



**Massage Therapy Program
Application Packet
2025-2026**

MASSAGE THERAPY PROGRAM APPLICATION PACKET

PROGRAM DESCRIPTION

This program offers a sequence of courses that provides coherent and rigorous content aligned with challenging academic standards and relevant technical knowledge and skills needed to prepare for further education and careers in the Health Science career cluster; provides technical skill proficiency, and includes competency-based applied learning that contributes to the academic knowledge, higher-order reasoning and problem-solving skills, work attitudes, general employability skills, technical skills, and occupation-specific skills, and knowledge of all aspects of Health Science career cluster.

The program is designed to prepare students for employment as Florida licensed massage therapists, all other service workers.

The content includes but is not limited to the theory and practice of massage, theory and practice of hydrotherapy, hygiene, practice demonstration, human anatomy and physiology, legal aspects of massage practice, allied modalities, leadership and human relations skills, health and safety, CPR, and employability skills. Colonic irrigation is optional post initial licensure.

PROGRAM OFFERINGS

Fall Program: 8/11/25 - 5/22/26 * Program hours are subject to change to shorten the total hours.

PROGRAM LENGTH

The program consists of 750 clock hours.

* Program hours are subject to change to shorten the total hours.

PROGRAM HOURS

Days: Monday – Thursday 9:30 a.m. – 4:00 p.m.

Clinical hours may vary.

PROGRAM LOCATION

Lively Technical College (LTC)

Main Campus:

500 Appleyard Drive

Tallahassee, Florida 32304

The Leon County School District does not discriminate against any person on the basis of sex (including transgender status, gender nonconforming, and gender identity), marital status, sexual orientation, race, religion, ethnicity, national origin, age, color, pregnancy, disability, military status, or genetic information.

HEALTH EDUCATION APPLICATION COVER SHEET/CHECKLIST

Name: _____

Phone: _____ Email: _____

Program: _____ ☐ Day ☐ Night Program Date: _____

STEP 1. REGISTER FOR LIVELY TECHNICAL COLLEGE

☐ COMPLETE THE LTC STUDENT ONLINE APPLICATION

Apply at www.livelytech.com

☐ MEET WITH STUDENT SERVICES ADVISOR

Must bring:

- Two proofs of Florida Residency
- Official transcripts for High School/College/GED (For copy of GED go to www.myged.com)

☐ SKILLS ASSESSMENT TEST OFFICIAL RESULTS (if needed)

☐ MEET WITH FINANCIAL AID

Financial Aid is available based on eligibility.

☐ REGISTRATION

Once you receive your Health Education acceptance email, go to Registration to finalize your payment and schedule.

☐ Completed required enrollment process to LTC with Student Services. Advisor Initials: _____

STEP 2. COMPLETE THE PROGRAM APPLICATION PACKET

☐ HEALTH EDUCATION STUDENT INFORMATION SHEET

☐ THREE CURRENT REFERENCE LETTERS:

- ☐ Two professional references (recent employers, former teachers, counselors, etc.)
- ☐ One personal reference (may not be family member)

☐ RECEIPT OF PAYMENT FOR A LEVEL 2 CRIMINAL BACKGROUND TO LEON COUNTY SCHOOLS

☐ WRITING SAMPLE

☐ BASIC LIFE SUPPORT CERTIFICATION (OPTIONAL)

LATE OR INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

OFFICE USE ONLY:

☐ BACKGROUND RESULTS ☐ APPROVE/ACCEPTANCE LETTER

☐ ORIENTATION

GENERAL REQUIREMENTS

Applicants seeking admission to the Massage Therapy Program must:

- Be at least 18 years of age.
- Have a high school diploma or equivalent.
- Pass random drug screenings throughout the program. Students with positive drug screen results will be withdrawn from the program.

To apply for acceptance into the Massage Therapy Program students must:

- **STEP 1 - COMPLETE THE LTC STUDENT ONLINE APPLICATION.** (This application is required for all LTC students) This application can be completed at: www.livelytech.com
- **STEP 2 - MEET WITH STUDENT SERVICES ADVISOR-** Student Services will review your online enrollment information. You will need to provide:
 - Two proofs of Florida Residency
 - Official Transcripts for High School and College (if applicable). For copy of your GED transcript go to www.myged.com
 - Academic Skills Test official results or exemption (see below for more information).
- **STEP 3 - MEET WITH FINANCIAL AID** – Meet with Financial Aid. They will check for all needed financial aid documents (ISIR, verification letter, etc.) Bring proof of any additional grants, scholarships, or waivers in order to receive your deferment. (If you are self-pay, you may skip this step.). Federal Pell Grant information is at www.studentaid.gov. School code: 013997

COMPLETE THE MT APPLICATION PACKET

The Massage Therapy Application Packet must include:

