



Application to Offer a Basic Massage Therapy Educational Program
In Excess of 500 Hours (Non-Accredited School)
Application Checklist

This application is only for currently licensed, non-accredited massage schools in Texas with an existing, approved 500 hour program. Submit a separate application packet for EACH longer program for which you are requesting approval.

Do not submit fees with this application. There is no fee for this approval.

Submit the following items:

- _____ Application Page (page 1 of this application)
- _____ Statement of Assurance (page 2 of this application)
- _____ Educational Goals (see pages 3-4 of this application for format)
- _____ Description of Progress Standards (page 5 of this application)
- _____ Affidavit (page 6 of this application)
- _____ Sample of completed Student Notification Form you intend to use
- _____ Sample Student Enrollment Agreement
- _____ Draft Catalog
- _____ Proposed Schedule(s) for this Program (include all schedules/hours)
- _____ Sample Transcript (include the number of hours in each subject on the sample)
- _____ Any other additions or changes to materials submitted for your previously approved 500 hour course which are required by this program (e.g. additional instructors, policies, handbooks, etc.)

All application materials should be mailed to our new mailing address:

Massage Therapy Licensing Program
Texas Department of State Health Services
Mail Code 1982
P.O. Box 149347
Austin Texas 78714-9347

Application materials may also be faxed to: 512-834-6677 attn: Massage Therapy Licensing Program or sent by e-mail to: massage@dshs.state.tx.us

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Application Page

Type or print legibly. Incomplete applications will not be evaluated. Use N/A for "not applicable".

Name of Licensed Massage School

License # MS _____

Authorized Contact Person for this Application: _____

Contact's Phone: _____ Contact's E-Mail: _____

Name of Program in Excess of 500 Hours (name you will use to advertise/promote this program)

Total Number of Classroom Hours (not to exceed 880) _____

Total Number of Internship Hours (not to exceed 120) _____

Total Cost of this Program \$ _____

Language(s) in which you intend to offer the program:

English Spanish Both English and Spanish

Date you first intend to begin enrolling students if this program is approved _____

Date you first intend to begin instruction if this program is approved _____

List any prerequisites for enrollment in this program:

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Statements of Assurance

Initials

Statement

- _____ I have read, understood, and agree to comply with all laws and rules relating to the regulation of massage therapy in Texas, including 25 Texas Administrative Code §140 Division 5 Massage Schools and Massage Therapy Instructors (effective 1/1/09).
- _____ I have already received a previous approval letter for my 500 hour program, or my school was first licensed after 9/1/07 to provide only the 500 hour program.
- _____ All potential students will be required to sign the Student Notification Form prior to enrollment in this program.
- _____ All potential students will be offered the opportunity to enroll in a concurrent minimum 500 hour program.
- _____ I am not currently advertising, promoting, or operating this program.
- _____ I will not advertise, promote, or operate this program until this application is approved.
- _____ Once this program is approved, I will not implement any changes to this program prior to receiving approval from DSHS.
- _____ This program will be conducted only in space at my licensed location (main campus and/or additional locations) which has already been inspected and approved by DSHS.
- _____ I have attached all the documents required for this application.
- _____ All documents attached are complete, correct, and include a current revision date.
- _____ Once this program is approved, I will place the updated, approved materials in my binder/file so they can be reviewed at my next unannounced inspection.

Initial each blank on this form. Each owner must initial the form.
Do not simply mark an "X" or a check mark.

Application to Offer a Basic Massage Therapy Educational Program
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Educational Goals - Classroom

For each classroom subject you will teach in excess of 450 hours:

- attach a document (see SAMPLE below) listing title and the number of hours in that subject and your educational goals, including a description, a list of any additional instructional materials, equipment, and/or books that will be required, which instructor(s) will provide the additional instruction, and how you will assess the student. Include whether or not the student will receive a progress evaluation during this class, based on your proposed schedule.

SAMPLE

Subject: Swedish III - Longer Massages

Number of hours: 25 classroom hours

Additional materials/equipment/instructors: No additional materials or instructors will be required.

Description: This class will focus on providing longer massages, including techniques for 1.5- 2 hour massages, body mechanics, self-care, and contraindications. Business considerations concerning the promotion, scheduling and advantages/disadvantages of offering longer massages will also be covered. In addition to classroom instruction, students will provide and receive at least two 1.5 hour and two 2 hour massages on classmates.

Educational goal: Students will be able to design and complete a longer Swedish massage session. Students will identify whether or not this is a service they will include in their business plan once licensed.

Assessment: Students will be assessed through feedback forms completed by other students and a two page response paper on the subject.

Progress evaluation: Yes

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Educational Goals - Internship

For internship hours in excess of 50 hours:

- attach a document (see SAMPLE below) listing the number of hours in each subject and your educational goals, including a description, a list of any additional materials, equipment or facilities that will be required, in which subject the student received classroom instruction to prepare for this portion of the internship, and how you will assess the student.

