

JCC Therapeutic Massage
Moral Character Reference

The state of North Carolina requires that all applicants for licensure have a Criminal Background Check and licensure is dependent on the information provided to the board from that Background Check. (Rules and Regulations of the NC BMBT, .0206 BACKGROUND INVESTIGATION REQUIRED FOR APPLICANT)

JCC requires 2 Moral Character references from program applicants. Relatives may not complete this form.

Name of Applicant: _____

Name of person completing this reference: _____

Relationship to Applicant: _____

Do you believe that the applicant above has the good moral character required to practice Therapeutic Massage? Yes ___ No ___

If No please explain:

I hereby certify that the information given above is from personal knowledge and I believe it to be correct.

NAME OF PERSON COMPLETING FORM _____

HOME OR MOBILE TELEPHONE _____

MAILING ADDRESS _____

Signature of Person Completing Form _____

Date _____

After completing this form, you may email the completed form to klhurt@johnstoncc.edu or jcchealthprograms@johnstoncc.edu you may also seal in an envelope with the applicant's name on the back and return by hand or USPS mail to:

K. Lynn Hurt, Program Director
PO Box 2350; Smithfield, NC 27524
JCC Main Campus, Health Building, Room F123A