

Rowan College at Burlington County
Computed Tomography 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 _____ AAS _____ BS ARRT Number: _____

Current Employer _____

Please provide the name of your current supervisor. Ask him/her to send the completed recommendation form to the address below. If you are not currently employed, ask your radiography program director complete the form.

Name _____

Address _____
Street City State Zip Code

Provide the following documents with this application:

1. Current resume
2. Current American Registry of Radiologic Technologists (ARRT) card
3. Current New Jersey Diagnostic Radiography License
4. Current CPR card

I certify that the above information is correct. Any falsification or misrepresentation of the above will result immediate dismissal from the program.

Signature Date

Return all application documents 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

Rowan College at Burlington County
Computed Tomography Certificate Program
Recommendation Form

Applicant's Name _____

To the Recommender: The above-named applicant has applied to the Computed Tomography 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 CT 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 CT Program.

5. Please rate the applicant in the following areas:

<i>Topic</i>	<i>Excellent</i>	<i>Above Average</i>	<i>Average</i>	<i>Below Average</i>	<i>Unknown</i>
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)					

Your Name

Title/Position

Address

Date

Comments:

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

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