



Canadian College of **MASSAGE** and Hydrotherapy

# REFERENCE REQUEST FORM

## TO THE REFEREE:

Thank you for providing this reference. This will be used, along with other admissions documents provided by the student, to help us determine whether the applicant is suited for our Massage & Hydrotherapy program. Your letter is important in helping us to ensure those entering our program have the character and abilities required to be a health care professional. We appreciate honest and forthright references. Upon receiving your reference, the Admissions Department may contact you to verify or clarify information. To be a referee, you should have known the applicant for a minimum of 1 year and in a professional capacity. Once you have completed your letter please email to: [info@collegeofmassage.com](mailto:info@collegeofmassage.com) (Cambridge Campus) or [admissionsto@collegeofmassage.com](mailto:admissionsto@collegeofmassage.com) (Toronto Campus), or mail to:

### **Cambridge Campus**

CCMH  
Attn: Admissions  
405 Maple Grove Rd, Unit 4  
Cambridge, ON N3E 1B6  
Fax 519.650.5507

### **Toronto Campus**

CCMH  
Attn: Admissions  
250 Davisville Ave, Suite 225  
Toronto, ON M4S 1H2  
Fax 416.736.9382

## Instructions:

**Please make sure to include the following information in your letter of reference.**

- Your name
- Signed and dated
- Your email address
- Your phone number
- Relationship to the applicant
- How long you have known the applicant
- Speak to the applicant's character
- If you would recommend them to be a health care practitioner and why