student to work more independently, communication and writing skills are emphasized.

Your essay will be an important tool for the Admissions Committee to identify areas of strength, as well as areas where added focus and attention would improve your academic and professional career.

Briefly, in 1-2 two pages, please address the following topics within your essay. Feel free to elaborate beyond these topics, as you feel it pertains to your application.

1. Reflect upon your personal and professional history. How has this influenced your growth and contributed to your decision to seek admission to the University of Natural Medicine, and to the program(s) of your choice?
2. Your most valuable asset is your unique life experience. Our programs are designed to help you build upon your experience and special talents. Above all, we value your special individuality and ability to reflect upon your own life and learning. What have been your most valuable learning experiences and how do you incorporate these into your life?
3. How do you view yourself and what do you value most about yourself? What are the challenges you might face in order to successfully complete your course of study? What are your goals, dreams and visions for the future, and what do you plan to do with the degree you seek from UNM?

### 9. Please Indicate which items are attached for consideration, and which items are being sent separately:

	<u>Attached</u>	<u>Separate</u>
Completed Application, signed and with form of payment indicated.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Official (being sent) <input type="checkbox"/> Unofficial Copies of Transcripts	<input type="checkbox"/>	<input type="checkbox"/>
Professional Certifications / Licenses / Diplomas / etc.	<input type="checkbox"/>	<input type="checkbox"/>
Professional Portfolio / Resumé / Vitae	<input type="checkbox"/>	<input type="checkbox"/>
One - Two (1-2) Page Essay	<input type="checkbox"/>	<input type="checkbox"/>
<u>“Wish List”</u> of Courses you would like in your curriculum	<input type="checkbox"/>	<input type="checkbox"/>

**10. Admissions Application Fee - Payment Information:**

**Preferred Payment Method:** \_\_\_\_\_ Please email an electronic invoice for payment through your secure online portal. Otherwise, please indicate by which method we may expect payment:

**Payment by Check or Money Order:** \_\_\_\_\_

Make payable to:

University of Natural Medicine, Inc.

**Mail Payment to:**

Bursar's Office

University of Natural Medicine

P.O. Box 1145, 150 Murray Street

Niwot, Colorado 80544

**Manual Payment by Credit Card:** \_\_\_\_\_

Name on Card: \_\_\_\_\_

cc# \_\_\_\_\_

exp. \_\_\_\_\_ cvc code: \_\_\_\_\_

**Bank Wiring Information Available upon Request**

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**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Thank you for submitting your admissions application to the University of Natural Medicine. We are a 501C-3 non-profit corporation in the state of New Mexico, USA. We do not discriminate on the basis of race, gender, religion, age, color, national origin, sexual orientation, political affiliation or physical impairment, for admissions or any other program or activity.*

*You will receive confirmation of our receipt of your application shortly.*