March 1, 2018

Dear Prospective PTA Student:

Congratulations on your choice of careers and good luck in your endeavor!

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 Physical Therapist Assistant program.

The Physical Therapist Assistant program admits one class per year. The class size will be set each year based on financial resources of the College and clinical sites available. Each class will begin Fall Semester.

Please be aware that application packets submitted in person 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.

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
- PTA program Application
- PTA Essential Functions
- PTA Experience Form
- Checklist

To be considered for acceptance, all required documents and forms must be complete. 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.** If you have questions, contact Ms. Tomi Sherlock, Allied Health Secretary, at 334-556-2388 or tsherlock@wallace.edu.

Sincerely,

*Heather Wells, PT, DPT*
PTA Program Director
hwell@wallace.edu
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 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 at either College location along with a driver’s license or State issued photo I.D., or mail or email the application to the Office of Admissions & Records with a copy of your driver’s license or State issued 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 PTA application packet:

1. **PTA Program Application**
   Complete the PTA program application. Please print or type, **DO NOT** use pencil. This is **not** the application to Wallace Community College as mentioned previously. 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 PTA program. **This form must be marked as “Unconditional Admission” or “Conditional Status Cleared.”** If marked Conditional, contact the Office of Admissions & Records for clarification.
   - 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 official transcript (following grade posting) at the end of the semester. A notation of your status should be made on your current Admission Agreement.
   - Current WCC students may obtain a copy of their current Admission Agreement from the Office of Admissions & Records. Requests for copies of your current 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 & Records, 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) for each college attended in the PTA 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 PTA 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 have earned degree(s) you would like to be counted in the admission scoring process, you **MUST** make sure the degree is shown on both your official transcript and transcript copy. You will receive points for one degree only, so make sure you provide proof the highest degree earned. **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](http://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 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. **Physical Therapy Observation Experience Verification**
   This form must be completed for your application packet to be considered. A minimum 20 hours of verified observation time in two different types of physical therapy settings is required (e.g. 10 hours in a long-term care facility and 10 hours in an out-patient clinic). Form to be signed by a licensed PTA or licensed PT. **Return in packet by May 24.**

5. **ATI Test of Essential Academic Skills (ATI-TEAS®)**
   • Students will be required to take an academic entrance test, the ATI-TEAS®. The ATI-TEAS® 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®, but ranking points will be based on the score one receives in each of the areas tested.

   • A copy of your **ATI-TEAS® score report form must be included as part of your PTA application.** If you have taken the ATI-TEAS® more than once, only include the **one** score report you want the application review committee to use for scoring. **Return in packet by May 24.**

   • **Registration and payment for the ATI-TEAS® is completed on-line 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 on-line account at [www.atitesting.com](http://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. Completed application packets are to be submitted to:

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

Switchboard Operator
Learning Resource Ctr., 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

ALL REQUIRED MATERIALS MUST BE RECEIVED ON OR BEFORE THE PUBLISHED DEADLINE OF 5:30 PM, THURSDAY, MAY 24, 2018. IF MAILED, APPLICATION PACKETS MUST BE POSTMARKED NO LATER THAN THURSDAY, MAY 24, 2018.

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 PTA 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 ADMISSION
PHYSICAL THERAPIST ASSISTANT PROGRAM
WALLACE COMMUNITY COLLEGE

Date: ________________

Name: ___________________________ Student #:___________________

SSN: _______________________

Address: _______________________________________________________
    Number and Street   City   State   Zip Code

Email Address: ____________________________ Work Phone:___________

Home Phone: ________________

Cell Phone: ________________

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.

        ________________________________

        ________________________________

        ________________________________

        ________________________________

02/2018
List all names under which your transcript(s) could be listed.

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

NOTE: It is in your best interest to make a copy of all paperwork for your files before submission to PTA personnel.

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 Physical Therapist Assistant program and that the final selection of applicants is by a Physical Therapist Assistant program Admission’s Committee. I have also read and understand the published requirements for acceptance and progression within the Physical Therapist Assistant program, as listed in the current catalog.

Signature of Applicant: _______________________________________________________

Date: ______________

WALLACE COMMUNITY COLLEGE is an affirmative action, equal opportunity educational institution.

