

UNIVERSITY of WISCONSIN **LA CROSSE**

APPLICATION FOR ADMISSION TO THE RADIATION THERAPY PROGRAM

Name			
	Last	First	M.I.

<p style="text-align: center;">Mailing Address (UW-L Students please list La Crosse Address)</p> <p>Address</p> <p>Address2</p> <p>City</p> <p>State</p> <p>ZIP</p> <p>Hometown</p>	<p>UW-L ID</p> <p>Email</p> <p>RT Club Member Attendee</p> <p>Year in School</p> <p style="text-align: center;"><i>The following section is voluntary</i></p> <p>Date of Birth</p> <p>Gender</p> <p>Ethnic/Racial Heritage</p>
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ACADEMIC HISTORY

Please list, beginning with most recent, ALL, colleges, universities, and technical schools attended.

Name of Institution	Location (City, State)	Attendance Dates		Degree & Date	Major(s)	Credits Earned
		From: Mo./Yr.	To: Mo./Yr.			

PRE-PROFESSIONAL COURSEWORK PROGRESS

Required Course	Semester Taken	Grade	Credits	Institution
BIO 105 (Gen Bio)				
BIO 312 (A&P I)				
BIO 313 (A&P II)				
CHM 103 (Gen Chem. I)				
CHM 104 (Gen Chem. II)				
MTH 151 (Pre-calculus)				
MTH 145 or STAT 145 (Statistics)				
PHY 125, or 103 + 104 (Physics)				
PSY or SOC course (Psychology or Sociology)				

For Fall 2018 courses please list “CE” in the “Grade Received” column. Fall 2018 grades will be accessed via WINGS over winter break and included in pre-professional grade calculations and evaluations.

For Spring 2019 courses please list “PE” in the “Grade Received” column. The program will access the student’s academic record via WINGS to ensure course registration.

For Summer 2019 courses please list “SU” in the “Grade Received” column. All Pre-Professional courses must be completed by the conclusion of the Summer 2019 semester.

EMPLOYMENT HISTORY

	Description and/or Institution	Dates:
Health Care certification / licenses (CNA, EMT, etc.) <i>Include photocopy of certificate / license. Credit will not be granted without documentation.</i>	1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____	_____ _____ _____ _____ _____ _____
Health Care Related Work Experience	1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____	_____ _____ _____ _____ _____ _____
Health Care Related Volunteering	1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____	_____ _____ _____ _____ _____ _____

OBSERVATION HOURS

Clinical Observation Evaluation Forms need to be filled out to accompany your application. Forms to be used are posted online. If the clinical supervisor does not complete the UW-L forms, your application will be denied. Clinical Evaluation Forms may be returned to the applicant in a sealed envelope with signature of evaluator over the seal or forms may be sent directly to the Radiation Therapy Program.

Medical Facility	Total Hours

PERSONAL REFERENCES

Please list 3 persons that are submitting reference forms on your behalf. Reference forms must be filled out completely. A letter may accompany the form, but is not required. Select references that are different than the people submitting clinical evaluations. Two references must be from faculty or staff at the university level, the other may be an employer or someone who knows you through volunteering or high school. References from family members or friends are strongly discouraged. Reference forms may be returned to the applicant in a sealed envelope with signature over the seal or may be sent directly to the Radiation Therapy Program.

Reference Name	Email Address	Relationship to Applicant
1.		
2.		
3.		

EXTRACURRICULAR COLLEGE ACTIVITIES (clubs, offices held, etc.)

COLLEGE HONORS AND SCHOLARSHIPS AWARDED

Please submit all Radiation Therapy application materials and \$50 fee by Friday, December 7, 2018

Radiation Therapy Program Application Checklist

Required application materials for the RT Program include:

- Radiation Therapy Application
- Written Statement regarding why you wish to pursue radiation therapy
- Non-refundable \$50 application fee payable to “University of Wisconsin-La Crosse”
- Clinical Observation - Report Forms
- Clinical Observation - Evaluation Forms (directly from evaluator to the program)
- Three (3) Reference Forms (directly from the references)
- Transfer students - [UW System application](#) (apply to UW-L as transfer student)
- Transfer students - Original transcripts for all college coursework

Direct RT Program application materials to:

UW-L RT Program
1725 State St.
4033 HSC
La Crosse WI 54601