

NON-MATRICULANT PLAN

Name: _____ ID: _____ Start Term: _____

BACKGROUND

Please explain your interest in Traditional Chinese Medicine. Do you have personal experience with TCM? Have you taken any related courses? If so, where and when?

What is your goal in taking classes at the University of East-West Medicine?

STUDY PLAN

Please meet with the Academic Dean to complete this portion. Indicate which courses you are interested in, how long you expect to be a student at UEWM, etc.

I understand and agree to abide by the policies regarding non-matriculating students.

The student and I have met and developed a study Plan that meets the student's goal.

signature of student

date

signature of academic dean

date