

Registration Checklist

Phoenix College Phlebotomy Program Application

We appreciate your interest in the Phoenix College Phlebotomy Program. Please follow this checklist carefully to ensure that your application and documentation are in order for the selection committee. It is the applicant's responsibility to verify the application is complete.

The following items must be submitted to be considered for the program:

- Completed Phlebotomy Program Application

- Submit a copy of your High School Diploma
or - GED
or – Unofficial College Transcripts/Placement Testing for English,
reading and math

- Submit a completed and signed *Health and Safety Documentation Form*
with supporting documentation of:
 - Proof of MMR vaccinations or positive titers
 - Proof of positive Varicella titer or Varicella vaccinations
 - Proof of negative 2-step TB skin test or chest x-ray within the last year
 - Proof of Hepatitis B vaccinations or positive titers
 - Proof of Tetanus (Td) vaccination within the last 10 years
 - Health Declaration signed by M.D., D.O., N.P., P.A.

- Submit a current copy of CPR card for the Health Care Provider

- Copy of current Fingerprint Clearance Card
Or
Receipt showing the Fingerprint Clearance Card process has begun
(card must be submitted at least 2 weeks prior to the start of the program if
conditionally accepted into the program)

- Submit the Clinical Planning Form

Please Note: Materials turned in will not be returned to you

I have completed this form and attached all of the required documentation listed above.

Signature

Date

For Advisement Use Only:

Name:

T.D.S.

Please hand-deliver all materials by 4pm November 20, 2009 to a Phoenix College Health Care Adviser for application submission. A Health Care Adviser must sign or initial on the application, indicating they have received the application.

Phoenix College

Phlebotomy Program Application - Spring 2010

To be considered for the **Spring** evening or day programs, your application must be **hand delivered to Advisement** by 4pm on November 20, 2009.

Name: _____ Date of Birth: _____
Last First Middle

Former name(s) (Maiden) that may identify transcripts _____

Student ID Number: _____ Telephone _____ (hm) _____ (wk)/(cell)

Mailing Address _____
Street City State Zip

Email: _____

I am applying for acceptance into the:

- Spring 2010-Evening **January** Program Spring 2010-Day **February** Program
 Spring 2010-Evening **April** Program No Preference–Any Program Option

Reapplication? If yes, please indicate date of initial application: _____

Health Care/Work/Educational Experience

What is your current occupation: _____

Have you attended any other Phlebotomy Courses or Programs? Yes No

Are you enrolled in, or on a waitlist for, any other Health Education Program? Yes No

If yes, Program Name and location: _____

Education

Check each level of education you have completed.

- GED High School Diploma AA Degree Other _____

Prerequisite/Co-Requisite Course Work

1. Preference will be given to students who have completed the prerequisite/co-requisite coursework prior to the application deadline. Students with courses in progress at the time of the application deadline will be given second preference.
2. All courses must reflect a grade of “C” or better.

	Course	Grade	College	Date Completed	In Progress(check)
HCC130	Fundamentals in Health Care Delivery				
HCC145AA	Medical Terminology				

Future Plans

What role do you intend the Phlebotomy Certificate of Completion to have in your future career plans? Why do you want to pursue a Phlebotomy Certificate of Completion?

I certify that:

* (please initial next to each item)*

- It is my responsibility to provide all requested information to complete my file. Failure to provide all requested information and requirements may adversely affect my admission in to the program.

- I understand that admission into the program is conditional until I have successfully completed all requirements and submit any outstanding documentation to the program director, no later than 2 weeks prior to the start of the program. Failure to do so may result in acceptance being overturned.

- I understand that I will be required to submit to a drug test after acceptance into the program, and that I am responsible for this expense.

- I understand and agree to fully participate in classroom, laboratory, and clinical settings and program activities.

- The information provided in this application is true, correct, and complete to the best of my knowledge. If any information changes (such as name, phone number, or address), it is my responsibility to notify the Phlebotomy Program so the changes can be made in my file.

_____ Applicant Signature

_____ Date

Phoenix College, one of the Maricopa Community Colleges, does not discriminate on a basis of race, color, gender, national origin, religion, handicap or age in application, admission, participation, access and treatment of persons in instructional or employment programs and activities.

Application and materials will be reviewed and students notified by letter of their conditional acceptance or non-acceptance no later than the **second week in December** for the **Spring Programs**.

Please hand-deliver all materials to a Phoenix College Health Care Adviser for application submission. A Health Care Adviser must sign or initial on the application, indicating they have received the application.

Phlebotomy Program and Clinical Planning

Because of clinical site availability, the following policy is now in effect for clinical hours and clinical placement for students in the Phlebotomy Program.

In order to successfully complete the Phlebotomy program, you must choose one of the following program options and clinical schedule options.

Evening January Program

Classes run from January 26, 2010 – March 11, 2010, on Tuesday & Thursday evenings from 5:00pm - 9:30pm.

Clinicals will be scheduled either:

- Monday through Friday from 7am to 3pm from March 22 through April 2
- or -
- Monday through Friday 7am to 11am from March 22 through April 16

Day February Program

Classes run from February 24, 2010 – April 9, 2010, on Monday, Wednesday, and Friday afternoons from 1:00pm - 5:30pm. *Students will be off from March 15 through March 25 for Spring Break.*

Clinicals will be scheduled either:

- Monday through Friday from 7am to 3pm from April 19 through April 30
- or -
- Monday through Friday 7am to 11am from April 19 through May 14

Evening April Program

Classes run from April 13, 2010 – May 27, 2010, on Tuesday & Thursday evenings from 5:00pm - 9:30pm.

Clinicals will be scheduled either:

- Monday through Friday from 7am to 3pm from June 7 through June 18
- or -
- Monday through Friday 7am to 11am from June 7 through July 2

You must choose which program option you wish to enroll in, and you must choose which clinical schedule you will participate in. Clinical hours must be completed during the times listed above, evening/weekend hours are not available.

If your availability for clinical externship does not fall into one of these options, you will not be able to be placed in a clinical externship, and will not be able to finish the Phlebotomy Program.