Laboratory Student Programs APPLICATION FOR ADMISSION

Please Type or Print in Ink or submit electronically

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is highly recommended that you have visited clinical laboratories before submitting your application. Please	First Name Relationship	Last Name	
	City State Zip	Street	
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Person <u>most</u> helpful in your selection of Laboratory Science as a career:	<u> </u>		
High School Counselor College Advisor Laboratory Faculty/Staff Other	a career:	your selection of Laboratory Science a	Person <u>most</u> helpful in

Yes

No

Do you have legal authorization to be a student in the United States?

ACADEMIC SUMMARY

List in reverse chronological order **ALL** colleges, universities, professional, technical, or business schools attended. Transcripts from each institution listed must be submitted as part of your application.

			Attendance		Credits	GPA	Degree	Date Received
Name of	Location	From	To	Earned		or	or Expected	
Institution	(City, State))	Mo/Yr	Mo/Yr			Certificate	Mo/Yr
If your education has been in	terrupted, list your a	ictivities d	during the	interven	ing period.			
	V	VORK I	EXPERI	ENCE				
List in reverse chronological					lunteer exp	erience	if applicable	
Name of Employer/Agency/ In	stitution	D-4-		Hours/Week		D (* 10		9. 9144
City, State and Phone Number Name of Supervisor		Dates Employ		(Part-time Full-time)		Duties and Responsibilities		isibilities
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List extra-curricular interests	$oldsymbol{RA-CURRICULA}{}^{oldsymbol{CURRICULA}}$	XK 11111						
give number of years of participation in each.				List honors, awards (e.g. scholarships). Specify high school (HS) or college (C).				
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PERSONAL NARRATIVE

Please provide a narrative describing your interest in the selected area of study. Type your response on a separate sheet of paper. Limit your narative to one page. Please discuss the following:

- Why you are choosing this career.
- Your personal characteristics that support your selection for this program.
- Your future academic and professional goals.
- **Optional:** Use the space remaining to provide additional information, not found elsewhere in this application, that you believe would be important for us to know. This is optional and intended only to give each candidate full opportunity for self-expression.

REFERENCES

List the three people who are submitting references for you. One reference must be one of your campus advisors; one must be a university chemistry or biology instructor; the other may be a person of your choosing. Please inform your references of the application deadline and provide them with the address(es) of the laboratory(s) to which you are applying.

Name	Position/Title	Institution/Busines	SS
City	State	Zip	Phone Number
Name	Position/Title	Institution/Busines	ss
City	State	Zip	Phone Number
Name	Position/Title	Institution/Busines	ss
City	State	Zip	Phone Number
VERIFICATION O	F AUTHENTICITY ANI	RELEASE OF IN	FORMATION
My answers to the questions in this application. A copy or facsimile of this valid as the original in granting permission.	these materials will be consider to all of my previous employ erences for this application, to s application, references, and/o	ered grounds for dismi- ers and work supervisor release information ne or other supporting doo	ssal from the program, should I ors listed in the application and eded to verify any aspect of my
Printed Name			
Signed		Г	Date

TECHNICAL STANDARDS

Technical Standards represent the essential non-academic requirements of the program that all students must master to successfully participate in the program and become employable. All students and, thereby, all applicants are expected to:

- * Possess sufficient vision to easily read charts, graphs, instrument panels and printouts.
- * Be able to discriminate colors in order to identify reagents, media, stained cell preparations and physical properties of various body fluids, as well as delineate fine details of cellular structure and morphology when using a microscope.
- * Be able to read, write and communicate in the English language to facilitate effective communication with patients, physicians and all other members of the health care team.
- * Possess enough hearing ability with or without auditory aids to understand the normal speaking voice and discern audible instrument alert signals and timing devices.
- * Demonstrate sufficient manual dexterity to perform such required tasks as: performing phlebotomy safely and accurately; operating delicate instruments; manipulating tools; handling small containers of potentially biohazardous specimens (one by one-half inch); utilizing sample measuring devices; adequately focusing and manipulating a microscope.
- * Be sufficiently mobile to traverse about the Laboratory and Hospital corridors, including patient rooms (minimum width: 3 feet).
- * Demonstrate sufficient psychological stability to effectively problem solve and to react effectively in stressful situations. Must be able to recognize emergency situations and take appropriate action. In general, the student must possess the emotional health required for full utilization of his or her intellectual abilities.
- * Corrective devices and reasonable accommodations may be utilized to satisfy Technical Standards.

I have read the above Technical Standards and fully understand them. Any questions that I have concerning them and how they apply to me have been answered by program representatives to my satisfaction. It is my belief that I can satisfy each of the above Technical Standards based on my existing skills and abilities, or through the use of corrective devices.

Name of Applicant (print)		_
Signature of Applicant	Date	