

OKLAHOMA STATE UNIVERSITY
Oklahoma City
Radiologic Technology Program Application Form

Application Form

SSN _____ Date: _____

Print Legal Name in Full _____
Last Name First Name Middle Name Maiden Name

Home Telephone _____ Cell Phone _____

Work Telephone _____ E-Mail _____

Present Address _____
Number & Street (or R.D.) City State Zip code

Is English your Native Language? _____ Yes _____ No If no, Have you taken the Test of English as a Foreign Language? _____ Yes _____ No

The following information is for demographic purposes only and will not be used in selection of the class. (Optional)

Date of Birth _____ Place of birth _____ Are you a U.S. citizen? Yes _____ No _____

High School of graduation: School Name _____ City _____ State _____

Date of High School Graduation _____ GED Certificate: Yes _____ No _____ Date of GED _____

- American Indian Caucasian Single Divorced Male
 Asian Hispanic Married Widowed Female
 African American

Give information below concerning college, university or other schools attended: **List all Schools (incl. OSU-OKC).** Attach separate page if needed.

Name of Institution	City & State	Date From - To	Degree Received
_____	_____	_____	_____
_____	_____	_____	_____

Work Experience:

Employer	Location	Date From - To	Description of Work
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you previously made an application to the Radiologic Technology program? (circle one) Yes No If yes, When? _____

When do you desire to begin the major area Radiologic Technology courses? _____

How did you hear about this program? _____

Because a person can find it difficult, if not impossible, to be placed in clinicals under certain conditions, you will be required to answer the following questions:

1. Have you ever been arrested or convicted of any offense, including a deferred sentence? Yes _____ No _____
2. Have you ever been convicted of a felony or do you have felony charges pending? Yes _____ No _____
3. Have you ever been court committed for mental incompetence? Yes _____ No _____
4. Have you ever habitually indulged in or been addicted to drugs or alcohol? Yes _____ No _____
5. Have you ever had disciplinary action taken against another health-related license? Yes _____ No _____

For any "Yes" answers above, please attach an explanation letter to this application.

****Falsifying any records pertinent to this application can lead to ineligibility or immediate dismissal from the Radiologic Technology Program.**

A national background check will be required of all who apply to the Radiologic Technology Program as a clinical facility requirement. Any negative information obtained in the criminal history may result in denial of admission to the Radiologic Technology program due to inability to secure clinical placement.

I have read the above document, have had the opportunity to ask any questions that I may have, and agree to the above stipulations:

Required Signature: _____

Have you done the following?

- ___ Been admitted to OSU-OKC & submitted official transcripts to Admissions?
- ___ Submitted documentation of your meeting with the OSU-OKC academic advisor?
- ___ Submitted copies of your transcripts with your application to the Radiologic Technology Dept?
Taken the TEAS ATI Exam and submitted a copy of the results sheet to the Radiologic Technology Dept with your application?
- ___ Submitted a current (<3 months or within 90 days of application deadline) - National Group One - 7 Year background check to include Sex Offender Registry and Violent Offender Registry - through the OSU-OKC Clinical Hub link on the Radiologic Technology Dept webpage? (The department will download the results)
- ___ Submitted your personal achievements letter or letters of recommendation (for tiebreaker purposes) with your application?

NOTE: Admission to the Radiologic Technology program may be denied to any student with a history of being dismissed or administratively withdrawn from another professional program, career tech, etc. Discovery of non-disclosure of this information after program admission will result in immediate program dismissal.

****APPLICATION DEADLINE: Last Weekday of May - annually**

NOTE: all required portions of the application must be submitted WITH the application form.