NUCLEAR MEDICINE TECHNOLOGY PROGRAM ADMISSION APPLICATION



Please types responses. Hand-written applications will not be accepted.

PERSONAI	LINFORM	ATION	Ī	
Name (Last, First, Middle)			Student 1	ID (if applicable)
Local Address			1	Apt/Suite
City	State		Zip	
School Email	1	Phone		
Personal Email				
Permanent Address (if applicable)				Apt/Suite
City	State		Zip	
EMERGE	NCY CON	ГАСТ		
Name (Last, First)	Relationship		Phone	
REF	ERENCES			
The three individuals submitting recommer supervisor, and a professional reference of yo				
Name (Last, First)	Relationsh	ip	Inst	itution

OBSERVATION HOURS By checking this box, I am confirming that I have completed the NMT observation modules in Canvas.

Please list, beginning with most recent, all completed and future scheduled observation hours. A minimum of 8 hours is required.

Hospital / Clinic	Location (City, State)	Date(s) MM/DD/YY	Hour(s)

ACADEMIC HISTORY

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

Institution	Location	Attendance Dates		Degree / Certificate	Credits	
	(City, State)	From: MM/YY	To: MM/YY	& Date	Earned	

EMPLOYMENT HISTORY

Please list, beginning with most recent, all work experience.

	Dogition	Employed		Avg. H	
Company		From: MM/YY	To: MM/YY	During School (if applicable)	During Summer (if applicable)

VOLUNTEER EXPERIENCE

Please list, beginning with most recent, any volunteer experience.

0	D ::: /D :::	Partici	ipated
Organization / Event	Position / Description	From: MM/YY	To: MM/YY

EXTRACURRICULAR ACTIVITES

By checking this box, I am confirming that I have paid NMT club member dues.

Please list the name of any professional, social, and/or civic organizations which you are, or have been a member of, as well as a position / description (scholastic honors, clubs, activities, athletics, etc.)

	D ::: /D ::::	Partici	pated
Organization	Position / Description	From: MM/YY	To: MM/YY
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OTHER INFORMATION

Is there any other information you want us to be aware of (reasons for gaps in academic years, can use this space if there were not enough rows for categories above)?

	PRE-PROFESSIONAL Required to be completed before starting			K
Course	Semester & Yr Taken OR Semester & Yr Planned	Grade	Credits	Institution
BIO 105				
BIO 312				
BIO 313				
CHM 103				
CHM 104				
PHY 103 & 104				
Or PHY 125				
Or PHY 134				
MTH 150 or higher				
STAT 145				
PSY or SOC				

	PROFESSIONAL CO			
Course	Semester & Yr Taken OR Semester & Yr Planned	Grade	Credits	Institution
NMT 201				
NMT 314				
NMT 344				
NMT 398				
NMT 399				
HP 250				
HP 310				
CHM 300				

CHM 302		
CHM 325		
CHM 461		
PHY 376		
BIO 333		

GENERAL EDUCATION COURSEWORK

GE's requirements are not required to be fully completed before admission into the program, but most of them should be completed in order to complete them all before starting the NMT internship. GE's and pre-professional courses can overlap.

comp	lete them all before star	ting the NMT internship. GE's and pre-	professional co	urses can over	·lap.
Requirement	Course	Semester & Yr Taken OR Semester & Yr Planned	Grade	Credits	Institution
GE:00 FYS					
GE:01 ENG Writing					
GE:01					
GE:02 MTH/STAT/Language					
GE:02 MTH/STAT/Language					
GE:03 Minority Cultures/ Multiracial Women's Studies					
GE:04 HIS/Multicultural Studies					
GE:04 HIS/Multicultural Studies					
GE:05 Science					
GE:06 Self & Society					
GE:07 Humanistic Studies					
GE:08 Aesthetics					
GE:08 Aesthetics					
GE:09 Health & Well-Being					

Is there any other information you want us to be aware of regarding coursework (transfer equivalence exceptions, waived courses)?

