

Physical Therapist Assistant Petition Request Form

Applicant's Name:						
Currer	nt Phone:					
Currer	nt Address:	Address			State	Zip Code
Email	Address:			<u>-</u>		_,,
Read a	and check the f	following statements:				
	I have completed the Anatomy & Physiology course required. If courses were taken from other colleges, official transcripts have been submitted verifying completion of coursework.					
	•	eted 32 hours of observa nerapy Clinical Observation				Verification
	I have met th	e required HESI Entrance	e Scores.			
	I have read a	nd signed the PTA Techn	ical Functions	Form.		
		ibmitted all of the above to petition into the PTA		o Southwest W	/isconsin Technic	cal College
 Signat	ure				 ate	