02/2018
**WALLACE COMMUNITY COLLEGE**  
**PHYSICAL THERAPIST ASSISTANT PROGRAM**  
**ESSENTIAL FUNCTIONS VERIFICATION**  
*(To be completed and turned in after acceptance at New Student Orientation)*

**DIRECTIONS:**

Read each function and the example of behavioral criteria for each. Respond in the appropriate column as to whether you fully meet the criteria (100%) or are unable to fully meet the criteria (less than 100%). You need to be very honest about your responses. If you respond LESS than 100% to any criterion, please explain in the space provided or enclose additional information. You must read and respond to EACH criterion and signify your status on the last page.

**DISCLAIMER**

The following statement of criteria is not intended as a complete listing of PTA practice behaviors but is a sampling of the types of abilities needed by the PTA student to meet program objectives and requirements. The PTA Program or its affiliated agencies may identify additional critical behaviors or abilities needed by students to meet program or agency requirements. The PTA Program reserves the right to amend this listing based on the identification of additional standards of criteria for PTA students.

<table>
<thead>
<tr>
<th>FUNCTIONS</th>
<th>EXAMPLES OF CRITERIA</th>
<th>100%</th>
<th>LESS</th>
<th>EXPLANATION</th>
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| Cognitive and critical thinking abilities are sufficient to make clinical judgments and meet laboratory objectives and requirements. | 1. Can comprehend new knowledge and apply it in PTA practice  
2. Can analyze situations and identify cause-effect relationships  
3. Can organize, program-solve, and make decisions  
4. Can meet mental competency requirements of the Alabama Board of Physical Therapy  
5. Can compute mathematical problems  
6. Can operate a computer after an orientation | | | |
| Interpersonal abilities are sufficient to interact purposefully and effectively with others. | 1. Can establish rapport with individuals  
2. Can interchange ideas in a group  
3. Can perceive emotions displayed by others  
4. Can convey sensitivity, respect, tact, and a mentally healthy attitude in interpersonal relationships | | | |
| Fine motor skills and hand/eye coordination are sufficient to safely fulfill laboratory objectives and requirements. | 1. Am able to manipulate small objects and dials on equipment  
2. Can manipulate objects without extraneous motions, tremors or jerking  
3. Can hear high and low frequency sounds, such as telephones, monitor alarms emergency signals, weak cries of infants and weak calls for help | | | |
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<tr>
<th>FUNCTIONS</th>
<th>EXAMPLES OF CRITERIA</th>
<th>100%</th>
<th>LESS</th>
<th>EXPLANATION</th>
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<td>Visual ability is sufficient to monitor and assess patient status and to fulfill laboratory objectives and requirements Instruments to enhance or correct vision are portable, usable in small spaces and in varying levels of light and do not disrupt care or cause discomfort to patients.</td>
<td>1. Am able to discern the full spectrum of colors and to distinguish color changes 2. Can accurately read numbers and letters in fine print, such as would appear on therapy or monitoring equipment in varying levels of light (daylight to very dim light) 3. Can read for long periods of time 4. Can read cursive writing such as would be found on patient’s charts 5. Can detect changes in the Environment</td>
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<td>Tactile ability and sense of smell are sufficient to assess patients and the environment.</td>
<td>1. Can discern tremors or vibrations in various body parts 2. Can palpate and count pulses 3. Can discern physical characteristics through touch, such as texture, shape, size, location, and others 4. Can smell body and environmental odors, such as infected wounds or burning electrical equipment</td>
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<td>Communication abilities are sufficient to convey thoughts in verbal and written form so that they are understood by others.</td>
<td>1. Has sufficient English language abilities to understand printed materials, classroom lectures; instructional, medical, or other directives; and patient questions and/or responses 2. Has sufficient English language abilities to be understood in verbal and written communications 4. Can teach a concept and test for understanding 5. Can interpret feedback or messages</td>
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<td>Physical mobility is sufficient to fulfill classroom, clinical, and program objectives safely and effectively.</td>
<td>1. Can maintain balance in any position and can stand on both legs, move from room to room in a timely manner and maneuver in small spaces 2. Can freely move all joints through functional range of motion 3. Can achieve certification in cardiopulmonary resuscitation at the BCLS (Basic Cardiac Life Support) level</td>
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<td>Strength (gross motor skills) and endurance are sufficient to safely fulfill clinical laboratory objectives and requirements.</td>
<td>1. Can stand and walk for six hours or more in a clinical situation 2. Can position, lift, and transfer patients from all surfaces without injury to the patient, self, or others 3. Can push or pull heavy objects, such as occupied hospital bed, without injury to patient, self, or others</td>
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<td>FUNCTIONS</td>
<td>EXAMPLES OF CRITERIA</td>
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| **Fine motor skills and hand/eye coordination are sufficient to safely fulfill laboratory objectives and requirements.** | 1. Am able to manipulate small objects and dials on equipment.  
2. Can manipulate objects without extraneous motions, tremors or jerking.  
3. Can write the English language legibly, using correct grammar and syntax. | | | |
| **Auditory ability is sufficient to communicate effectively with others, to monitor and assess patient status, and to fulfill all laboratory objectives and requirements.** | 1. Can hear high and low frequency sounds, such as telephones, monitor alarms, emergency signals, weak cries of infants and weak calls for help. | | | |
| **Visual ability is sufficient to monitor and assess patient status and to fulfill laboratory objectives and requirements.** | 1. Am able to discern the full spectrum of colors and to distinguish color changes.  
2. Can accurately read numbers and letters in fine print, such as would appear on therapy or monitoring equipment in varying levels of light (daylight to very dim light).  
3. Can read for long periods of time.  
4. Can read cursive writing such as would be found on patient’s care.  
5. Can detect changes in the environment. | | | |
| **Instruments to enhance or correct vision are portable, usable in small spaces and in varying levels of light and do not disrupt care or cause discomfort to patients.** | | | | |
| **Tactile ability and sense of smell are sufficient to assess patients and the environment.** | 1. Can discern tremors or vibrations in various body parts  
2. Can palpate and count pulses  
3. Can discern physical characteristics through touch, such as texture, shape, size, location, and others  
4. Can smell body and environmental odors, such as infected wounds or burning electrical equipment | | | |

