

OCCUPATIONAL THERAPY PROGRAM

Shadowing Experience Guidelines

For admission to the Mount Mary University Occupational Therapy program, applicants are required to shadow an occupational therapist for a minimum of **4 hours**. Shadowing of more than one therapist in more than one setting is permissible. (Example: shadow an occupational therapist in a rehabilitation setting for 2 hours and then shadow an occupational therapist in a grade school for 2 hours). Shadowing must to be completed **within two years** prior to application. OTA's/COTA's are waived from this requirement.

Call the Director of Occupational Therapy of the facility and identify yourself as a student seeking admission to the Mount Mary University Occupational Therapy program. Let them know that shadowing of an occupational therapist is a requirement for admission to the Occupational Therapy program.

Required Verification of Shadowing Experience:

- 1. **Form A:** The therapist that you shadowed will comment on your punctuality, patient interaction, and professional inquiry. Ask the therapist to complete Form A and return it to you. You will then upload into OTCAS (MMU undergraduate students see below).
- 2. Form B: A one-page summary using Form B is to be completed by the applicant.

***If the shadowing experience is completed at two different locations to total four hours, then applicants must submit two separate shadowing forms of both Form A and Form B for *each* location.

Please upload the completed forms to OTCAS (https://otcas.liaisoncas.com). Current Mount Mary undergraduate students can contact the Office of Graduate Admissions at mmu-gradinfo@mtmary.edu or (414) 930-3049 for guidance on how to submit this form directly to the university.



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Shadowing Experience Verification – Form A

his is to verify that	shadowe	shadowed an	
(applicant's name)			
ccupational therapist at(facility n			
(facility n	ame and location)		
on(date/ dates)	for a total of	hours.	
(date/ dates)			
Summary Of Student's Experience And Professional	<u> I Behavior:</u> <u>Y</u>	<u>Yes</u> <u>No</u>	
Student was punctual in arrival			
Student had the opportunity to observe client treatme	nt		
Student asked questions about treatment observed			
Student acknowledged client(s) (e.g., greeted client)			
Student demonstrated professional inquiry as evidence	ced by asking		
therapist questions about career of OT			
Additional Comments:			
Therapist's name (printed):			
Theranist's signature:	Date:		

Thank you for completing this form!



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Applicant's Summary of Shadowing Experience – Form B

Name	: Date:
Facili	ty:
	of occupational therapist (OTR):
	e address the following statements below or on a separately attached sheet in 175-200 word nses each:
1.	Please summarize how this experience influenced your understanding of this profession as a 'good fit' for you personally.
2.	Reflect on your experience with an occupational therapist. Based on your expectation of what it would be like, describe something that was different than you expected it to be.
3.	Meaningful engagement is an important aspect of occupational therapy. Describe how the treatment, interactions, or results of the therapy appeared meaningful to a client.