

STANDARDIZED APPLICATION FORM

Email completed form to: Imoore@bhs1.org

Applicants for positions at the School of Medical Laboratory Science are considered without regard to race, color, creed, religion, sex, sexual orientation, gender identity, marital status, result of genetic testing, age, national origin, disability, status as a veteran, Vietnam era veteran, or being a member of the reserves or National Guard.

Application material to be submitted:

- 1. Application form
- 2. An official copy of all academic transcripts
 - a. International students will need their transcripts evaluated contact Program Director for approved agencies
- 3. Three references letters see separate form
- 4. Read the Essential Functions and return the completed signature page
- 5. A personal narrative as to why you are pursuing a career in medical laboratory science

Please type or print

| A. General Information: Date: | | | | |
|--------------------------------------|------------------------------|-----------------------|---------------|--|
| 1. Name:(Last) | | (First) | (Middle Int.) | |
| 2. E-mail: | | Cell Phone | e: | |
| Date of Birth | (optional) | | Home Phone: | |
| Permanent Address: | | | | |
| | (Street) | | | |
| (City) | (State) | (Zip Code) | | |
| 4. School Address (if applicable): _ | | | | |
| (/ - | (Street) | | | |
| (City) | (State) | (Zip Code) | (Telephone) | |
| 5. Mail all correspondence to (plea | se check one): Permane | nt Address: School Ad | ddress: | |
| 6. In case of emergency, please co | ntact: | | | |
| | (Name) | | | |
| (Address) | | | (Telephone) | |
| 7. Are you a US citizen? | _ If not, what type of VISA? | | | |
| (Continued) | | | | |



DATE

DEGREE

B. Education:

NAME

8. Please list all colleges/universities you have attended.

ADDRESS

(Official college/university transcripts from each institution must be sent to the School of Medical Laboratory Science)

YEARS ATTENDED

MAJOR

***All prerequisite course work must have been completed within the last 10 years.

| a. | | | | | |
|---|--|--|--|--|--|
| b. | | | | | |
| C. | | | | | |
| d. | | | | | |
| 9. List science/math courses currently in progress or planned prior to your graduation: | | | | | |
| 10. List activities/Honors: | | | | | |
| 11. Are you presently certified in a clinical laboratory science? | | | | | |
| If so, what agency/category? | | | | | |
| 12. Briefly describe your clinical laboratory experience: | | | | | |
| | | | | | |
| | | | | | |

(Continued)

| C. | Emp | loy | /me | nt: |
|----|-----|-----|-----|-----|
| | | | | |

| List employment, including summer or volunteer work you have held in the past few |
|---|
|---|

| EMPLOYER | NATURE C | F WORK | | EMPLOYEMENT DATES |
|---|-------------------------|---------------------------|--------------------|------------------------------------|
| a. | | | | |
| b. | | | | |
| C. | | | | |
| Have you ever been discharged from o | or disciplined by a for | mer or current employe | r? Yes _ | No |
| If yes, for what reason(s)? | | | | |
| Date(s): | | | | |
| 14. U.S. Military Service: | | | | |
| Branch of Service | Date Entered | Date Separated | Type of Discharg | е |
| Nature of duties and special training | received: | | I | |
| D. References: Please return under | separate cover. | | | |
| Please list three. Suggested sources: 1) college pr | ofessor or laboratory | instructor, 2) current or | former employer (p | oreferred), 3) your academic advis |
| NAME | | TITLE | ADDRESS | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| For the upcoming interview process, w (Check all that apply). Interviews are o | | | | e? |
| Mon | Tues | Wed Thu | rs F | ri |

(Continued)

E. Signature:

Read carefully before signing:

I give permission to Berkshire Health Systems to investigate all pertinent information concerning my application in order to determine my qualifications for the School of Medical Laboratory Science. I understand that falsification, misrepresentation, or omission of facts called for in this application may result in denial of entry into the program or immediate dismissal.

I agree to be photographed by Berkshire Health Systems following acceptance into the clinical training program.

I understand that any offer made to me by Berkshire Health Systems is conditional based on satisfactory results of a background check, references, drug testing and physical examination given by medical personnel approved by Berkshire Health Systems and to undergo such an examination in the event I am offered the clinical training program by Berkshire Health Systems. I also agree to take a physical examination at such other times as required by Berkshire Health Systems during the period of my internship.

I agree that any personal property carried by me from Berkshire Health Systems premises, including packages, briefcases or other hand carried items may be inspected by authorized personnel.

If accepted into the School of Medical Laboratory Science by Berkshire Health Systems, I agree to comply with all Berkshire Health Systems rules and regulations as they may be changed from time to time. I understand that neither this application nor any other Berkshire Health Systems document constitutes personal contract of clinical training.

In the event that I decide to leave Berkshire Health Systems, I agree to give the medical center proper notice of resignation. In the event of resignation or termination, I agree to return all Berkshire Health Systems property loaned to me such as identification badges, keys, etc.

I understand that any offer of clinical training made to me by Berkshire Health Systems is conditioned on my submission of satisfactory proof of my legal eligibility to work or train in the United States.

serve as a consent for the medical center to request any information concerning my application.

| Signature: | Date: _ | | |
|---|---------|--|--|
| My signature indicates that I have read, understood, and consented to the above statements. This authorization or photocopy shall | | | |

IMPORTANT: The student must refer to the specific program brochures, website, and admission policies for additional application requirements. BerkshireHealthSystems.org/SchoolOfMedicalLaboratoryScience.



