



1625 N. Market Blvd., Suite N-219
Sacramento, CA 95834
P 916.515.5200 F 916.928.2204
www.acupuncture.ca.gov



Annual Reporting Form for Approved Schools

Please complete the information below:

Name of School Web Site Address

Address

City State Zip Code

Owner's Name ()
Phone No.

School's Contact Person's Name Title ()
Phone Number

Contact Person-E-mail address

Date of Report Fiscal Year-Reporting Period

Please submit the following information to the Acupuncture Board within sixty (60) days after the close of the school's fiscal year:

1. A copy of the current course catalog.
2. Any courses added/deleted or significantly changed from the previous year's curriculum
3. Any changes in faculty, administration, or governing body
4. A list of all instructors who supervise students' clinical training – please include instructors' license numbers