



Radiologic Technology

Kitty Degree Hall 321-E | 700 University Avenue | Monroe, LA 71209
 318-342-3270 | bbennett@ulm.edu

Professional Program Application – Complete the application, print, and return it with your completed application packet.

Applicant Information					
Full Name:				Date:	
<i>Last</i>	<i>First</i>			<i>M.I.</i>	
Address:					
<i>Mailing Address (Give address in which application correspondence can be sent after Nov. 1st)</i>				<i>Apartment/Unit #</i>	
				<i>State</i>	<i>ZIP Code</i>
Phone: ()		E-mail Address:			
Date of Birth:		ULM CWID#:			
Are you currently a ULM student?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have you ever been enrolled in a Radiologic Technology program?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever been convicted of a felony or misdemeanor? If yes, briefly explain:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<i>If yes, please refer to the ARRT Pre-Application Review</i>		
Have you ever had a license or certification revoked or surrendered for any reason? If yes, briefly explain:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<i>If yes, please refer to the ARRT Pre-Application Review</i>		

Education					
College:		City/State:			
From:	To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:
College:		City/State:			
From:	To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:
Other:		City/State:			
From:	To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:

Alternate Contact	
<i>If you cannot be reached by the information provided above, please list an alternate correspondence preference.</i>	
Full Name:	Relationship:
Phone: ()	Email:

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Pre-Requisite Checklist

This is a checklist to ensure that required prerequisite courses have been completed. Applicants must have completed 41 hours of the 47 hours considered prerequisite courses with the remaining 6 hours being humanities, arts, or social science courses by the end of the fall semester just prior to the spring semester that begins the professional phase. If this degree sheet does not apply to you, please contact the RADT Program Director for further assistance. Please indicate grades, institution, and date (semester/year) taken for each course.

<u>Course</u>	<u>Grade</u>	<u>Institution</u>	<u>Date Taken</u>
Example	A	ULM	Fall/2018
CORE ENGL (COMP I)			
CORE ENGL (COMP II)			
UNIV 1001			
Psychology 2001 or SOCL 2026			
CORE Social Science Elective			
CORE Art Elective			
CORE Humanities Elective			
CORE Humanities Elective			
CORE Humanities Elective			
CORE Mathematics			
CORE Mathematics			
Chemistry Elective			
AHSC 2000 (Medical Terminology)			
Biology 1014 (A&P I)			
Biology 1016 (A&P I Lab)			
Biology 1015 (A&P II)			
Biology 1017 (A&P II Lab)			
RADT 2001			

- All transcripts that have been submitted to ULM and appear on the candidate's Banner are considered attached.
- Please attach all other transcripts with this application.
- Applications are only good for one year.

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TECHNICAL STANDARDS

The following mental and physical requirements are necessary to perform as a radiologic technologist student. Please indicate if you are able to complete each of the following:

- | Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Verbal and written skills sufficient to respond promptly in communications with patients, staff, and physicians. |
| <input type="checkbox"/> | <input type="checkbox"/> | Sufficient sight to read requisitions & charts, observe conditions of the patient in low levels of light, and to evaluate medical images on computer screens. |
| <input type="checkbox"/> | <input type="checkbox"/> | Sufficient hearing to interact with and respond to patients as well as to the audible sounds of equipment. |
| <input type="checkbox"/> | <input type="checkbox"/> | The ability to lift, assist and maneuver patients in wheelchairs, carts and imaging tables without injury to patient, self or other health care workers and to respond to medical emergencies. |
| <input type="checkbox"/> | <input type="checkbox"/> | Sufficient motor skills to manipulate, lift, reach, and operate equipment, and the ability to stand and walk for 80% of clinical time. |
| <input type="checkbox"/> | <input type="checkbox"/> | Intellectual and emotional skills to exercise discretion in handling confidential medical information. |
| <input type="checkbox"/> | <input type="checkbox"/> | Cognitive ability to perceive and deal appropriately with environmental threats and stresses and continue to function safely and effectively during high stress periods. |
| <input type="checkbox"/> | <input type="checkbox"/> | The ability to protect oneself and others from hazards in the health care environment, such as infectious disease, contaminated equipment, sharp instruments, chemical fumes and radiation. |
| <input type="checkbox"/> | <input type="checkbox"/> | The ability to secure transportation to and from class and clinical education sites to maintain required attendance policies. |

Choose and complete ONE of the following:

- Choice 1:** I have read the technical standards and attest I currently *have* the ability to fully meet these standards.
- Choice 2:** I have read the technical standards and I am currently *unable* to fully meet these standards without accommodations and will schedule an appointment with the ULM Counseling Center Director and the ULM Radiologic Technology Program Director.

Student's name (printed)

Student Signature

Date

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ADDITIONAL DOCUMENTATION

Application Fee

Payment of and receipt for the \$55 Application fee. Payment is made at La Capital Federal Credit Union. Ensure payment is for the Radiologic Technology Application fee; No refunds granted for application withdrawal.

Attach the receipt or copy of the receipt to this page.

ARRT Pre-Application Review (if applicable)

If you answered "Yes" to either of these questions on the application...

- Have you ever been convicted of a felony or misdemeanor?
- Have you ever had a license or certification revoked or surrendered for any reason?

...then you should have completed the ARRT Pre-Application review and submitted it to the ARRT. Include the decision/response with your submitted application packet. If you have submitted the Pre-Application, but have not received a response from the ARRT, please notify the RADT Program Director.

This form is NOT required to be submitted by every student. The review applies ONLY to violations specified in the Ethics Review Pre-Application packet. If it does not apply to you, do not complete it.

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