

**JOHN F. KENNEDY, JR. INSTITUTE
FOR WORKER EDUCATION
City University of New York**

APPLICATION FORM

**Introduction to Wellness Coaching
Certificate**

Spring 2010

Introduction to Wellness Coaching

**JOHN F. KENNEDY, JR. INSTITUTE
FOR WORKER EDUCATION
CITY UNIVERSITY OF NEW YORK**

**INTRODUCTION TO WELLNESS COACHING CERTIFICATE
APPLICATION FOR ADMISSION
SPRING 2010**

A COMPLETE APPLICATION MUST INCLUDE:

- Applicant Information Form
- Personal Statement
- Letter of Recommendation
- Copy of Highest Degree Earned or Official Transcript

APPLICATION DEADLINE: MARCH 29, 2010

COMPLETE APPLICATIONS MUST BE SUBMITTED TO:

***Abigail Nelson
JFK, Jr. Institute for worker Education
101 W. 31 Street, Floor 14***

***New York, NY 10001
Phone: (212)652-2053
Fax: (646)344-7319***

***INTRODUCTION TO WELLNESS COACHING CERTIFICATE
APPLICANT INFORMATION***

PLEASE TYPE OR PRINT IN INK

Date: _____

Last Name: _____

First Name: _____

Date of Birth: _____ Social Security #: _____

Permanent home address: _____ Apt #: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Gender: Male/ Female *(please circle selection)*

Ethnic Identity (optional): *(check all that apply)*

- ___ Black/African American (Non-Hispanic)
- ___ Hispanic/Latino
- ___ White/Caucasian (Non-Hispanic)
- ___ Native American or Alaskan Native
- ___ Asian/Pacific Islander
- ___ Other (please specify) _____

County of Residence: *(check one)*

Bronx ___ Kings (Brooklyn & Queens) ___ NYC (Manhattan) ___ Richmond
(S.I.) _____

Nassau ___ Suffolk ___ Westchester ___ Rockland ___ Other

EMPLOYMENT HISTORY

Employer Name: _____

Employer Address: _____

City: _____ State: _____ Zip Code: _____

Previous job Title: _____

Job Description:

Date of Employment: From: _____ To: _____

Month/Year

Month/Year

EMPLOYMENT HISTORY

Employer Name: _____

Employer Address: _____

City: _____ State: _____ Zip Code: _____

Previous job Title: _____

Job Description:

Date of Employment: From: _____ To: _____

Month/Year

Month/Year

EDUCATIONAL BACKGROUND

Do you have a High School Diploma? _____ If yes, year received? _____

Do you have a GED? _____ If yes, year received? _____

Please list in chronological order any training, colleges you attended or are currently attending:

Dates	College/Institution	Degree Granted (Or expected)	Academic Major	Total Credits Earned (if any)
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EDUCATIONAL GOALS

Would you like to continue your education beyond this certificate?

YES _____ NO _____

If YES, please describe:

PERSONAL STATEMENT

Please include with your application a *typed* document to provide us with other information that you believe will help us to know you better. This information should include, but is not limited to:

- Experience you have had with making a major positive lifestyle change.
- What does the recovery approach, as it applies to mental health, mean to you?
- Your understanding of wellness and coaching.

Please limit your response to no more than 500 words.

I certify that all information provided by me in this application is correct and accurate to the best of my knowledge.

Signature _____

Date _____

Introduction to Wellness Coaching Certificate

John F. Kennedy, Jr. Institute
For Worker Education
City University of New York

Recommendation Form

Part A: To be completed by applicant

Date: _____

Name of applicant: _____

Address: _____

Applicant signature: _____

To the Applicant: Complete the information above (please print or type) and give it to a non-family member who can objectively state your interest and ability to complete the coursework. He or she should place this form in a sealed envelope and return it to you, so that you can submit it with your application.

Part B: To be completed by recommender:

Name of person providing reference: _____

Employer: _____

Address: _____

Phone Number: _____

Email Address: _____

How long have you know the applicant? _____

To the Recommender: The above named individual is applying for admission to the *Introduction to Wellness Coaching Certificate* at the City University of New York (CUNY). Applicants are required to submit a letter of recommendation with their

application. This letter should state why the applicant would be a good wellness coach. Please address the following areas, if possible: maturity, organizational skills, interpersonal skills, knowledge of wellness concepts, ability to engage with others, and knowledge of community resources.

Thank you for taking the time to provide this information. We ask that you submit this Recommendation Form as well as the letter in a sealed envelope and sign across the envelope seal to ensure confidentiality. **The applicant must submit this letter of recommendation with his or her application.**