PERSONAL STATEMENT

Please utilize the entire space below and explain how you became interested in pursuing a career in IMT. In your explanation please include: 1) the reasons you chose NMT, 2) why NMT is a good areer for you, 3) your professional goals.		
areer for you, 3) your professional goals.		

A candidate for the UWL Nuclear Medicine Technology (NMT) Program should be able to speak, to hear and to observe patients to elicit information, and to perceive nonverbal communications. A candidate must be able to communicate effectively and sensitively with patients. Communication includes not only speech, but also in reading and writing. The candidate must be able to communicate effectively and efficiently in oral and written form with all members of the healthcare team. A candidate should be able to execute motor movements reasonably required to provide general care and emergency treatment of patients. This includes the ability to turn and maneuver the patient and to administer radiopharmaceuticals or other intravenous medications. The candidate must be able to operate imaging equipment including computers. Such actions require coordination of both gross and fine muscular movements, equilibrium, and functional use of the senses of touch and vision. A candidate must possess the intellectual skills, (a minimum GPA of 2.50, and a grade of 'C' or higher in all NMT courses), emotional health, and stability required for the full utilization of his or her intellectual abilities, the exercise of good judgment, the prompt completion of all responsibility's attendant to the care of patients. Compassion, integrity, concern for others, interpersonal skills, interest, and motivation are all personal qualities that are assessed during the admissions and educational processes.

I understand that upon successful completion of the NMT program, I will be eligible to take a national certification examination in the profession. Two certification examinations are available in Nuclear Medicine Technology; one offered by American Registry of Radiologic Technologists (ARRT) and the other by Nuclear Medicine Technology Certification Board (NMTCB). I agree to take the at least the NMTCB examination and to provide my examination scores to the UWL NMT Director.

Eligibility for the ARRT examination requires that the candidate be of "good moral character". Conviction of a misdemeanor or felony may indicate a lack of good moral character for ARRT purposes. ARRT pre-application review procedures allow individuals who are not yet enrolled in an educational program to determine if a conviction would interfere with their later certification exam eligibility. The NMTCB is dedicated to the promotion of safe, competent medical care for all individuals. To that end, the NMTCB processes and evaluates applications for NMTCB certification, administers certification exams and monitors adherence to legal and ethical standards, including but not limited to the Code of Ethics of the Society of Nuclear Medicine Technologist Section.

Internships are determined by the hospitals or clinics, not by the university. I agree to apply to all of the internship sites. Furthermore, I agree to accept an internship at any of the sites if offered. I understand, however, that I will be able to rank the internship sites that UWL is affiliated with, and that every effort will be made to place me into one of my higher ranked sites.

State laws require that hospitals and clinics have background disclosure forms and criminal background checks on all employees and students (interns) that work with patients. A few of the UWL internship affiliate sites have COVID-19 vaccination requirements, when and if these sites will no longer require this vaccination is unknown. I understand that if I am assigned a clinical internship site that does require the vaccination and are not vaccinated, I would have to follow the clinical sites protocols and will not be able to be reassigned to a different site. If any of this is a concern for you, please contact the NMT Program Director at UWL, for further information.

I acknowledge that the information I have supplied in this application form is truthful and, to the best of my knowledge, correct and I understand that any falsification of the information on this form may be considered as just cause for my rejection as an applicant to the NMT program. I authorize the UWL NMT Selection Committee to review a current copy of my academic records as part of this application. I further authorize the UWL NMT Selection Committee and the Program Directors of any of the Nuclear Medicine Technology Hospital affiliates to verify my employment, observation, and academic history. I also authorize the institutions of higher education that I have attended to supply any information regarding my association with them that the Selection Committee or the Program Directors of the affiliate hospitals desire. I further release members of the Selection Committee and the Program Directors of the affiliate hospitals from any liability associated with their review and associated investigations of my application materials. Finally, I will accept the Selection Committee's decisions.

Please include with your application a check made to "UWL" for the application fee of \$50.

Applicant's Signatur	Signature	Si	licant's	Appl
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