Computed Tomography Program
Admissions Application

The Computed Tomography (CT) Program is an advanced imaging certificate program. The program has special admission requirements, limited enrollment, and is only open to technologists currently certified and registered by the ARRT in Radiologic Technology. Applicants are responsible for ensuring all admission requirements are met, and all documents are submitted on time. Incomplete applications will not be considered.

Application Checklist

☐ Submit a CT program application (see reverse side)

☐ Attach a current copy of current ARRT certification/registration in Radiologic Technology.

☐ Attach a current copy of California Diagnostic Radiologic Technology Certificate.

☐ Attach a current copy (front & back side) of current American Heart Association: Basic Life Support (BLS) for Healthcare Providers CPR Certification.

☐ Attach a copy of CA Venipuncture Certification, or venipuncture training and education completion document.

☐ Attach Clinical Exemption Documentation **if applicable** (information available in program handbook).

☐ Possess a valid Social Security Card. <u>Do not submit a copy of the card</u>.
   o This is a licensed profession, and a valid Social Security Number is required to obtain national licensure.

☐ Submit the application with supporting documentation via email to Melissa Villegas at **mvillegas32@mtsac.edu**.
   o The application window is Sept 1st – Oct 1st. The deadline date for application submission is **Oct 1st**. Only applications submitted with all required supporting documentation will be considered.

*AFTER a student receives confirmation that he/she has been provisionally admitted to the program, the following admission requirements must be met **prior** to formal program admission.*

☐ Complete a physical examination, including specific immunizations and drug testing. Drug testing procedures will be provided upon provisional admission.

☐ Complete a background check indicating a passing clearance. A valid Social Security number is required to complete this process. Information on background check procedures, and clinical affiliate's review of results, will be provided upon provisional admission.

☐ Complete site-specific clinical requirements if applicable. Information will be provided upon provisional admission.

☐ Attend a mandatory program orientation. Information will be provided upon provisional admission.

Personal Information:

Last Name	First Name	Male ☐
		Female ☐
Date of Birth	Home Phone #	Cell Phone #
Address		City
State	Zip Code	Email Address
Mt. SAC Student ID No.	ARRT Certification No.	CRT RHM No.
Current Employer	Position	Full Time ☐
		Part Time ☐
Student Signature		Date

(circle one)

1. Will you be enrolling in the clinical experience component of the CT program?	Y	N
2. Will you be seeking clinical exemption?	Y	N
3. Are you a graduate of Mt. SAC's RT program?	Y	N
4. Do you have any clinical **work** experience in CT? If yes, how many years?	Y	N
5. Do you have any clinical **work** experience in RT? If yes, how many years?	Y	N
6. Have you ever been convicted of a felony or misdemeanor?	Y	N
7. Are you requesting to complete your clinical training at your current workplace?	Y	N

☐ Check here after reading the statement below.

Applicants with a criminal or disciplinary history should complete the ARRT Ethics Review Pre-Application prior to program application or any time as needed. This is the process for early ethics review of offenses that would otherwise need to be reported on your ARRT application. More information on ARRT Ethics Requirements and the review process is available on the ARRT Website.

*Self-reporting criminal or disciplinary history to the ARRT and the program prior to program admission, or any time as needed, is **STRONGLY recommended**. This process will help avoid delays/denial in clinical placement, and ARRT certification.*

Signature: _____   Date: _____