March 1, 2018

Dear Prospective RPT Student:

Welcome to the application process for the Wallace Community College Respiratory Therapist program.

If you are not attending Wallace Community College at this time, you will be required to complete the application process to the College. This is a separate process from the application process to the Respiratory Therapist program.

The application packet must be received no later than 5:30 PM, Thursday, May 24, 2018. If mailed, the application packet must be postmarked no later than May 24, 2018.

All applicants, regardless of acceptance status, will be notified by email. PLEASE MAKE SURE YOU PROVIDE AN ACCURATE EMAIL ADDRESS ON YOUR APPLICATION—ERRORS MAY CAUSE A DELAY IN ACCEPTANCE OF AN OFFER AND A FORFEITURE OF YOUR SPOT. Applicants accepted for the Fall Semester 2018 class will receive a “conditional” program admission pending completion of a required physical exam and a criminal background check.

Check to be sure you have all required items in the packet before you begin.

➢ Application Instructions (ATI-TEAS® testing information included)
➢ Submission of Application Materials
➢ RPT Program Application
➢ RPT Essential Functions
➢ Checklist

To be considered for acceptance, all required documents and forms must be completed. Please read your packet content carefully! Make copies of all paperwork before the packet is submitted. Copies will not be made for you. Once the application packet is submitted, no records will be released back to applicant.

We appreciate your interest in Wallace Community College and the Respiratory Therapist program. If we can be of further assistance, please let us know by contacting Ms. Tomi Sherlock, Allied Health Secretary, at 334-556-2388 or by email at tsherlock@wallace.edu.

Sincerely,

Judith Harrell, BS, RRT
RPT Program Director
INSTRUCTIONS FOR COMPLETION OF RPT APPLICATION PROCEDURE

All completed packets must be returned by the DEADLINE of 5:30 PM, Thursday, May 24, 2018. If mailed, the application packet must be postmarked no later than May 24, 2018.

Wallace Community College Application for Admission Form (If not currently a WCC student)
Complete all requirements for admission to the College in the Office of Admissions & Records at either WCC location or print the application form from the College website, http://www.wallace.edu/admissions/online_application.aspx. You may return the completed WCC application in person to the Office of Admissions & Records with a driver’s license or acceptable photo I.D. or mail or email the application with a copy of your driver’s license or photo I.D.
A WCC Admission Agreement will be sent to you when this process is completed.

Complete all of the following before submission of RPT application packet:

1. **RPT Program Application**
   Complete the RPT program application. Please print or type, DO NOT use pencil. This is not the application to Wallace Community College as mentioned above. The College admission application is a separate document. All forms must be completed by the application deadline – no exceptions. Return in packet by May 24.

2. **Admission Agreement**
   • A current ADMISSION AGREEMENT must be included in your application packet for the RPT program. This form must be marked as “Unconditional Admission” or “Conditional Status Cleared”.
   • If you are enrolled for spring semester at another college and cannot obtain “unconditional” status, you must submit all transcripts up to the semester in progress to the Office of Admissions & Records at WCC and then follow up with a complete transcript (following grade posting) at the end of the semester. A notation of your status should be made on your current Admission Agreement by Admissions personnel.
   • Current WCC students may obtain a copy of their current Admission Agreement from the Office of Admissions & Records. Requests for copies of your Admission Agreement are subject to a 72-hour processing time. Return in packet by May 24.

3. **Transcripts**
   If not already on file in the WCC Office of Admissions, request an OFFICIAL TRANSCRIPT from high school and/or EACH college attended to be delivered to or mailed to: Wallace Community College Office of Admissions & Records 1141 Wallace Drive Dothan, AL 36303
Provide a SEPARATE COPY (unofficial) in the RPT application packet for high school/GED® and/or EACH college attended in the RPT application packet. Although official transcripts are submitted to the Office of Admissions & Records for acceptance to the College, transcripts must also be submitted with the RPT application packet. Copies of transcripts will not be provided by the WCC Office of Admissions & Records for any college other than WCC. All copies are to be handed in with the application packet. Return in packet by May 24.

