

Withdrawal from the Occupational Therapy Assistant Program (OTA)

If you are withdrawing, the OTA program would like you to share why you are leaving the program.

Please select one or more of the descriptions below to choose your reason(s) for withdrawing from the OTA program.

<input type="checkbox"/> Job
<input type="checkbox"/> Military
<input type="checkbox"/> Financial
<input type="checkbox"/> Poor grades
<input type="checkbox"/> Occupational Therapy is not what I was expecting
<input type="checkbox"/> The program intensity was too much
<input type="checkbox"/> Medical/health
<input type="checkbox"/> Technology—computer skills required
<input type="checkbox"/> Distance Learning
<input type="checkbox"/> Fieldwork
<input type="checkbox"/> Background check

What semester are you currently in the OTA program?	<input type="checkbox"/> 1st	<input type="checkbox"/> 2nd	<input type="checkbox"/> 3rd	<input type="checkbox"/> 4th
I attended OTA orientation.	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
I viewed films on demand OT video.	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Prior to starting the program, I was oriented by OTA faculty.	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
I met with my advisor prior to dropping OTA courses.	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
I attended Study Skills for Health Sciences.	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
I participated in the OTA tutor program.	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

Comments:

Process for Using Form

1. Academic Advisors will use the form to gather information once an OTA student has dropped or withdrawn from the program. The form can be emailed to the student or completed via phone or interview.
2. The student's name should not appear on the document. Once information is received, return to Becky Mika, OTA Program Director, with 1 week.