SAMPLE

Subject: Swedish - Longer Massages

Number of hours: 30 internship hours

Additional materials/equipment/facilities: No additional materials or equipment will be required. Clinic schedule and student assessment form modified to allow for longer blocks of time. Advertising modified to inform clients that longer massages are available.

Description: Student will complete a total of 30 hours of longer Swedish massages on clients, including at least five 1.5 hour and five 2 hour massages.

Educational goal: Student will successfully design and complete longer massages to clients' satisfaction.

Subject: Students will have successfully completed Swedish III - Longer Massages prior to this portion of the internship.

Assessment: Students will be assessed through a written self-assessment after the first longer massage and on an ongoing through basis feedback forms completed by clients.

Progress evaluation: No

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Progress Standards

1. Describe how and when you intend to evaluate student progress throughout this program:

_____ Program will use quarterly student progress evaluations (the minimum required by rule)

Number of days/weeks in each grading period _____

OR

_____ Program will use more than four student progress evaluations

How many? _____

Number of days/weeks in each grading period (attach schedule if number varies) _____

2. Describe student progress for a student who decides to withdraw from the course

At what point in the course of this program will a student have completed the minimum
500 hours required for licensure? _____

How many progress evaluations will the student have completed at that point in the course?

If the student withdraws at that point in the program, what is the total amount the student will
need to have paid to the school to receive a partial transcript? _____

3. If you plan to offer more than 50 hours of internship, explain how you will determine when a student requires a student progress evaluation. If you have not applied for approval of more than 50 hours, put "N/A".

AFFIDAVIT

The individuals named below duly sworn, depose and say that the information in this application and accompanying information is true and correct to the best of their knowledge and belief. Further, the training program will be operated in compliance with all legal requirements. Any deficiencies will be corrected and changes in the operation will not be made until written approval from the Texas Department of State Health Services is received.

Signature of each individual owner, or each partner, (if a partnership), or each director (if a corporation) is required. If applicant is another type of business entity, the Texas Department of State Health Services shall identify signatures needed.

(Signature)

(Typed Name and Title)

(Signature)

(Typed Name and Title)

(Signature)

(Typed Name and Title)

(Signature)

(Typed Name and Title)

(Signature)

(Typed Name and Title)

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____,
20____.

STATE OF _____ COUNTY OF _____, WHERE WITNESSED.

MY COMMISSION EXPIRES _____.

(Notary Seal)

SIGNATURE OF NOTARY

Important Considerations for Schools Offering Longer Programs

You do not need to submit the answers to these questions to the department – they are intended as technical assistance and are solely for your own information and consideration.

- Would this content be better suited to advanced course work?
- Can I be sure that all my new students will be ready for the complexity or depth of the material I want to offer?
- Will I need to increase my admission requirements for this longer program?
- Do I need to hire additional instructors or provide additional training to my existing instructors for my new content?
- Will I assess my instructors annually and document that assessment in the same way I do my current instructors, or will I need to change my assessment forms?
- Will I need more licensed instructors to supervise longer internships?
- How much will the additional classroom or internship hours impact my use of space?*
- Will I need more classrooms?
- Will I need more space for internship massages?
- For many schools, running a longer program will increase the financial impact of each student who withdraws or is dropped. What is the minimum number of students I will need to enroll in order to offer a longer program?
- How many students can be in a 500 hour program and how many can be enrolled in a longer program for the program to be viable?
- Will I need to increase my student-teacher ratio?
- Do I need to adopt additional progress standards, policies or assessments?
- What will I do if I am uncomfortable with the skills of one of my students who is enrolled in a longer internship program and I don't want to allow him/her to continue to provide massage therapy at my school after the minimum 50 internship hours are complete?
- Will I need a separate materials/make-up fee to re-teach specific hands-on modalities if a student fails?
- How will my advertising need to change if I offer additional modalities in longer internships?
- How will I ensure that sufficient numbers of appropriate clients are available for students in longer internships?
- Will I need to extend my hours of operation?
- Under what conditions will I accept transfer students?
- Will I accept transfer students who only need classroom hours and have already completed at least 50 hours of internship at another school?
- How much will I charge these students?
- Will I offer the additional 200 hours required for national certification to licensed therapists who have only completed 300 hours of training?
- If yes, will I do so by enrolling them as transfer students in a minimum 500 hour program, or will I offer the additional 200 hours only as advanced course work?

* Note: All space used for instruction must be inspected and approved by DSHS prior to use. If you need to move your school, or to expand into additional space at your existing location in order to offer a longer program, you must first submit the Massage Therapy School Additional/Main Location Application and applicable fee; DSHS must conduct an inspection; and you must receive approval for the new space.