- If you are currently attending or have previously attended WCC, unofficial WCC transcripts may be obtained from www.wallace.edu at the Quick Links option, myWCC. If desired, you may contact the Office of Admissions & Records to request a copy of your unofficial WCC transcript. The application review committee does not do this for you. The WCC Office of Admissions & Records requires a 72 hour processing time.

  This is a time consuming process. Please do not wait until the last minute.

4. **ATI-Test of Essential Academic Skills (ATI-TEAS®)**

Students are required to take an academic entrance test, the ATI-TEAS®. This test measures basic skills in reading, mathematics, science, English and language usage. **ATI-TEAS® scores are only good for three (3) years.** A student may repeat the ATI-TEAS®, but must wait six weeks between taking each test. No cut off score has been established for the ATI-TEAS® test, but ranking points will be based on the score one receives in all areas tested.

Registration and payment for the ATI-TEAS® must be completed online through the vendor site—this cannot be handled through Testing Services at either campus location and payments cannot be received through the College’s Business Office. Applicants must create an online account at www.atitesting.com to schedule a date for testing. The fee for the test is $70.00.

Dates to take the ATI-TEAS® have already been established and can be found on www.atitesting.com. It is recommended that you schedule your test date early as each date only accommodates forty (40) examinees.

**Please note:** Students who take the ATI-TEAS® at any location other than the WCC Dothan Campus or Sparks Campus will be required to have official scores transferred to WCC. ATI assesses a $27.00 fee to transfer these scores.
SUBMISSION OF APPLICATION MATERIALS

Before turning in forms (in person or by mail), please check to see that you have answered all questions. It is the applicant’s responsibility to verify receipt of all required forms, transcripts, etc. Complete application packets are to be submitted to:

Allied Health Secretary
Room 262-C Health Science Bldg., Dothan Campus
Monday–Thursday 7:00 AM–5:30 PM

Switchboard Operator
Learning Resource Center, Dothan Campus
Monday–Thursday 5:30 PM–9:00 PM

Student Services
Sparks Campus in Eufaula
Monday-Thursday, 7:00 AM-5:30 PM

If the application packet is mailed, it must be postmarked no later than May 24, 2018.

Mailing Address: Wallace Community College
Tomi Sherlock, Allied Health Secretary
1141 Wallace Drive
Dothan, AL 36303


NOTIFICATION OF STANDING

All applicants, regardless of acceptance status, will be notified by email. PLEASE MAKE SURE YOU PROVIDE AN ACCURATE EMAIL ADDRESS ON YOUR APPLICATION—ERRORS MAY CAUSE A DELAY IN ACCEPTANCE OF AN OFFER AND A FORFEITURE OF YOUR SPOT. Applicants accepted for the Fall Semester 2018 class will receive a “conditional” program admission pending completion of a required physical exam and a criminal background check.

CATALOG

Students are subject to regulations stipulated in the Wallace Community College Catalog and Student Handbook and the RPT Student Handbook in effect at the time of admission to the program.

IMPORTANT: Make copies of all paperwork before the packet is submitted. Copies will not be made for you. Once the application packet is submitted, no records will be released back to applicant.
APPLICATION FOR RESPIRATORY THERAPIST PROGRAM
Return in packet by May 24, 2018

I. PERSONAL

Name: ___________________________  Student #: ____________

SSN: __________________________

Present Address: __________________________

Street __________________________

City __________________________
State __________________________
Zip __________________________

Home Address: __________________________

Street __________________________

City __________________________
State __________________________
Zip __________________________

Email: __________________________

Work Phone: __________________________

Home Phone: __________________________

Cell Phone: __________________________

II. EDUCATION

HIGH SCHOOL:

I am a high school graduate from __________________________

Year of Graduation: __________

I have a high school equivalency diploma (GED®). Year: ______

COLLEGE

Are you currently enrolled at Wallace Community College? _____Yes _____No

Have you ever attended Wallace Community College? ___Yes _____No

If yes, give last semester/quarter and year attended and name under which attended.

