## **Murray State College / Allied Health**

## **APPLICATION CHECKLIST**

## Technical Year 2018/2019

Application Process Checklist: Please place a  $\blacksquare$  in the box as the statement applies to you. Complete this checklist as you work through the application process. Review the checklist and include a signed copy with your application materials.

	1.	I have completed (or will have completed) all program prerequisite classes by the end of Spring 2018 semester.
		I will not have all prerequisite courses completed by end of Spring 2018 but I have included a plan to complete all pre-requisite courses before the beginning of the Fall 2018 semester. I understand that if accepted to the class and I lack any courses at the beginning of the Fall 2018 semester, I will not continue in the program and will need to re-apply to next available class.
		I have attached my mid-term grade report (with signature of each instructor) for all pre-requisite courses that I am currently taking this semester Fall 2017.
	2.	I have provided the following to MSC Registrar's Office with a request for a copy to be provided to the PTA Program Office:
		ACT Score report with composite score of 19 or above. (If less than 19, I have at least 3.0 GPA on college courses required by the program) If not, indicate the date you will take the ACT exam.
		ACT exam date, if planning to take again:
		High school transcript or equivalent
		College transcript(s) for all course work from colleges included on your application (if not previously a MSC student)
	3.	I have viewed the entire PTA Application Orientation Video that is linked to the Program Application section of the PTA Program website at <u>www.mscah.org</u> . Fill in the correct word or phrase given to you in the video for each of the blanks below:
a.		b c
	4.	I have taken the ATI TEAS admission exam in the MSC Testing Center on
	5.	I have reviewed the PTA Program Points System (Applicant Evaluation Worksheet Form 2018) and have completed a copy of the Point System form to the best of my ability and attached a copy with my application materials.
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	5.	<ul> <li>completed a copy of the Point System form to the best of my ability and attached a copy with my application materials.</li> <li>I have enclosed my Reading List (Career Research Reading List) with my application materials</li> <li>I have enclosed a list of all locations where I completed my clinical observations. <i>If you are reapplying and you desire to use observations from a prior application you still need to complete a list</i></li> </ul>
	5.	<ul> <li>completed a copy of the Point System form to the best of my ability and attached a copy with my application materials.</li> <li>I have enclosed my Reading List (Career Research Reading List) with my application materials</li> <li>I have enclosed a list of all locations where I completed my clinical observations. <i>If you are re-applying and you desire to use observations from a prior application you still need to complete a list of all locations (include the clinician's name you observed) that you are using for this application.</i></li> <li>If applicable, I have enclosed a letter (or had my employer send the letter), that verifies my work or volunteer time with direct contact as a PT Aid/Tech. This letter must include my job duties related to</li> </ul>
		<ul> <li>completed a copy of the Point System form to the best of my ability and attached a copy with my application materials.</li> <li>I have enclosed my Reading List (Career Research Reading List) with my application materials</li> <li>I have enclosed a list of all locations where I completed my clinical observations. <i>If you are re-applying and you desire to use observations from a prior application you still need to complete a list of all locations (include the clinician's name you observed) that you are using for this application.</i></li> <li>If applicable, I have enclosed a letter (or had my employer send the letter), that verifies my work or volunteer time with direct contact as a PT Aid/Tech. This letter must include my job duties related to PT, average hours per week, and length of employment with dates.</li> </ul>

My signature verifies that I understand the application process and have completed all application materials.

Printed Name: \_\_\_\_\_ Signature:\_\_\_\_\_