

MLT APPLICATION FOR ADMISSIONS

2023-2024 Professional Year

Application available:	•
Application DUE:	May 10th
Acceptance letters emailed by:	July 8th

DIRECTIONS FOR COMPLETING THE MLT APPLICATION FOR ADMISSIONS

- 1. Arrange for transcript evaluation prior to this application. MLT Faculty transcript evaluation required for courses not taken at Shoreline CC or listed on the Course Equivalency Grid or international FIS or WES transcripts.
- 2. Complete this application in its entirety. Incomplete applications will not be accepted.
 - a. There are six (7) Parts to this application. You are apply to one of the two programs:
 - i. **A.A.A.S. in Medical Laboratory Technology** Requires Shoreline General Education Core Requirements and Science pre-requisites
 - ii. **Certificate of Proficiency in Medical Laboratory Technology** Requires an associate or bachelor's Degree and Science pre-requisites and Human Relations course
 - b. Specific instructions for filling out Part A, B, and C
 - i. **For all courses**, indicate the college (i.e., SCC or UW) the course was taken, course number (i.e., Biol 242), and quarter/semester (Wtr20) and your respective decimal grade (3.6).
 - ii. All courses considered must have a minimum grade of 2.0 or higher.
 - 1. Grades are averaged if lecture & lab course are used to meet a prerequisite requirement.
 - 2. If MLT 181/182, 183, or 184* courses are repeated, grades will be averaged.
 - 3. Applicant status is considered on a point system. Grades in Part B courses convert to points. If your grade is not shown as decimal on your transcript, we use the following:
 - a. A=4.0 B=3.0 C=2.0 D or not completed = 0.0
 - 4. If currently enrolled or planning to take a required class
 - a. Indicate which quarter you are/will be enrolled in.
 - b. Provide a copy of the Spring registration for courses not taken at Shoreline CC.
 - 5. If accepted into the MLT Program and required courses are taken summer quarter, submit unofficial Shoreline CC transcripts or official college transcripts upon completion.
 - iii. Submit MLT Program Transcript Evaluation by completed by a MLT faculty if applicable.
 - iv. Submit FIS or WES transcript evaluation for courses taken outside the United States.
 - v. Indicate additional non required courses you deem beneficial to your success in your MLT training in Part C
 - vi. Indicate work experience of 6 months full time, or half time (1000 hours) in a year in Part C
 - vii. Request Recommendation and Employment Verification (if applicable) forms from References and/or Employer(s) be sent in a sealed envelope with reference signature on sealed envelope flap to the MLT Coordinator or Program Director.
- 3. Complete application packet by the MAY 10th deadline and submit via postage mail to:

Medical Laboratory Technology Program Shoreline Community College 16101 Greenwood Avenue N., Shoreline, WA 98133

^{*}Current enrollment or completion of MLT 181, MLT 182, MLT 183, and MLT 184 (Spring Qtr.) required to be eligible to apply.



MEDICAL LABORATORY TECHNOLOGY PROGRAM APPLICATION- ADMISSIONS

		STUDENT ID:
NAME.		
NAME: Last	First	Initial Other name(s)
EMAIL:		
(Personal)		
EMAIL:		
(Shoreline)		
ADDRESS:		
Street		Apt No. Daytime Phone Number
City	State	Zip Code
I am applying for:	I have at	least 6-month work experience (check one)
□ A.A.A.S. Degree, MLT	☐ Emplo	yer verification form included in application
☐ Certificate of Proficiency, N	MLT □ Emplo	yer verification form to be mailed by employer
Have you applied to Shoreline Residency Status: ☐ US C	U	rithin the past two years? Yes No ent alien/ immigrant □ Student Visa
I completed high school as follo	ows: (Check one)	I completed college as follows: (Check one)
☐ High School		☐ Associate's degree
□ GED		☐ Bachelor's Degree or higher
English is your first (Native) la	inguage?	I have trained/worked as a phlebotomist:
□ Yes		☐ Credits for phlebotomy lecture, lab, and practicum
□ No		☐ I can provide current certification verification
Please check one: Optional		☐ 5. Filipino Asian
☐ 1. White, Non- Hispanic		☐ 6. Chinese, East Indian, Japanese, and Korean
☐ 2. African American, Non-I	Hispanic	☐ 7. Other Asian
☐ 3. American Indian/Alaskan	1	□ 8. Hispanic
☐ 4. Samoan, Southeast Asian,	or Pacific Islander	☐ 9. Other Ethnicity
	iitted, I will need to red	e and true. I also understand that If I am admitted and do not apply for admission. No submitted materials will be returned ble application check fee.
Signature:		Date:



