

# Application for Admission for Fall 2021 (RAD)

Trenholm State Community College  
Medical Radiologic Technology Program  
P.O. Box 10048, Montgomery, Alabama 36108  
334.420.4342 or 334.603.1769  
E-mail: [lburnett@trenholmstate.edu](mailto:lburnett@trenholmstate.edu)

APPLICATIONS WILL ONLY BE ACCEPTED VIA EMAIL ONLY

APPLICATION SUBMISSION OPENS MAY 1, 2021 AND CLOSSES JUNE 15, 2021 (NOON)

## APPLICANT INFORMATION

LAST NAME

FIRST NAME

MIDDLE INITIAL

TRENHOLM STATE STUDENT ID A#

STREET ADDRESS

PO BOX

CITY

STATE

ZIP CODE

PHONE NUMBER (INCLUDE AREA CODE)

EMAIL ADDRESS

## HIGH SCHOOL INFORMATION

HIGH SCHOOL NAME

CITY

STATE

ZIP CODE

LAST DATE ATTENDED

EARNED:

NONE

DIPLOMA

GED

**COLLEGE EDUCATION - IF APPLICABLE**

**All** Colleges previously attended **must be** listed and recorded below.

**1. COLLEGE NAME (MOST RECENT)**

DATE STARTED

LAST DATE ATTENDED

MAJOR

CREDENTIAL(S) EARNED

NONE

CERTIFICATE

ASSOCIATE

BACHELOR

MASTER

**2. COLLEGE NAME**

DATE STARTED

LAST DATE ATTENDED

MAJOR

CREDENTIAL(S) EARNED

NONE

CERTIFICATE

ASSOCIATE

BACHELOR

MASTER

**3. COLLEGE NAME**

DATE STARTED

LAST DATE ATTENDED

MAJOR

CREDENTIAL(S) EARNED

NONE

CERTIFICATE

ASSOCIATE

BACHELOR

MASTER

**4. COLLEGE NAME**

DATE STARTED

LAST DATE ATTENDED

MAJOR

CREDENTIAL(S) EARNED

NONE

CERTIFICATE

ASSOCIATE

BACHELOR

MASTER

Have you previously been accepted/enrolled in a Medical Radiologic Technology Program?

If yes, state your reason for withdrawal/non-completion.

YES

NO

I understand that meeting minimum requirements does not guarantee acceptance.

YES

I understand that completion of this application is a component of the student profile and does not grant admission to the Medical Radiologic Technology program.

YES

I understand that if I am not selected at this time and should I desire to apply to a future class, I will need to resubmit a complete application and all documents deemed required at such time.

YES

It is mandatory that all items listed below be submitted together as a packet (at the same time). If this application is missing any item below I understand that I will not be considered for acceptance.

By marking the items below, I am aware I must include the following items as an attachment to my email.

A completed RAD program application

Unofficial transcripts from High School or GED scores

Unofficial transcripts from ALL Colleges previously attended (if applicable)

Unofficial Trenholm State transcript showing completion and/or transfer of all completed courses (if applicable) and ACT score showing  $\geq 18$  composite score.

A completed Essential Eligibility Criteria Form (see page 4 of this application)

I certify that to the best of my knowledge the information provided in this application is true and correct. I am aware that providing false information may be deemed sufficient reason to dismiss the student and/or refuse admission.

YES

**By typing my name in the box below, I am electronically signing this document and wish to submit this as my application to the RAD program at Trenholm State.**

# Medical Radiologic Technology Program Essential Eligibility Criteria Form

The Trenholm State Community College Medical Radiologic Technology Program is covered by two federal laws that prohibit discrimination against persons with disabilities: The Americans with Disabilities Act of 1990, and Section 504 of the Rehabilitation Act of 1973. Under these laws, the Program may not discriminate against a “qualified student with a disability”, which is defined as a student with a disability who meets the academic and technical standards requisite for admission or participation in a post-secondary educational program or activity.

