



# Ontario College of Reflexology

## N101 Examination Application Form

E6A-0917

<u>Written Examination:</u>	<u>Practical Examination:</u>	<u>Video-Taped Review:</u>
<input type="checkbox"/> <b>Proctored Examination</b> Fill in the proctor's name and address below.	<input type="checkbox"/> <b>Video Recorded Practical Examination</b> I have completed and enclosed the required number of Health & Session records for my program: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> <b>Video Recorded Mid-term Practical Assessment</b> Mandatory to submit after 15 to 25 Reflexology Session records are completed.

<b>Student's Name:</b>	
Address:	
City:	
Prov./State:	
P.C./Zip	
Country	
Res. Tel.#:	
Bus. Tel #:	
Email:	
Student #:	

<b>*Proctor's Name:</b>	
Address:	
City:	
Prov./State:	
P.C./Zip	
Country	
Res. Tel.#:	
Bus. Tel #:	
Email:	
<b>For Proctored Written Exam ONLY - Attach proctor's business card if available.</b>	

\* Only authorized proctor as described at: [www.ocr.edu/exam.htm](http://www.ocr.edu/exam.htm)