PART A- GENERAL EDUCATION CORE REQUIREMENTS

Shoreline Community College's Required General Education Courses	Cr	College Where Course Taken	Course Number on Transcript	Qtr. Taken	Grade	Currently Enrolled	Program Required
ENGL& 101	5						AAAS
Composition & Expository Pros							CP ^a
(Communication requirement)							CI
MATH& 146	5						
Introduction to Stats							AAAS
(Quantitative Reasoning Requirement)							
BUS 103	2-5						
Multiculturalism in the Workplace							AAAS
(Multicultural requirement ^b for AAAS)							
No Points Given for Gen. Ed. Requirements- these count towards your AAAS degree graduation requirements							

a - If English is your second language and/or degree coursework was not in English, then you must complete this requirement via placement tests or required course.

PART B- GENERAL EDUCATION CORE REQUIREMENTS

NON- MLT Program Required Courses	Cr	College Where Course Taken	Course Number on Transcript	Qtr. Taken	Grade	Currently Enrolled (1 point)	MLT use only (Points)
BIOL& 170	5						
Human Biology							
BIOL& 211 Majors Cellular: Biology	5						
BIOL& 260 Microbiology	5						
CHEM& 121 Intro to Chemistry	5						
CHEM& 131 Introduction to Organic/Biochemistry	5						
MLT 181 Intro to Med Lab Procedures	4						
MLT 182 Medical Lab Procedures	2						
MLT 183 Math Applications for Clinical Lab	2						
MLT 184 Preparation as a Laboratory Professional	1						
TOTAL POINTS							

b- Refer to the planning guide and/or the MLT course website for a complete list of courses that will satisfy the Multicultural Understanding requirement



MEDICAL LABORATORY TECHNOLOGY PROGRAM APPLICATION

Applicant Name:	
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PART C- ENRICHMENT COURSE(S) AND/OR WORK EXPERIENCE

Enrichment Course(s) (Enhances your preparation for MLT training (3-5 cr))	Grade	College Where Course Taken	Course Number on Transcript	Currently Enrolled (0.5 pts)	Poss. Pts	MLT use only (Pts)
Ed. Bonus Course 1:					1.0	
Briefly state reason:						
El D. C. C.				1		
Ed. Bonus Course 2:					1.0	
					200	
Briefly state reason:						
WORK EXPERIENCE	FT			LENGTH		
"Employer Verification Form"	or	POSITION	EMPLOYER	(Months	Poss.	MLT use
must be submitted by Employer	PT	TITLE	EMI EO I EK	or Years)	Pts	only (Pts)
for at least ONE job Phlebotomy or Lab Assistant in				,		
a Clinical Laboratory					2.0	
Foreign trained or work in						
laboratory science, Research Lab					1.5	
Aid, or Biotechnology						
Work Experience in customer service or other healthcare jobs					1.0	
(MA, CNA, etc.)					1.0	
(TOTAL PO	INTS:	



MLT PROGRAM ADMISSIONS APPLICATION- RECOMMENDATION FORM

Applicant Name: (Please Print)

The applicant named above is applying for additional Community College. Please submit this Recom					
envelope or to SCC:		illi by way 1	· Retain 10	ini to the uppi	icant in scarca
Lyubov Braga					
Coordinator, MLT &					
Shoreline Community	0	WA 0012	•		
16101 Greenwood Av Fax: (206) 533-5103	e. N., Shorelii	ne, WA 9813.	3		
Tax. (200) 333-3103					
Please evaluate the applicant in each of the	Excellent	Above	Average	Below	Not able to
following categories		Average	11, er mge	Average	evaluate
Intellectual ability					
Oral communication (English)					
Written Communication (English)					
Ability to receive & learn from feedback					
Follow instructions & complete assignments					
Work well with others					
Emotional maturity					
Motivated					
How long have you known this applicant?					
What class(es) did you instruct this applicant? c	or What was yo	ur job/relation	ship related to	this applicant?	
Anything else that you would like us to know ab	out this applic	ant?			
SIGNATURE:					
NAME (Print):					
SCHOOL or ORGANIZATION:					_
EMAIL/PHONE:					



