

BAYLOR SCOTT & WHITE MEDICAL CENTER-TEMPLE PROGRAM IN MEDICAL LABORATORY SCIENCE

APPLICATION FOR ADMISSION

Applicants must submit the following:

1. A completed **Application Form**, including a signed **Essential Functions** form (attached)
2. Official transcript(s) of **all** college course work, military applicants please also include military transcripts
3. Three recommendation forms; at least 2 should be academic references and if you are a current student or have graduated within the last three years, one recommendation form is required from your advisor.
4. Foreign applicants must also submit a **course-by-course** evaluation of foreign education credentials by one of the educational evaluation services. If courses were not taught in English, a TOEFL must be submitted.

**DEADLINE FOR APPLICATION IS:
DECEMBER 1 FOR AUGUST START DATE
MAY 1 FOR JANUARY START DATE**

Please e-mail or mail application form, essential functions form, and other supporting materials to:

Baylor Scott & White Medical Center-Temple
Program in Medical Laboratory Science
Shelby Johnson, MIS, MLS(ASCP)^{CM}
Program Director
2401 South 31 Street
MS-AR-D160
Temple, TX 76508
(254) 215-9843

E-mail: shelby.johnson2@bswhealth.org

Baylor Scott & White Medical Center-Temple is a tobacco-free institution. Students who use tobacco products are not eligible for selection.

We serve faithfully
We are in it together



We never settle
We make an impact

BAYLOR SCOTT & WHITE MEDICAL CENTER-TEMPLE PROGRAM IN MEDICAL LABORATORY SCIENCE

- 1) Name _____
(Last) (First) (Middle) *(Other)
- 2) Projected entrance into the program - August 20 _____ or January 20 _____
- 3) Birthdate** _____ 4) Gender** Female Male Other
- 5) Ethnicity** Native Hawaiian/Pacific Islander
 Asian American Hispanic American Indian/Alaskan Native
 African-American White Other _____
(Specify)
- 6) Are you a U.S. citizen? Yes No
 If no, type of visa _____ Country of citizenship _____
- 7) Is English your first language? Yes No
- 8) Current mailing address _____
(Street)

(City) (State) (Zip Code)
- 9) Telephone # _____ 10) E-mail address _____
- 11) Permanent mailing address _____
(Street)

(City) (State) (Zip Code)
- 12) Education (list in chronological order beginning with the first school attended):

Name of college/university	Years attended		Degree received	Date graduated
	From	To		

- 13) Will you be considered a 3+1 or 4+1 student? 3+1 or 4+1
 3+1 = will receive a bachelor's degree in MLS upon completion of this program
 4+1 = has a bachelor's degree prior to enrollment in this program
- 14) What university will you receive the degree from? _____

***If the information necessary to process this application is located under a different name, please include such name(s) in the space provided.**

****This information is optional and in no way affects the processing of your application.**

- 15) Have you previously applied to our program? _____ (Yes or No) If yes, please explain what you have done since applying to make you a better candidate: _____
 Have you ever been enrolled in a MLS program? _____ (Yes or No) If yes, explain reason(s) for leaving the program and provide the Program Director's name: _____

- 16) List all current or planned course work (not shown on transcript) to be completed before entering the program:

Course title	Credit hours	Semester	College/university

- 17) List employment history:

Employer	BSWH Y/N?	Supervisor & contact number	Type of work (be specific)	Employment dates	Reason for leaving

If more space is needed, please add additional pages. BSWH = any Baylor Scott & White facility

- 18) Are you currently working while taking classes or did you work when in school? _____ If so, how many hours per week? _____ How many semester hours? _____ Summer only? _____
- 19) Describe any work or volunteer experience in the medical or non-medical laboratory or healthcare field **not associated with school**:
 Volunteer: _____
 Hours/semester _____ or single event ____
 Work: _____
- 20) Do you wish to work at a Baylor Scott & White facility after graduation? yes no undecided
- 21) Do you plan to seek an advanced degree in the next 3 years in any of the following: yes (please indicate below) no
 Medicine Pharmacy Dentistry Physician assistant Veterinary Other _____

I understand that I will be asked to come for an interview at my expense as part of the admissions process.

I understand that my signature authorizes the Baylor Scott & White Medical Center-Temple Program in Medical Laboratory Science to contact any college advisors, former employers, or references.

I CERTIFY that the information on this form is true and correct to the best of my knowledge. I understand that willfully withholding information or making false statements on this application may be used as the basis for dismissal or disqualification from eligibility.

(Applicant's Signature) (Date)

BAYLOR SCOTT & WHITE MEDICAL CENTER-TEMPLE PROGRAM IN MEDICAL LABORATORY SCIENCE

ESSENTIAL FUNCTIONS

In addition to fulfilling the academic requirements, students accepted into the program must:

- 1) maneuver sufficiently to collect specimens and perform other laboratory tasks in a timely manner;
- 2) communicate effectively and professionally with peers, staff, faculty, and patients;
- 3) read and comprehend words, numbers, charts, and graphs;
- 4) demonstrate written and oral proficiency in the English language without assistance;
- 5) interpret reactions on slides, plates, and in test tubes visually;
- 6) exhibit the manual dexterity necessary to collect blood samples, process specimens, operate laboratory instruments and computers, and other aspects of laboratory testing that require hand-eye coordination;
- 7) meet the assigned schedule of didactic and clinical instructors, including transportation to clinical sites;
- 8) carry or lift objects weighing up to 15 pounds;
- 9) work efficiently under stress to make sound judgments and complete all responsibilities;
- 10) work in an efficient, responsible, and organized manner;
- 11) demonstrate ethical judgment, integrity, and accountability in the clinical laboratory when dealing with others;
- 12) exercise cooperation, confidentiality, and attentiveness at all times;
- 13) correlate, analyze, integrate, and apply information in laboratory testing and management;
- 14) successfully complete exams and assignments independently, and
- 15) follow verbal and written instructions to correctly perform laboratory procedures.

I meet the academic standards of the program, have read the above essential functions/non-academic requirements, and believe that

I can fulfill the above, or I can fulfill the above with reasonable accommodations.

Documentation from a qualified physician is required for any disability requiring reasonable accommodations prior to entering the program.

Signature: _____ Date: _____

NOTE: When considering candidates for the Program in Medical Laboratory Science, the Admissions Committee does not consider race, religion, national origin, veteran status, gender, age, or disability.