## Rowan College at Burlington County Magnetic Resonance Imaging Certificate Program Application

Please type or print clearly

Name							
Last	First	Middle	Other Name(s)				
Address							
Street	City	State	Zip Code				
Home Telephone	Cell Phone						
Personal Email	RCBC Email						
RCBC Student ID							
Radiography Program Attended							
Address							
Street	City	State	Zip Code				
Date Entered	Date Completed						
Award Granted: Diploma	AASBS						
ARRT Number							
Current Employer							
Please provide the name of your current address below. If you are not currently en Name	mployed, ask your radiograp	phy program director con					
Address							
Street	City	State	Zip Code				
<ul> <li>Provide the following documents with th</li> <li>1. Current resume</li> <li>2. Current American Registry of R</li> <li>3. Current CPR card</li> <li>I certify that the above information is continuediate dismissal from the program.</li> </ul>	is application: Radiologic Technologists (A	,					
Signature		Date					
Return all application documents to:	Rowan College at Burling Pamela J. Evans MSRS R 1000 College Circle						

1000 College Circle Mt. Laurel, New Jersey 08054 Rowan College at Burlington County Magnetic Resonance Imaging Certificate Program Recommendation Form

Applicant's Name

To the Recommender: The above-named applicant has applied to the Magnetic Resonance Imaging Certificate Program at Rowan College at Burlington County.

The mission of the Program is to provide the education and clinical experience necessary for individuals to become competent and compassionate registered MRI technologists. These health care professionals follow prescriptions to diagnose diseases. It is important that radiographers have a warm and compassionate personality, as well as having the ability to interact with patients, other health care practitioners, families, and visitors. The student must demonstrate good judgment and problem-solving abilities to be proficient in this particular skill set. Furthermore, he/she must be physically capable of the lifting, standing, walking for most of an 8-hour clinical day. The course work is challenging and demanding.

Your cooperation in completing and returning this form will assist both the applicant and the Program by giving us as complete a profile of the applicant as possible.

- 1. How long have you known the applicant and in what capacity?
- 2. What do you consider to be this applicant's major strengths?
- 3. What do you consider to be this applicant's major weakness?
- 4. Please comment on why you think this applicant will be suitable for the RCBC MRI Program.

Торіс	Excellent	Above Average	Average	Below Average	Unknown
Academic Potential					
The ability to problem solve					
The ability to work with people (i.e. patients, staff, etc.)					
Maturity					
Judgement					
Motivation					
Creativity					
The ability to accept constructive criticism					
The ability to express ideas in writing					
The ability to express ideas orally					
Reliability (not tardy or absent)					

5. Please rate the applicant in the following areas:

Your Name

Address

Title/Position

Date

Comments:

Thank you for your cooperation. Please return the recommendation form to:

Rowan College at Burlington County: MRI Certificate Program Pamela J. Evans MSRS Radiography Director / MRI & CT Coordinator 1000 College Circle Mt. Laurel, New Jersey 08054