

SURGICAL TECHNOLOGY PROGRAM ADMISSION APPLICATION 2025 Enrollment

Appl	licant	Name:
, 'pp'	rcunt	nunne.

Last

First

Middle Initial

Non-Discrimination Statement

Ascension St. Vincent College of Health Professions provides equal opportunity to all applicants. The Program is selective in its admissions practices and evaluates applicants based on merit without discrimination on the basis of age, race, religion, creed, color, national origin, marital status, gender, disability, veteran status, sexual orientation, or any other legally protected status.

* Applications will only be accepted between August 1st through October 31st *

Revised April 2024

Application Reminders!

Please read the following reminders carefully if you are planning to apply to the Surgical Technology Program. This information is extremely important so applicants can be sure to have a complete application prior to the application deadline.

General Reminders

- Please submit <u>ALL</u> application materials together in one envelope. This keeps your application materials together and helps prevent one item from getting misplaced. Transcripts are the <u>ONLY</u> application requirement that may be submitted electronically.
- Applications being dropped off in person may be left at the radiology desk right inside entrance 3 at the main Ascension St. Vincent Indianapolis Hospital at 2001 W. 86th Street. Make sure that ALL application materials are included in one envelope and the outside of the envelope is clearly labeled with the following: Taylor Morse, Surgical Technology Clinical Coordinator. Applications are only accepted August 1, 2024, through October 31, 2024. Please submit a courtesy email to Taylor.morse@ascension.org letting her know that you have dropped off your application at the radiology desk right inside entrance 3.
- If application documents are being mailed, the program recommends mailing your documents no later than <u>14</u> <u>days prior to the deadline</u>. Parcel tracking is also recommended. All application materials must be in the hands of the program by the <u>end of business on October 31, 2024</u>.

Transcripts

- If you are meeting the admission criteria with your high school gpa, SAT, ACT or GED scores transcripts need to be sent directly to the clinical coordinator.
- Additionally, If you took dual credit courses in high school and received college credit, please send the college transcript that reflects those credits earned.
- Send <u>ALL</u> college transcripts from any regionally accredited college or university that you have ever attended. This includes college transcripts that are older and that may not reflect any prerequisite courses that you have taken.
- It is preferred for transcripts to be sent electronically to Taylor Morse at <u>Taylor.morse@ascension.org</u>.
- We cannot accept transcripts that are issued to student or are not in a sealed envelope, if not sending electronically.

	 ADMISSION REQUIREMENTS Cademic Requirements for the Program. Cacepted in the program, the applicant must meet the following requirements: Be 18 years of age by January 1 of the year applying for enrollment. Be eligible to work in the United States as required by the U.S. Citizenship and Immigration Services (https://www.uscis.gov/i-9-central/form-i-9-acceptable-documents)
Acade	mic Requirements for the Program.
	To be accepted in the program, the applicant must meet <u>one</u> of the following requirements .
	Please select which criteria you are meeting for admission into the program:
	Minimum 2.50 College GPA (4.00 Scale) on all academic work from all institutions and a minimum of 9 credit hours completed.
	Minimum 2.50 High School GPA (4.00 Scale).
	Obtain a score of 165 or higher in all four sections of the General Educational Development Test (GED Test)
	Obtain an 18 or higher on the American College Testing (ACT)
	Obtain a 970 Composite Score or higher on the Scholastic Aptitude Test (SAT)

General Education Requirements

The following general education courses are <u>preferred</u> to be completed before the start of the program. If the general education courses are not completed before the start of the program, the applicant must complete courses in conjunction with Ascension St. Vincent College of Health Professions Surgical Technology Programs curriculum. All general education courses must be completed prior to graduation.

- 1. Mathematics (minimum <u>3</u> credits). Courses automatically accepted include:
 - Applied Mathematics
 - Algebra
 - Calculus

- Geometry
- Statistics
- Trigonometry
- 2. Communication (minimum <u>3</u> credits). Courses must be English based. Automatically accepted include:
 - Communication

Rhetoric

Debate

- Writing/Composition
- 3. Information Systems (minimum <u>3</u> credits). Courses automatically accepted include:
 - Computer Data Management
 - Computer Hardware
 - Computer Software/Applications
- Computer Language/Programming
- Computer Networking
- 4. Humanities/ Sociology/ Psychology (minimum <u>3</u> credits). Courses automatically accepted include:
 - Anthropology

Criminology

Civics

- International relations
- Psychology
 - Public Administration/Public Policy
 - Social Work
 - Sociology
 - Political Science

- EconomicsEducation
- Gender studies

Developmental studies

- 5. Natural / Physical Sciences (minimum <u>3</u> credits). Courses automatically accepted include:
 - Astronomy
 - Biology
 - Chemistry
 - Earth Sciences
- Human Anatomy and/or Physiology
 Physics

Geology

General Science

- 6. The above coursework must be from regionally accredited institutions.
- 7. The above coursework must be 100-level or higher courses.
- 8. All of the above courses must be completed with a letter grade of "C" or higher.
- 9. In cases where a letter grade is not assigned, the program will only accept any course graded as "P", "S", or other such institutional designation as evidence the course was successfully completed as passing.