MLT PROGRAM ADMISSIONS APPLICATION- RECOMMENDATION FORM

Applicant Name: (Please Print)

The applicant named above is applying for add Community College. Please submit this Recomenvelope or to SCC:					
Lyubov Braga, Coord Shoreline Community 16101 Greenwood Av Fax: (206) 533-5103	College		3		
Please evaluate the applicant in each of the following categories	Excellent	Above Average	Average	Below Average	Not able to evaluate
Intellectual ability					
Oral communication (English)					
Written Communication (English)					
Ability to receive & learn from feedback					
Follow instructions & complete assignments					
Work well with others					
Emotional maturity					
Motivated					
What class(es) did you instruct this applicant? Anything else that you would like us to know ab		,	ship related to	this applicant?	
SIGNATURE:					
NAME (Print):					
SCHOOL or ORGANIZATION:					
EMAIL/PHONE:					



EMPLOYMENT VERIFICATION for MLT APPLICANTS **To be completed by supervisor**

Applicant Name:	
Name and Address of Facility/Business:	
Dear Employer:	
Shoreline Community College Medical Laborat and a job description. A reference/recommendation return the form to the applicant in a sealed enveloped.	equesting verification of employment. He/she is applying to the tory Technology Program. This information includes time worked in its not required. Please complete the information requested and the pe with your signature on seal by May 10th. Applicants can include it included its analysis.
	Respectfully,
	Esther Lim, MLT Program Director elim@shoreline.edu Shoreline Community College 16101 Greenwood Avenue N, Shoreline, WA 98133
	* * * * *
Continuous paid employment: Yes/No Number of Months/Years worked: Description of major job duties (or attach job "I certify that this information is true and cor	
Supervisor's Signature	Date



EMPLOYMENT VERIFICATION for MLT APPLICANTS **To be completed by supervisor**

Applicant Name:	
Name and Address of Facility/Business:	
Dear Employer:	
Shoreline Community College Medical Laborator and a job description. A reference/recommendation	uesting verification of employment. He/she is applying to the ry Technology Program. This information includes time worked is not required. <i>Please complete the information requested and with your signature on seal by May 10th.</i> Applicants can include attion packet, or you may mail or email us directly.
	Respectfully,
	Esther Lim, MLT Program Director elim@shoreline.edu Shoreline Community College 16101 Greenwood Avenue N, Shoreline, WA 98133
	* * * * *
Continuous paid employment: Yes/No Number of Months/Years worked: Description of major job duties (or attach job do "I certify that this information is true and corre	
Supervisor's Signature	Date

Applicant Name:
PART D- APPLICATION ESSAY
Submit a handwritten essay on this page in the space provided. Tell me about your interest in an MLT career i.e., college or work experience, motivation, your decision to consider an MLT career and career goals etc.

PART E- TECHNICAL STANDARDS/ESSENTIAL SKILLS REQUIREMENTS

The Associate in Applied Arts and Science (A.A.A.S.) Degree and Certificate of Proficiency (CP) in Medical Laboratory Technology (MLT) Program prepares students to work as a team member in a clinical laboratory. The graduates will be prepared to perform scientific laboratory tasks. Employment opportunities are available to students taking the MLT (ASCP) certification examination. The SCC MLT program is accredited by the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS).

The MLT department has established minimum essential requirements that must be met, with or without reasonable accommodation, to participate in the program and graduate. The MLT department does not discriminate on the basis of race, religion, color, national origin, marital status, sex, sexual orientation, age, or disability. Reasonable accommodation can be made for some disabilities in these areas, but a candidate must be able to perform in an independent manner. Each applicant to the program must attest that they can meet the abilities and skills listed below before entry into the program.