List ALL colleges and/or universities you have attended previously and/or are attending at this time.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
List all names under which your transcript(s) could be listed.

In the space below, please list any degrees, diplomas, or special training certificates you have been awarded.

Please place a checkmark by each course you have successfully completed with a C or higher.

___BIO 201 A&P I       ___PSY 200 General Psychology
___BIO 202 A&P II      ___Humanities/Fine Arts Elective
___ENG 101 English Composition           ___ORI 101 or 105 Orientation to College
___MTH 100 Intermediate College Algebra           ___CIS 146 Microcomputer Applications or
     OR higher                        Demonstrated Competency
___SPH 106 Oral Communications OR
     SPH 107 Fundamentals of Public Speaking
     ___ORI 104 WorkKeys® Assessment

I hereby certify that I have made no willful misrepresentations nor have I withheld information pertinent to this application. Further, I understand that acceptance of this application by Wallace Community College does not imply acceptance into the Respiratory Therapist program and that the final selection of applicants is by a Respiratory Therapist program selection committee. I have also read and understand the published requirements for acceptance and progression within the Respiratory Therapist program, as listed in the current catalog.

Signature of Applicant: _______________________________________________________

Date: __________________________

WALLACE COMMUNITY COLLEGE is an affirmative action, equal opportunity educational institution.
Respiratory Therapist Program
Physician’s Statement
Essential Functions Certification

Note to examining physician:

Please examine this individual in regards to his/her physical ability to perform the “essential functions” required for the job task of respiratory therapist.

These essential functions include the following:

Possess the visual acuity necessary to read and write, perform bedside patient assessment, and visually inspect the informational displays of various life support equipment and patient monitoring equipment typically employed in the care of respiratory patients. This would include digital, aneroid, graphic, color graphic, and alarm displays.

Possess the psychomotor skills and manual dexterity necessary to:

- write legibly.
- adjust typical control functions of various life support equipment and patient monitoring equipment.
- perform physical assessment of patients.
- respond quickly and appropriately to patient emergencies.
- perform standard (AHA) CPR techniques.
- assist with lifting, transferring, and moving patient.
- perform standard respiratory care procedures.
- perform activities involved in sterile and isolation procedures.
- perform various tasks associated with normal daily activities in a health care setting,
- moving between various patient care areas, charting, gathering equipment, etc...

Possess ability to hear alarm signals of various life support equipment and patient monitoring devices from appropriate distances.

Possess ability to communicate effectively with patients and medical staff.
RESPIRATORY THERAPIST PROGRAM
Application Packet Deadline
5:30 PM, Thursday, May 24, 2018

1. Have you completed all requirements for COLLEGE admission? Check with the Office of Admissions & Records to make sure ALL official transcripts have been received.

2. Have you provided accurate and complete information on the RPT application?

3. Have you included the WCC current Admission Agreement? Is the agreement marked as “Unconditional Admission” or “Conditional Status Cleared”?

4. Have you provided unofficial copies of ALL transcripts in with your application packet? REMEMBER, if you are presently attending WCC or have attended WCC in the past, you can go to www.wallace.edu and at the Quick Links options, click on myWCC to print your WCC transcript. If you request your WCC transcript from the Office of Admissions, they require 72 hours to respond.

5. Have you included scores from the ATI-TEAS® exam?

6. Are all required application materials, including unofficial copies of all transcripts, assembled together in a packet to be submitted in person or by mail? REMEMBER, if application packet is mailed, postmark must be stamped no later than May 24, 2018.

7. Have you made copies of all paperwork you are submitting for your records?

I hereby certify that I have made no willful misrepresentations nor have I withheld information pertinent to this application. I understand that acceptance of this application by Wallace Community College does not imply acceptance into the Respiratory Therapist program and that applicants are selected by a Respiratory Therapist program selection committee. I have also read and understand the published requirements for acceptance and progression within the Respiratory Therapist program.

Signature of Applicant

Date

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