



The Healing Arts and Massage School, LLC
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Reference Statement

This document serves as a letter of recommendation for prospective students completing an Enrollment Application. This form must be completed by a person **other than a family member or religious advisor**.

Name of Prospective Student _____

Name of Reference _____

Contact information of Reference Telephone: _____

Note to the person completing this form: The information you provide will be confidential and disclosed only to persons involved in the admission process. Please sign the form and return this form to the applicant in a *sealed envelope with your signature across the seal* to be submitted as part of the application and admission process.

What is your relationship with the Prospective Student? _____

How long have you known the Prospective Student? _____

What opportunities have you had to form an opinion of this person's character and to acceptable ethical standards? _____

Please state why you believe this person will be a valuable member of the massage & bodywork profession, which is a healthcare field. _____

If you have any concerns about this person, please explain. _____

Signature _____

Date _____