School of Medical Technology
Application for Admission

Please mail to:
Tampa General Hospital
School of Medical Technology
P.O. Box 1289
Tampa, FL 33601
Please type or print clearly.

Name: ______________________________________________________
Last                                       First                                                Middle

Present Address: _____________________________________________
Street                                      (_____)______________________
                                 City   State  Zip           Phone

Permanent Address (if different): _________________________________________
Street                                      (_____)_______________________
                                 City   State  Zip         Phone number where you can be reached.

Email Address: ________________________________________________________

Social Security #: _____________________   U.S. Citizen? __________

If not a U.S. Citizen, do you have a current visa allowing you to be a student? ________

Have you applied to this School Before? ________   Date: ___________________

Physician Statement of Health: Enclosed: _________   To Follow: _________________

Why have you chosen to pursue a career in Medical Technology?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
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________________________________________________________________________
### Employment Record:

<table>
<thead>
<tr>
<th>Type of Work or Activity</th>
<th>Employer</th>
<th>Address</th>
<th>Dates</th>
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### Other:
List any extra curricular activities or areas of interest & indicate special awards or responsibilities

### Education:
If you have attended school under another name, write name_____________________

Transcripts must be sent by each institution listed below. List most recent college/university first.

<table>
<thead>
<tr>
<th>Academic Institution</th>
<th>Address</th>
<th>Dates Attended</th>
<th>Degree/Yr</th>
<th>Major</th>
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Postgraduate Work: ________________________________________________

Will you have a Bachelor’s Degree prior to entering the Medical Technology Internship? ______

If Currently Attending School, list name, current or proposed courses, credit hours and expected completion dates.

Name of academic institution:

<table>
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<tr>
<th>Current Courses:</th>
<th>Credit Hours: Semester/Quarter</th>
<th>Completion Date:</th>
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I certify that the information contained in this application is correct and complete to the best of my knowledge. I understand that misrepresentations or omissions of applicant information whenever discovered may deem me ineligible for admission, or, if accepted, dismissal without prior notice. I have read the Essential Functions for clinical laboratory scientists and believe that I can meet those functions.

I agree to confirm to the rules and regulations of Tampa General Hospital and not reveal confidential information concerning organizations, patients or team members. I understand that revealing confidential information, whenever discovered, may deem me ineligible for admission, or, if accepted, dismissal without prior notice.

I understand and acknowledge that a health screen, including a urine drug screen is required during Orientation and that failure to obtain favorable results on the drug screen will result in dismissal from the School of Medical Technology.

I am aware that the successful completion of a training program does not automatically entitle me to licensure in a clinical laboratory per Florida Department of Health Regulations, as such application may be denied due to criminal convictions and non-restoration of civil rights.

_______________________________________________________              ______________________
Signature                                                                                     Date

Tampa General Hospital and the School of Medical Technology is committed to the belief that educational opportunities should be available to all qualified persons without regard to race, creed, color, age, sex, religion, handicap or national origin. Equal opportunity is given to all applicants.