

INSTRUCTIONS

Applicants to the Bachelor of Science in Occupational Therapy Assistant program are required to complete a total of **12 hours** of observation under the supervision of an occupational therapist (OT) or a certified occupational therapy assistant (OTA). The purpose of the observations is to help students learn about the profession of occupational therapy so they can make an informed decision when selecting a career that meets their expectations and needs.

As part of the required application documents, students need to submit through the **OTACAS application**, the completed **Observation Hours Verification Form** (Part I & II). If you do not complete all the required hours at one location, you will need to complete separate forms for each setting or facility. It is not required but it is strongly recommended to observe OT services in at least two different facilities.

You may complete observation hours in any facility offering occupational therapy services by licensed practitioners. The following list contains samples of typical places offering OT services:

- a) Hospitals (e.g. Acute Care, Rehabilitation, Mental Health)
- b) Pediatric outpatient clinics
- c) Nursing Homes
- d) Rehabilitation Clinics
- e) Schools System
- f) Orthopedic Clinics
- g) Sports Clinics
- h) Mental Health Clinics
- i) Private Practice Clinics
- j) Correctional Facilities
- k) National nonprofit facilities (e.g. The Arc, Easter Seals, United Cerebral Palsy)

Note: Telehealth sessions are accepted but students still need to obtain the supervisor's signature on Part I.

Scheduling Observation Hours

Students are responsible to call the site(s) and set up an appointment to meet with the designated practitioner in the OT facility, or the designated person coordinating volunteers, to ensure feasibility of observation at that setting. Students should comply with the facility rules and regulations concerning dress code, behavior, and confidentiality.

Upon completion of the observation hours, ask the supervisor to review your responses to all the questions under Part II. Ensure that all the sections are completed and signed. The completed document must be saved on **PDF** and submitted through **OTACAS application** by the designated application deadline.



**Bachelor of Science in Occupational Therapy Assistant (BSOTA)
Minor in Health Services Administration
OBSERVATION HOURS VERIFICATION FORM**

BSOTA applicants are required to complete a **minimum of 24 hours** of observation in a clinical setting offering occupational therapy services and document the experiences on this form, as well as provide the answers to the ten questions posted here. **Once completed, this form is to be submitted on a PDF file along with the program application documents, by the designated timeline.**

PART I: Profile & Verification of Observation Hours

STUDENT INFORMATION (To be completed by the student):

Name:

Address:

City:

State:

Zip:

FACILITY INFORMATION (To be completed by the student):

Name of Facility:

Address:

City:

State:

Zip:

Type of Setting:

VERIFICATION BY THERAPIST (To be completed by an OT or OTA):

Observation Date/s:

Hours Completed:

OT/OTA Name (Print):

OT/OTA License #:

OT/OTA Contact #:

OT/OTA Signature:

Comments (Optional):

Observation hours may be waived if the applicant has experience as a Rehab Tech or Allied Health clinician. In order to waive the observation hours, the applicant must provide the following document(s) **along with the program application**:

1. A **PDF copy of an official letter** (written on the company's letterhead) from an occupational therapy practitioner certifying that the applicant worked closely with the occupational therapy department, and describing the role and type of experiences to which the applicant was exposed at the site.
2. Or **PDF copies of professional credentials** (submit copies along with the program application).

PART II: Practice Related Questions

Student's Name:

Answer the following questions for each site/observation setting. Type your responses below each question and sign the form. Submit completed form on PDF format with program application:

1. In your own words, explain what occupational therapy is.

Response:

Response:

2. Describe the main responsibilities of the occupational therapist (OT).

3. Describe the main responsibilities of the occupational therapy assistant (OTA).

Response:

4. Identify at least 4 areas/settings of practice for the OTA.

Response:

5. List the referral sources for OT services.

Response:

6. What diagnoses and condition are typically seen in an OT clinic? Describe at least 3.

Response:

7. Describe the therapeutic equipment used by the OT/OTA at the facility.

Response:

8. Explain the payment /reimbursement sources for OT services.

Response:

9. Describe the role of the interdisciplinary team and list the professionals typically comprising this team.

Response:

10. Explain the current ethical dilemmas impacting delivery of OT services.

Response:

I attest that I have observed occupational therapy services and am thoughtfully making the decision to pursue a career as an occupational therapy assistant with a clear understanding of the job opportunities and expectations. I feel pursuing this career path aligns with my professional goals and skill set and I submit this application willingly and purposefully.

Student Signature

Date