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Student’s Name (please print)  
Student’s Signature  
Date
Wallace Community College

PHYSICAL THERAPY EXPERIENCE FORM
PHYSICAL THERAPIST ASSISTANT PROGRAM
WALLACE COMMUNITY COLLEGE

Applicant Name________________________ SSN: ____________________Student #: __________

Applicants are required to complete a minimum of 20 hours verified observation or volunteer

time in two different physical therapy settings (i.e. 10 hours at a long-term care facility and 10

hours in a short-term, outpatient facility). Individuals working as paid employees in a physical

therapy department may use their regular work hours to complete this requirement. Complete

this form and secure the signature of the physical therapist in charge of the facility. ONLY THE
SIGNATURE OF A LICENSED PHYSICAL THERAPIST OR LICENSED PHYSICAL

THERAPIST ASSISTANT IS ACCEPTABLE.

OBSERVATION/VOLUNTEER TIME IN A PT DEPARTMENT
(Minimum 20 hours required)

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<th>Facility</th>
<th>Document Month/Day/Year; Time in Hours</th>
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WORK EXPERIENCE/PAID EMPLOYMENT IN A PT DEPARTMENT

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<th>Job Title</th>
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# CHECKLIST

**Application Packet Deadline**  
5:30 PM, Thursday, May 24, 2018

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<tr>
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<th>YES</th>
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<td>1. Have you completed all requirements for COLLEGE admission? Check with the Office of Admissions &amp; Records to make sure <strong>ALL</strong> official transcripts have been received.</td>
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<td>2. Have you provided accurate and complete information on the PTA application?</td>
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<td>3. Have you included the current WCC Admission Agreement? Is the agreement marked as “Unconditional Admission” or “Conditional Status Cleared”?</td>
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<td>4. Have your provided unofficial copies of <strong>ALL</strong> transcripts in with your application packet? REMEMBER, if you are presently attending WCC or have attended WCC in the past, you can go to <a href="http://www.wallace.edu">www.wallace.edu</a> and at the Quick Links options, click on my WCC to print your WCC transcript. If you request your WCC transcript from the Office of Admissions &amp; Records, they require 72 hours to respond.</td>
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<td>5. Have you documented the 20 hours observation/experience requirement on the Physical Therapy Experience form?</td>
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<td>6. Have you included scores from the ATI-TEAS® exam?</td>
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<td>7. 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.</td>
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<tr>
<td>8. <strong>Have you made copies of all paperwork you are submitting for your records?</strong></td>
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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 professional phase of the Physical Therapist Assistant program and that applicants are selected by a Physical Therapist Assistant program selection committee. I have also read and understand the published requirements for acceptance and progression within the Physical Therapist Assistant program.

________________________________________
Signature of Applicant

_________________________
Date

WALLACE COMMUNITY COLLEGE is an affirmative action, equal opportunity educational institution.