- **Health Education Student Information Sheet.** A printed copy must be submitted with the application packet.
- **Writing Sample**

- **Three current reference letters:**
 - Two professional references (recent employers, former teachers, counselors, etc.)
 - One personal reference (may not be family member)
- **Receipt of payment for a Level 2 criminal background to Leon County Schools.** This must be completed prior to submitting the application, at the student's expense*. In order to participate in the mandatory student clinic, as well as to obtain licensure, students must have a clear background.
- **Vaccination Acknowledgment**

***No refunds will be issued.**

**LATE OR INCOMPLETE APPLICATIONS
WILL NOT BE ACCEPTED.**

TESTING INFORMATION – REQUIRED TESTS & SCORE

Academic Skills Test (Academic Skills)

State Board Rule 6A-10.040, FAC states the following: “Students who are enrolled in a postsecondary vocational certificate program shall complete a basic skills examination.”

LTC admission policies require that all students that enroll in Workforce Education Certificate Programs of 450 hours or more must take the Academic Skills assessment test or provide proof of acceptable forms of exemption from testing.

You may be exempt from the Academic Skills test if you:

- Possess a college degree at the associate in applied science level or higher.
- Demonstrate readiness for public postsecondary education pursuant to F.S. 1008.30 (See acceptable exemptions list in Student Services)
- Earned a standard Florida public high school

diploma (Student entered 9th grade in the 2003-2004 school year or any year thereafter) or earned a GED in 2014 or any year thereafter.

- Student serves as an active duty member of any branch of the United States Armed Services
- Passed a state or national industry certification or licensure examination identified in State Board of Education rules and aligned to the career education program, which they enroll.
- Proof of exemption status is required. Please see an advisor for further details in Student Services.

You must be in the Testing area by 9:00 am to start the test, Monday – Thursday by appointment only. For more information, please contact The Testing Center: 850-487-7410

The academic skills test passing score for the MT Program is a 10 in Reading and a 9 in Math. These scores are valid for two (2) years.

If you do not meet your exit scores, you will need to enroll in AAEE at a cost of \$30 per semester. The AAEE instructor evaluates your test scores and an individualized learning plan will be designed based on your Academic Skills results. Students work individually, at their own pace, and seek the assistance of an instructor when needed.

There is a \$25.00 fee for this exam. Applicants must go to the Registration window in Building 8 to pay for the exam then report to the Testing Center.

For more information, please contact The Testing Center: 850-487-7410

Regular Hours of Operation: Monday-Friday, 8:00 am-4:00 pm

HEALTH REQUIREMENTS

Applicants are not required to complete a Student Health Assessment Record.

CRIMINAL BACKGROUND CHECK

All applicants must undergo a Level 2 criminal background through Leon County Schools. In order to participate in the mandatory clinical practicum, as well as to obtain licensure, students must have a clear background. The cost is \$61.00.

DRUG SCREENING

Drug screening is not required prior to admission into the program. However, all students must submit to and pass three random drug screenings after entering the Massage Therapy program and prior to having access to the clinical health care facilities utilized in the Program. This is a Joint Commission on Accreditation of Healthcare Organizations (JCAHO) requirement demanded of all acute care facilities in Florida. Students who do not pass a random drug screening will be withdrawn from the program.

DISABILITY SUPPORT SERVICE

If you have question regarding adult students with disabilities and accommodations, please contact LTC Student Services located in Building 9 or at 850-487-7473.

FINANCIAL AID

Financial Aid is available for this program based on eligibility. Qualifying students may be awarded a Federal Pell Grant based on their current FAFSA submission provided through the Federal Student Aid, U.S Department of Education. LTC does not provide loans. Third party loans and other personal financial arrangements are a personal decision of the student and not handled at LTC. Additionally, LTC accepts other funding options (Florida Prepaid, CareerSource, VA, etc.). The Financial Aid Office is located in Building 8, phone number 850-487-7431 or 850-487-7421 and/or via email at LTCFinAid@leonschools.net. Please direct all financial aid questions directly to their office.

ACCEPTANCE INTO PROGRAM / REGISTRATION

LTC accepts applicants into all Health Education programs on a rolling admission basis. As we receive applications, potential students are scheduled for an interview with the Health Education Program Director or their assignee. Once an applicant has completed the interview, they will be notified of their admission status. Accepted applicants will be given an

acceptance letter, which will allow them to register for the program they have applied to. LTC Health Education programs may be closed prior to the posted application deadline date once that program has reached capacity. Questions regarding the application process should be directed to Ms. Dana Dreyer at dana.dreyer@leonschools.net.

