

# 2019 Radiography Competitive Application

## Instructions



Complete the Radiography Competitive Application

- Missing information will be considered incomplete

Attach unofficial college transcripts from transferring institutions attended after high school

Attach copies of SAT/ACT scores *if* your math subscore meets program requirements

- Records can be accessed and printed from MyFSU under *Test Scores*

## Application Cycle



- January 15<sup>th</sup>-30<sup>th</sup> for ALL programs except Nursing
- March 15<sup>th</sup>-30<sup>th</sup> for Nursing

Application documents are to be submitted to the address below, no earlier than the 15<sup>th</sup> and post-marked by the 30<sup>th</sup> for consideration. If you are mailing the materials, please use a return receipt service through your preferred postal delivery service for documentation that the materials were received.

College of Health Professions, [VFS 209],  
Ferris State University  
200 Ferris Drive, Big Rapids, MI 49307

## Competitive Entry must meet all of the following:



Have a current 3.70 overall GPA at Ferris State University

Currently enrolled or admitted to Ferris State University in the Radiography Concentration

Declared the clinical concentration by the semester prior to the application cycle

Completed all of the qualifying courses with no repeats

Completed the minimum Ferris-credit requirements (see *Page 2*)

# 2019 Radiography Competitive Application

Last Name:

First Name:

FSU ID#:

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Note: All correspondence related to this application will be sent to the address provided

Current Address:

Apartment #:

City/State/Zip:

Phone #:

Alternate #:

FSU Email:

High School Graduation Date (month/year):

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List ALL colleges/universities attended (high school dual enrollment and Ferris State not required):

1)

2)

3)

4)

\*Attach unofficial transcripts for each institution listed above

## Qualification Criteria for Radiography

(complete all blank spaces)

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| Qualifying Course  | Minimum Grade/Credit |        | Semester/Year Taken | College or Career Center (CC) Where Taken | Grade or Credit (CR) or In Progress (IP) |
|--|----------------------|--------|---------------------|---|--|
|  | Grade                | Credit |                     |   |  |
| Math 115 or<br>ACT Math subscore of 24+<br>SAT16 Math subscore of 580+ | B-                   | 3 cr   |                     |   |  |
| ENGL 150   | C-                   | 3 cr   |                     |   |  |
| COHP 100 Medical Vocabulary  | C                    | 1 cr   |                     |   |  |
| BIOL 109 Human A&P   | B-                   | 4 cr   |                     |   |  |
| <i>Example 1: BIOL 109</i>   |                      |        | <i>Spring '18</i>   | <i>FSU</i>                                | <i>* IP or range A to B-</i>             |
| <i>Example 2: COHP 100 taken at a Career Center</i>                    |                      |        | <i>Fall '16</i>     | <i>CC</i>                                 | <i>CR</i>                                |
| <i>Example 3: ENGL 150 AP test</i>                                     |                      |        | <i>Spring '17</i>   | <i>High School</i>                        | <i>CR</i>                                |



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Review and **INITIAL** the statements that follow. Use **NA** for items that do not apply.

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\_\_\_\_\_ I have attached unofficial transcripts from all colleges/universities (other than Ferris State University) attended after high school. *Required in this application packet, even if previously submitted to FSU for admission.*

\_\_\_\_\_ I have attached a copy of my ACT/SAT scores if my math requirement was met by test scores.

\_\_\_\_\_ Other (attached is other documentation to confirm my requirements are met).

\_\_\_\_\_ My qualifying BIOL & MATH courses were completed within the allowable attempts per the Qualification Policy.

## NOTE

**CRIMINAL BACKGROUND CHECK REPORT:** The criminal background check will be filed after you are admitted to the clinical sequence of the program and submitted as other required immunization records.

Incomplete application materials will not be reviewed and the applicant will not be considered for admission.

Any transfer credits must meet program requirements. The following URL can be used for course transfer equivalencies: <https://ferris.edu/HTMLS/statewide/apply/transferequiv.htm>. Documentation will need to be attached to the application for approved substitutions.

## SIGNATURE

I verify that the information provided within this application is accurate. I am accepted or enrolled as an Allied Health Science - Radiography Concentration student for either my primary or secondary FSU program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FSU ID#: \_\_\_\_\_

\*You will be notified about your acceptance after March 15<sup>th</sup>.

**Comments:**