# San Jacinto College South Physical Therapist Assistant Program Application for Admission

Please check ap	opropriate box:	New Application [_]	кеарріу 🔲	Date:
		Applicant Inf	ormation	
Please type o	r print clearly			
San Jacinto (	College G#			
Last Name		First	Name	MI
Mailing Addre	ess			Apartment #
City		State		Zip Code
Home Phone:			Cell Phone: _	
Email Address	s:			
Date of Birth:		_		
Age:				
Gender:	Male ☐ Fe	male   Non-binary		
Ethnicity:	☐ American	Indian/Alaskan Native	☐ Asian	☐ Black/African-American
	☐ Native Ha	waiian/Pacific Islandei	· ☐ Hispanic	☐ White
	☐ Two or Mo	ore Races 🔲 U	nknown 🗌 P	refer Not to Answer

Highest Degree Earned:			ind Year:		
Have you previously been a ☐ YES ☐ NO	Have you previously been accepted to or enrolled in another PT or PTA program? ☐ YES ☐ NO				
If yes, please list the school(s) in the table below (MUST submit letter of good standing from Program Director).					
Prior education (list mos	t recent first)				
High School, Colleges Attended	Location (City, State, Zip)	Graduation Date From/To	Hours Earned	Date Degree Earned	

Education

#### Pre-requisite courses

Fill out the following with classes that have been previously taken. If currently enrolled, please write "E" for grade. Please note that if you have more than 1 course in progress, your application score will be limited.

Courses	Grade	Year Completed	School Where Courses Taken
BIOL 2301/2101 or 2401			
BIOL 2302/2102 or 2402			
ENGL 1301 (Composition I)			
MATH 1314 (College Algebra) or above			

#### **Previous education**

Courses	Grade	Year Completed	School Where Courses Taken
PSYC 2301 (General		-	
Psychology)			
Humanities or Fine Arts			
Courses that meet Humanities/			
Fine Arts requirements:			
*English 2322, 2323, 2327, 2328, 2332,			
2333; Philosophy 1301, 2306; Arts			
1301, 1303, 1304; Dance 2303; Drama			
1310, 2366; Music 1306, 1307, 1310			

#### Courses of benefit to PTA

If you have taken any courses in the following categories <u>or other health care related courses</u>, please list here. If you are currently enrolled, please write "E" for grade.

Categories	Course Name	Grade	Year Completed	School Where Courses Taken
Kinesiology				
Nutrition				
Medical Terminology				
Speech				

#### Employment

## Employment record (list most recent or present position first) (continue on separate sheet if necessary)

Company Name	Date(s) Employed	Position & Duties

### Program Specific Information

References from Recommendation Forms Provide the name and email address of the individuals who completed your recommendation forms.

Reference Name		Reference Email Address	5	
<b>Observation hours</b> Please fill out the following infor	mation <u>AND</u> sub	mit the signed Hours of Obs	servation form.	
Name of Facility	Ту	pe of Setting	Number of Hours	
Have you attended one of our in	formation session	ons within the last 12 months	s? □YES □NO	
If yes, what date?				
Application Checklist (Please	e check all item	s that are completed)		
☐ I applied to San Jacinto College and submitted official transcripts to the San Jacinto College Office of Enrollment Services for all colleges attended.				
☐ I have submitted 3 recommendation forms along with the hours of observation form in signed and sealed envelopes with my packet.				
☐ I have included unofficial transcripts from all other colleges attended in my PTA application packet.				
$\square$ I have included a San Jacinto College degree evaluation (My San Jac GPS) reflecting all course work and equivalences.				
☐ I have completed the application in full and have signed and dated this application.				

This application will be used in the accumulation of points for the admission process. If decisions on point allocation will be determined by the Program Director.				
I hereby certify that the information in this application is true a knowledge. I understand that any misrepresentation or falsi admission or expulsion from the college. I understand that the factollege South Physical Therapist Assistant Program will read to application.	fication is cause for denial of culty and staff of the San Jacinto			
Signature of Applicant	Date			

Please submit requested materials only Revised February 2024