ORIENTATION

After being accepted into the LTC Massage Therapy Program, applicants will be notified about attending a mandatory orientation. The date(s) and time(s) of this meeting will be given to all accepted students within their acceptance letter. For further information, please contact Ms. Dana Dreyer at dana.dreyer@leonschools.net.

UNIFORMS

Upon acceptance students are expected to wear the specified program uniform whenever they are in the classroom, clinical simulation or clinical facility. Uniforms may be purchased in the LTC Bookstore in Building 8. Questions regarding proper attire and uniforms should be directed to Ms. Dana Dreyer at dana.dreyer@leonschools.net.

LATE AND/OR INCOMPLETE PACKETS WILL NOT BE CONSIDERED.

Lively Health Education Student Information Sheet PERSONAL INFORMATION



Date _____

Last Name _____ First Name _____ MI _____

Address _____ City/State _____ Zip _____

Home # _____ Work # _____ Cell # _____

Email Address _____ Date of Birth _____

Emergency Contact _____ Phone# _____

Health Education Program applying for:

- | | | | |
|---|--|--|--|
| ☐ Central Sterile Processing | ☐ Massage Therapy | ☐ Medical Assisting | ☐ Nursing Assistant |
| ☐ Patient Care Technician | ☐ Phlebotomy | ☐ Practical Nursing | |

EDUCATION

High School _____ City/State _____

Highest grade completed _____ Year: _____ Choose one: ☐ High School Diploma ☐ GED

Previous Nursing School _____ City/State _____

College _____ Degree Awarded _____ City/State _____

Military _____

Have you attended any previous HED programs whether you completed or not?

- | | | | |
|---|--|--|--|
| ☐ Central Sterile Processing | ☐ Massage Therapy | ☐ Medical Assisting | ☐ Nursing Assistant |
| ☐ Patient Care Technician | ☐ Phlebotomy | ☐ Practical Nursing | |
- ☐ LTC ☐ Name of Institution if other than LTC: _____

Program Attended _____ Date Attended _____

Certification Awarded ☐ Yes ☐ No Date the Certificate Awarded _____
Proof required at time of application.

EMPLOYMENT RECORD

Present _____ Title/Position _____

Dates of Employment: From _____ to _____

Previous _____ Title/Position _____

Dates of Employment: From _____ to _____

Previous _____ Title/Position _____

Dates of Employment: From _____ to _____

The information on this application is true and factual.

Signature: _____ Date: _____

WRITING SAMPLE

PLEASE ANSWER THE FOLLOWING QUESTIONS:

Why have you chosen to pursue Massage Therapy as a career?

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

As a Massage Therapist, what qualities do you believe you possess that will enable you to perform effectively as a student and later as a Massage Therapist?

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Because this program is so rigorous, tell us about the support plan you have in place to successfully complete this program?



LEVEL 2 BACKGROUND SCREENING INSTRUCTIONS

Level 2 screening standards (Fingerprints) return criminal history results on arrests (including juvenile) nationwide. Under Florida Statute 1012, persons with specified access require level 2 screening. Offences outlined in Florida State Statute 435.04 (crimes of moral turpitude) can be disqualifying when persons have been found guilty of or entered a plea of nolo contendere (no contest).

Instructions:

1. Go to the Fingerprinting Office at the Leon County Schools District main office, located at **2757 W. Pensacola St., Building I** (to the right of the main district office). The hours for the Fingerprinting Office are: Monday-Friday, 8:00 am-5:00 pm - **Take this form with you.**
2. Submit payment for screening. Payment can be via credit card or money order.
3. **Obtain a receipt for the screening.**

Submit the receipt of the background screening along with the Health Education program application.

If your background screening does not come back "clear," you will be notified.

Additional information may be required.

LEVEL 2 BACKGROUND SCREENING REQUEST FORM

The following individual needs to obtain a Level 2 Background Screening, per Florida Statute 1012:

IMPORTANT:

The **ORI** number for the screening is **V37020031**

PLEASE PRINT

LAST NAME: _____

FIRST NAME: _____

DATE OF BIRTH: _____

SOCIAL SECURITY NUMBER: _____

DRIVER LICENSE NUMBER: _____

PHONE: _____

The above individual will be at Lively Technical College/Externship/
Clinical Site for the following purpose:

___ Student

Entity/Individual from Lively Technical College making this request:
Lively Administration

Please submit print results to:

ATTENTION:

BJ Van Camp, CTE Director
Lively Technical College
500 North Appleyard Drive,
Tallahassee, Florida 32304
Fax: 850.487.7478



850-487-7555

www.livelytech.com

Main Campus:

500 North Appleyard Drive
Tallahassee, FL 32304

Airport Location:

3290 Capital Circle SW,
Tallahassee, Florida 32310

East Campus

283 Trojan Trail
Tallahassee, FL 32311