Essential Functions

Policy 7

In order to participate in a medical laboratory science educational program and achieve career entry level competencies, students must be able to perform the duties of the job based on specifications and requirements for licensure and specific job performance duties. Students should therefore have the ability to perform the following essential functions:

Physical/Psychomotor skills

The student must demonstrate the following:

- 1. Successfully pass a pre-admission physical examination by Berkshire Medical Center.
- 2. Have the ability to move freely within educational rooms and Berkshire Medical Center laboratory departments to accomplish assigned tasks.
- 3. Possess visual acuity to discriminate color reactions (i.e. special stains, cell morphology, chemical strip reactions, microbiology plates and biochemical reactions, etc.), to discern fine details of cells for accurate identification, to perform microscopic analysis, to proficiently use a computer and to read charts, graphs, and printouts (or use prosthetics that will enable the senses to function adequately so the requirements can be met).
- 4. Possess sufficient motor skills and manual dexterity to accurately perform delicate tasks including the following, but not limited to, without compromising patient, student or employee safety:
 - a) calibration, monitoring and maintenance of laboratory instruments
 - b) follow precise lab procedures
 - c) pipet liquid from microliters to milliliters using various pipettes
 - d) streak an agar plate within 30 seconds to obtain isolated colonies
 - e) perform phlebotomy safely and proficiently using vacuum tube systems and winged infusion sets on patients including those confined to a hospital bed or seated in specimen collection furniture
 - f) grasp, hold, label and transport specimens for processing
 - g) handle/use reagents, hazardous chemicals and highly technical equipment to perform laboratory testing
- 5. Have enough strength to lift weights up to 20 pounds from the floor to waist level.
- 6. Possess the ability to sit or stand in places for extended periods of time up to 8 hours. Bend, crouch or stoop up to 20 times per hour.
- 7. Have the ability to reach laboratory bench tops and shelves, patients lying in hospital beds, patients seated in specimen collection furniture or have the ability to lean forward 18 inches.
- 8. Possess the ability to work in an environment with potentially infectious materials (HIV, Hepatitis, TB, etc.) and toxic or irritating chemicals. May be exposed to noise and temperature variations.

Cognitive Learning Skills

The student must demonstrate the ability to:

- 1. Receive, interpret, remember, reproduce and use information in the cognitive, psychomotor, and affective domains of learning to solve problems and evaluate work.
- 2. Process and categorize information using course goals and objectives.
- 3. Receive, interpret, remember, reproduce and use information in order to achieve satisfactory performance in all theoretical and clinical courses.
- 4. Integrate and relate data generated in multiple clinical laboratory settings.
- 5. Work from written and/or verbal instructions in a timely manner.

- 6. Work under strict time constraints in lecture and laboratory producing on-time and accurate results.
- 7. Focus work and thoughts to foster productivity in a fast-paced, noisy, and often distractive environment.

Communication

The student must be able to:

- 1. Have the ability to read, write, interpret and communicate proficiently (using English) to students, faculty, clinical staff, healthcare professionals and patients.
- 2. Possess hearing acuity so as to be able to communicate with others, including the use of telephone or other electronic communication device and monitoring of equipment (or use prosthetics that will enable the senses to function adequately so the requirements can be met).
- 3. Maintain appropriate body language to portray confidence, interest, and understanding to patients, instructors, lab staff and other students.

Self-Care/Personal Hygiene

The student must be able to:

- 1. Maintain general good health and self-care in order not to jeopardize the health and safety of self, faculty, staff and patients with whom the student will interact with during the course of the clinical internship:
 - a) Maintain personal cleanliness so that no inappropriate odors are present. Also be conscious of fragrances from perfumes, lotions, and other beauty and hygiene products
 - b) Maintain clean and neat appearance of hair, skin, nails, and teeth
 - c) Maintain clean and neat appearance of clothing and shoes
 - d) Remove yourself from "at risk" settings when you are ill or potentially contagious to others
- 2. Arrange reliable transportation (including emergency alternate transportation) and living accommodations to foster timely reporting to clinical training and lectures.

Affective

The student must be able to:

- Demonstrate sufficient psychological stability and maturity to effectively handle the rigors of a demanding clinical internship using necessary multitasking abilities and problem solving to perform effectively in stressful situations.
- 2. Possess the mental health required for full utilization of his/her intellectual abilities.
- 3. Demonstrate respect to all people including students, instructors, staff and patients without showing bias or preference on the grounds of age, race, gender, sexual preference, disease, mental status, lifestyle, opinions, or personal values. Promote good working relationships.
- 4. Demonstrate professional skills such as the ability to work independently and manage time efficiently.
- 5. Follow all School of Medical Laboratory Science and Berkshire Medical Center employee policies.
- 6. Maintain patient and student confidentiality at all times.

I have read the above Essential Functions and understand that they are required to succeed in the Medical Laboratory Science program. I meet these requirements.

I understand that the inability to meet any of these requirements in practice may result in non-admission or dismissal from the School of Medical Laboratory Science.

I also understand that the majority of ADA accommodations are not consistent with the goals and outcomes of the medical laboratory science profession due to accountability regarding patient safety.

| Print Name | |
|-------------------|------|
| | |
| | |
| Student Signature | Date |
| • | |

(Essential Functions 2018) (references: NAACLS News - Fall 1993; UNLV CLS Program Essential Functions)