Revised April 2024

Pre-Admission Conference

 Any applicant applying to the Surgical Technology Program <u>MUST</u> attend an in-person Pre-Admission Conference. If you are applying to the program that starts in January of 2025, the dates are August 1st, September 9th, October 16th. For additional information about the Pre-Admission Conference, please reference the website (<u>www.stvincent.org/CST</u>).

Letters of Recommendation

 Applicants are required to submit two letters of recommendation. These letters can be from previous instructors, bosses, or a personal letter of reference. These can be submitted to the clinical coordinator via email or with the application. Letters can be emailed to Taylor Morse at the following email: <u>Taylor.morse@ascension.org</u>.

Application Fee

• The program is not able to accept cash. Please send a money order, cashier's check or personal check made out to Ascension Surgical Technology Program in the amount of \$20. Please make sure you sign the money order and that all required information is filled out.

For a complete application you must include...

Application

Application Fee \$20- **NOT CASH**. Money order or personal check ONLY.

- 2 Letters of Recommendation
- Transcripts that meet the admission criteria sent to Taylor Morse at Taylor.morse@ascension.org
- ALL College Transcripts sent to Taylor Morse at Taylor.morse@ascension.org

Mark your calendar to attend the Mandatory Pre-Admission Conference

Copy of class schedule (if you are currently enrolled)

Personal History						
Name:		First		Middle Initial		
Last		First				
Other name under	which transcripts m	nay be listed:				
Mailing Address:				• • •		
	Box # & St	reet		Apt. #		
-	City		State	Zip		
Telephone:						
E-mail address: _			@			
		Resident Status				
		ed States as required by the l gov/i-9-central/form-i-9-acceptable-d	•			
		AGE ATTESTATIOI	V			
2. Will you be 18 years or older by January 1 st of the year you seek enrollment?						
2 Have you applie	d to this program in	Prior Application		[]		
з. ниve you applie	d to this program in	the past 2 years?				

Criminal History

4. Have you ever been convicted of or plead guilty to any felony or misdemeanor other than minor traffic violations? *

Professional Licensure

5. Have you ever had a professional license or certification suspended or revoked for any reason? *

* If you answered "YES" to questions 4 or 5, you <u>must</u> attach a detailed description and explanation of your conviction history and/or professional license/certification history. Include the relevant dates and the governing bodies associated with your <u>conviction and/or</u> <u>suspension/revocation of your professional license/certification.</u>

Revised April 2024 Failure to fully disclose an adverse criminal history or professional license record disqualify you from admission consideration or withdrawal of conditional acceptance

ACADEMIC DEGREE HISTORY

Official transcripts must be sent from each institution attended; List the most recent colleges first (use additional sheets if needed)

in <u>any</u> discipline?	ve any academic degree (associate, bachelors, masters, etc.)?	
If yes	Degree	
	Degree	
	Institution:	
	Date earned:	
If not, will you have in <u>any</u> discipline by <u>J</u> If yes	earned any academic degree (associate, bachelors, masters, etc.) January 1 of 2025?	
	Degree	
	Institution:	
	Date to be earned:	
	High School ATTENDED	
* 1	if you are currently enrolled in classes, please include a current class schedule	*
High School:		
City & State		
Dates of Attendance:_	Year of Graduation:	
	Colleges Attended	
* [f you are currently enrolled in classes, please include a current class schedule	*
College / School:		
City & State		
Dates of Attendance:_	Major	
College / School:		
City & State		
	Major	

<u>EMPLOYMENT HISTORY</u> * Please list the most recent first *

Name of Company				
Address (City, State & Zip)				
Starting Date:	Termination Date:			
Type of Business	Telephone			
Position Held	Supervisor			
Briefly describe your job responsibilities				
Reason for Termination				
Name of Company				
Address (City, State & Zip)				
Starting Date:	Termination Date:			
Type of Business	Telephone			
Position Held	Supervisor _			

ATTESTATION OF HIGH SCHOOL GRADUATION/GED

By my signature below, I state that I am a high school graduate or have completed by General Education Development (GED) test or graduated from the equivalent of a high school from another country.

STATEMENT OF TRUTH

I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information is grounds for immediate removal from consideration of admission or dismissal from the program if already admitted. I authorize the employment references listed herein to release to you any and all pertinent information concerning my previous employment. I authorize the academic references listed herein to release to you any and all pertinent information concerning my previous enrollment in the institution. I further agree to release all parties from all liability from damage that may result from furnishing said information to you. I acknowledge I have reviewed information regarding the Essential Functions and Skills individuals need to possess to be successful in the Surgical Technology Program and as Surgical Technologist online at www.stvincent.org/CST.

Signed

Date _____

* Send all application materials to: *

Taylor Morse Surgical Technology Clinical Coordinator St. Vincent Indianapolis Hospital 8402 Harcourt Rd. Suite 210 Indianapolis, IN 46260

** Candidates are encouraged to submit their application materials as soon as possible.

It is critical for you to read the application reminders on page two of the application prior to submitting application.