

This is a self-managed application. The applicant is responsible for collecting all of the required materials and mailing them in one package to the Admissions Office at Lawrence Memorial/Regis College. We highly recommend you make a copy of your completed application for your own records.

The following required materials are enclosed:

- Application form
- \$50 application fee
- Essay
- Employment List or Resume
- 3 completed Reference Request Forms
- Official High School Transcript/GED
- Official College transcripts (if applicable)

International students include all of the above plus:

- Certification of International Transcript (if applicable)
- Score from one of the approved English Proficiency Exams

Admissions Coordinator
Lawrence Memorial/Regis College Radiography Program
170 Governors Avenue, Medford, MA 02155-1643

Application for Admission

Lawrence Memorial/Regis College Radiography Program *Associate of Science*

170 Governors Avenue, Medford, Massachusetts 02155

phone: 781 306-6600 fax: 781-306-6142 website: www.lmregis.org

*Accredited by the Joint Review Committee on Education in Radiologic Technology
(JRCERT) jrcert.org, JRCERT, 20 N. Wacker Drive, Suite 2850, Chicago, IL 60606; Phone: (312) 704-5300*

The Lawrence Memorial / Regis College Radiography Program admits academically qualified persons without regard to race, color, religion, sexual orientation, age, national origin disability or veteran status.

Enrollment is contingent upon meeting specified cognitive, sensory, affective and psychomotor performance requirements.

Personal Data: *Please print or type the following information*

Last Name	First Name	Middle/Maiden Name
Street Address		
Town	State	Zip Code
Home Telephone	Work Telephone	
Cell/Beeper		
E-mail address		
Social Security Number		

Emergency Contact:

Name	Relationship	Telephone
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U.S. Citizen: Yes No

Immigrant/Permanent Resident/Green Card: Yes No

Non-immigrant: Yes No

Type of Visa _____

Note: An English Proficiency exam is required for all applicants who have not completed grades 1-12 in the United States. An official score report is required in original sealed envelope.

Education – High School or GED

List below in chronological order, any High School(s) attended or GED information. Have the official transcript(s) and/or GED scores sent to you and forward them unopened to us with your application:

Name of School		City & State
		<input type="checkbox"/> Yes <input type="checkbox"/> No
Date Entered	Date left	Diploma Received

Name of School		City & State
		<input type="checkbox"/> Yes <input type="checkbox"/> No
Date Entered	Date left	Diploma Received

Education – College

List below in chronological order, every college or university you have attended whether or not a degree was obtained. You must submit official transcripts for all courses taken. Have the official transcript(s) sent to you and forward them unopened to us with your application:

Name of School		City & State
Dated Entered	Date left	Degree Received (e.g.,AS, BA, MS)

Name of School		City & State
Dated Entered	Date left	Degree Received (e.g.,AS, BA, MS)

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Dated Entered	Date left	Degree Received (e.g.,AS, BA, MS)

Name of School		City & State
Dated Entered	Date left	Degree Received (e.g.,AS, BA, MS)

Employment

Please enclose a list or resume of past and present employment with your Application for Admission. List present or most recent employment first with dates and position(s) held; include summer and temporary work.

References (3 required)

Academic and/or employment references are required from three persons (not relatives or friends). References must be submitted on the Reference Request Form in original, unopened, sealed envelopes. This form is available on line at: www.lmregis.org.

Essay

Please address all of the following essay topics: 1) explain what specifically about Radiography has attracted you to pursue this as a career; 2) describe three of your personality traits that you feel will contribute to your success as a health care professional; 3) share your future professional goals; and 4) as all health care professions require skills in dealing with a variety of people, please share experiences you have had dealing with the general public. The essay must address all four topics and should not exceed three pages.

Application Fee

A non-refundable fee of \$50 is required. Checks made payable to Lawrence Memorial/Regis College should be submitted with this form.

Mailing Address

Please send application, employment list references, essay, \$50 application fee and all other required documents to:

Admissions Coordinator
Lawrence Memorial/Regis College Radiography Program
170 Governors Avenue, Medford, MA 02155-1643

The undersigned agrees that the information furnished on this Application for Admission form, together with all information and materials of any kind received, shall be completely confidential and shall not be disclosed to anyone, including the candidate and family of the candidate. The Chair of the Admission and Progression Committee may, for official purposes, disclose any part or all thereof to such person(s) deemed advisable.

The information given on this application form and other submitted documents is complete and accurate. All submitted materials remain the property of LM/RC.

Applicant's signature

Date

Applicants are advised that they must be of good moral character in order to be granted a license in Radiologic Technology by the Commonwealth of Massachusetts Radiation Control Program or a Certificate from the American Registry of Radiologic Technologists. Applicants are advised that certain misdemeanors or felonies as well as disciplinary actions by other licensure / certification bodies in any state or jurisdiction may preclude licensure or certification in Radiography. Contact the Radiography Program Director for further information.