



RADIOLOGIC TECHNOLOGY PROGRAM APPLICATION 2016

APPLICATION DEADLINE - MARCH 25, 2016 at 12 NOON

Legibly Print or Type All Information

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

NOTE: A resume or curriculum vitae may NOT be substituted for completing this application.

NAME: _____

LAST	FIRST	MIDDLE INITIAL
Social Security Number or	—	—
SMCCCD G-Number	—	—

HOME **STREET**
ADDRESS

CITY **STATE** **ZIP CODE**

E-MAIL ADDRESS

Please print legibly

CIRCLE ONE

Have you previously applied to the Canada College Radiologic Technology Program? If, YES, what year(s)

NO

YES

Are you a veteran? NO YES

Have you read all the information on the program website
(www.canadacollege.edu/radtech/requirements.html) **NO** **YES**

EDUCATION: include high school, all colleges, vocational and technical schools.

BASIC PREPARATION		NO	YES	DATE COMPLETED	GRADE
A.	Are you a high school graduate or equivalent?				
B.	Have you completed English 100 or English 1A (Reading and Composition)				
C.	Within the past three years, have you completed one semester of Human Anatomy with cadaver dissection (Biology 250)?				
D.	Have you completed Intermediate Algebra or a higher math course (MATH 120 or MATH 122/123)?				
E.	Have you completed one semester of Interpersonal Communication (Speech 120)?				
F.	Have you completed Elementary Chemistry (CHEM 192 or CHEM 410) or higher, or one full year of high school chemistry?				
G.	Have you completed one semester of Introduction to Physiology (BIOL 260)? <i>Highly recommended</i>				
H.	Are you currently certified in CPR for Health Care Providers by the American Heart Association ?			EXPIRATION DATE	
	Have you completed RADT 400: Orientation to Radiologic Technology at Cañada College?				

Note: Proof of equivalence of courses taken outside of the SMCCCD must be included in your application packet. This can be completed through the Cañada College counseling department. It is not the responsibility of the admissions committee to determine course equivalency.

WORK EXPERIENCE: Attach a separate sheet if necessary and include military experience.

EMPLOYER	PRIMARY DUTIES	DATES

CIRCLE ONE

Have you ever been convicted of a misdemeanor or felony? **NO** **YES**

If **YES**, contact the American Registry of Radiologic Technologists (ARRT) at (651) 687-0048 or visit their website at www.arrt.org. You are required to establish your eligibility for certification. You **MUST** submit your ARRT eligibility documentation with your program application. *Failure to disclose conviction of a misdemeanor or felony will result in dismissal from the program.*

I, _____ (PRINT YOUR FULL NAME), certify that the information in this application is true and accurate.

APPLICANT

SIGNATURE _____

DATE _____

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