The program has established essential eligibility criteria deemed necessary for enrolled students in order to enable them to acquire the knowledge, skills, and competencies of an entry-level radiography position. Upon acceptance, students must demonstrate that they can perform the following tasks that are commonly performed by radiologic technologists, with or without reasonable accommodation. For students who believe they can meet or perform these standards or tasks with accommodation, the Trenholm State Student Disabilities Coordinator will attempt to validate their need for accommodation and will work with the program to determine if reasonable accommodation can be made. Jeopardy to radiographer/patient safety or undercutting of an essential element or eligibility criteria of a course or clinical experience will be considered in the determination of accommodations.

Student must be able to, with or without reasonable accommodation:

- access and accurately understand or analyze requisitions, orders, charts, directions, and other job-related documentation and communications,
- independently travel through the radiology department and to other departments and floors of the hospital,
- remain in a stationary position either sitting or standing for an extended time, equal to or greater than 30 minutes,
- assist patients to transfer from beds, wheelchairs, and stretchers to the radiographic table and back,
- independently be able to perform CPR, first aid and general patient care,
- give clear commands to patients and communicate effectively with patients and professional staff; including with individuals wearing masks,
- manipulate a variety of radiographic equipment, including the physical transportation of mobile radiographic equipment,
- independently access, adjust, and operate radiographic equipment,
- independently analyze, synthesize, solve problems, and reach evaluative judgment,
- independently assess radiographic images, controls, labels, and observe patients, and
- work in a sterile environment, prepare sterile fields, and fill sterile syringes.

Read the declarations below and choose only one option. If you are unable to fully meet any criterion, you will need to direct your request to the College ADA Coordinator.\*

I have reviewed the Essential Eligibility Criteria for this program and I certify that to the best of my knowledge I currently have the ability to perform these criteria with or without reasonable accommodation.

Yes

No

\*\*I am requesting the following reasonable accommodations below.

Reasonable accommodations requested (if applicable):

**By typing my name in the box below, I am electronically signing this Essential Eligibility Criteria Form and have answered these questions to the best of my ability.**

**DATE**

## General Information for the applicant:

- For any questions regarding the application please e-mail [lburnett@trenholmstate.edu](mailto:lburnett@trenholmstate.edu)
- All applications must be received by June 15th at 12:00 pm to be considered.
- It is mandatory that application packets be scanned and sent via e-mail. When you submit via e-mail, you should receive an e-mail confirmation from [lburnett@trenholmstate.edu](mailto:lburnett@trenholmstate.edu) within 36 hours after submission that your application has been received. If after 36 hours, you have not received confirmation, please re-check the e-mail you sent it to for correctness, re-send the e-mail and call 334-420-4342 (Laurie Burnett) to notify of e-mail issue(s).
- All applicants will receive notice regarding acceptance status (typically) within 5 business days of the deadline via the preferred e-mail listed on the application.
- **If accepted**, a welcome package will be sent with detailed information and instructions for completion as well as all required forms and deadlines. The **estimated** out-of-pocket cost for these requirements are listed below. Please know that pricing estimates vary based on vaccination needs, titers, provider, number of uniforms ordered, etc. All vaccinations must be documented on forms provided in the acceptance packet.
  1. Background Check/Drug Screen - \$60
  2. CPR BLS for Health care Providers - \$30 (to be completed together as a class at the beginning of the Fall semester)
  3. Immunizations (prices based AUM Student Health Center pricing - available to Trenholm students):
    - Hepatitis B 3 part series - \$50
    - MMR - \$75 OR MMR Titer - \$55 (if applicable)
    - TDap - \$40
    - 2 step TB step/Mantoux test - \$20
    - Varicella/Chicken Pox - \$150 OR if no record available, Immunity testing (Varicella IgG) - \$25
    - Flu (to be completed seasonally in September/October)
  4. Health Examination/Comprehensive Physical - \$35
  5. Uniforms: \$175
- Textbook and registration information will be provided in Acceptance Packet.