Essential Skills Requirements

- 1. **Observation** An applicant must have the ability to participate actively in classroom demonstrations, lectures, student laboratory, and clinical practicum sessions. He/she must be able to see projected images and discriminate color variations in slide and computer format, and under a microscope.
- 1. **Communication** The applicant must be able to communicate in English with instructors, fellow students, patients, and other members of the health care team. He/she must be able to write and transmit information clearly, accurately, and efficiently.
- Motor Function The applicant must have sufficient motor function to perform a variety of basic and advanced laboratory testing. These may include manipulation of pipettes, microscopes, phlebotomy equipment, laboratory equipment, and supplies.
- 3. **Intellectual, Conceptual, Integrative and Quantitative Abilities** The applicant must be able to master basic science and clinical laboratory information presented in lecture and laboratory curriculum. He/she must also be able to measure, calculate, reason, analyze, evaluate, and synthesize laboratory information / data. Problem solving and interpretation of patient laboratory data is critical to all laboratory practitioners. The applicant must be able to decide when to seek supervisory help in a clinical setting.
- 4. **Behavioral and Social Skills** The applicant must be able to exercise good judgment in the lecture, laboratory, and clinical settings. He/she must be able to complete tasks on time in a mature, sensitive, and effective manner with instructors, coworkers, patients, and other members of the health care team. He/she must be able to work under relaxed and stressful emergency situations, prioritize tasks, and make correct judgments about patient results. Applicants must be flexible with scheduling and able to adapt to changing laboratory environments. Other professional attributes may include dependability, self-motivation and initiative, maturity, confidentiality, and concern for others.

These technical standards identify the requirements for admission, retention, and graduation of applicants and students in the program. I certify that I have read and understand the Shoreline Community College MLT Program's Essential Skills Requirements for admission and that I meet each of them, with or without reasonable accommodation.*

Signature	Date
Printed or typed name	

^{*} If accommodation is needed, the applicant must meet with the Coordinator for Services for Students with Disabilities on campus and identify the reasonable accommodation needed.

	Applicant Name:
PART F-	APPLICATION CHECKLIST
Check	MLT Admission Application Checklist
	Attended an MLT Program Information Meeting/Session (Date or Qtr./yr.):MLT Program Application form and fee
	 Application fee: Check or money order for \$25.00 payable to: "Shoreline Community College" Application fees are not refundable.
	 Applications will not be accepted without an application fee payment. Unofficial transcripts are included in the application packet.
	Course Substitution Waiver form(s) is/are included in the application packet.
	• If prerequisite courses are taken at another college and not listed on the MLT Program Equivalency Grid, then Submit MLT Program Transcript evaluation or Course Substitution Waiver (CSW) form. CSW form must be completed prior to application.
	If taking required course(s) Spring Quarter at another college, submit registration for enrollment. We will be
	able to check Shoreline CC spring enrollment. Contact two individuals to complete a Recommendation Form.
ш	Two (2) Recommendations required
	 One recommendation from an instructor and one from an instructor, personal, or professional reference. Return to MLT coordinator or Program Director. If a Recommendation Form is given to the applicant, it must be received in a sealed envelope with reference signature on sealed envelope flap. Return to MLT coordinator or Program Director. If you include 6 months' work experience, contact your employer to complete the Employment Verification Form. If an Employment Verification Form is given to the applicant, it must be received in a sealed envelope with reference signature on sealed envelope flap. Return to MLT coordinator or Program Director.
I underst	and that:
Initial	If the application is not completed or requested items are not submitted, it will be disqualified.
Initial	English and Math general education required courses must be completed. General education courses must be completed to graduate from the MLT Program.
Initial	MLT Program acceptance is based on completion of courses total in Part B and points in Part C. Scores will be totaled to rank applicants.
Initial	MLT Program starts in September. Upon acceptance, I will be given information for a Canvas course regarding MLT Program credential requirements (Criminal History background check, Healthcare Provider CPR Training document/card, immunization records). A CANVAS course will be set up for submission of

requested documents.