

## MEDICAL LABORATORY TECHNICIAN PROGRAM

### APPLICATION FOR CHANGE OF AREA

For Currently or Formerly Attending NCC Students Only

#### Application Directions:

1. Download and print the change of program application.
2. Complete the application by providing the necessary information and signing at the bottom of page
3. Scan and email the completed application, supplemental essay, and transcripts, to [Renee.Chin@ncc.edu](mailto:Renee.Chin@ncc.edu)

For questions regarding this application, contact the Medical Laboratory Technician Program at (516) 572-9640 Ext: 26581, or email [Renee.Chin@ncc.edu](mailto:Renee.Chin@ncc.edu).

#### Instructions to Applicant:

- A copy of your NCC college transcript from Banner and other college transcripts (if applicable) must be included with this application. A copy of your High School transcript is recommended.
- Attach a type-written essay (one paragraph) describing why you wish to enter the field of laboratory science.
- Applications for the upcoming fall semester must be submitted no later than **Friday, April 1<sup>st</sup>, 2022**. Late applications will be considered if space is available.
- An interview is required and should be scheduled through the Allied Health Sciences office before **April 15<sup>th</sup>, 2022**.
- Currently attending students seeking entrance into the Medical Laboratory Technician program must complete this APPLICATION FOR ADMISSION AND CHANGE OF AREA to the MLT Program and submit their NCC and other college academic transcripts.
- Students will be eligible for consideration for entrance into the Medical Laboratory Technician program upon completion of a **minimum of 12 credits** from the courses listed below\*. These credits and grades from the following list will be utilized to determine eligibility for entrance into the MLT program.

#### Please note:

To be employed in New York State (NYS) as a Certified Clinical Laboratory Technician (CLT) upon graduation from the Medical Laboratory Technician Program, graduates must be licensed and registered to practice by the NYS Education Department (NYSED), Office of the Professions. In order to obtain a NYS license, applicants must pass an approved exam and be of "good moral character" as determined under the NYS Education Law and the Rules of the New York S Board of Regents. Applicants for licensure must disclose whether they have a criminal record (felony or misdemeanor), whether any criminal charges are pending against them, whether any licensing or disciplinary authority has ever taken any negative action against them, and whether any hospital or licensed facility ever restricted or terminated professional training, employment or privileges, and whether the applicant ever voluntarily or involuntarily resigned or withdrew from such association to avoid imposition of such measures. In addition, every New York State application for a professional license, permit, or registration, or any renewal thereof, must file a written statement that, as of the date of the filing, he or she is, or is not, under an obligation to pay child support. Individuals who are four months or more in arrears in child support may be subject to suspension of their business, professional and/or driver's licenses. In addition, federal law limits the issuance of professional licenses, registrations and limited permits to United States citizens or qualified aliens. Accordingly, NYS applicants are required to provide information regarding their citizenship or alien status. For more information about the license requirements visit the NYS Office of Professions website: <http://www.op.nysed.gov/prof/clt/clp-cltlic.htm#gen> and download the application. <http://www.op.nysed.gov/prof/clt/clp-cltforms.htm>

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Name \_\_\_\_\_ N# \_\_\_\_\_ Email Address: \_\_\_\_\_  
Last First M.I.

Address \_\_\_\_\_  
Number and Street Town State Zip

Phone (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Home Cell Current Area of Concentration

High School Attended \_\_\_\_\_ Year of HS Graduation: \_\_\_\_\_

Other College(s) Attended ____ None, or list below:	Degrees Held ____ None, or list below:	Total Credits	CUM

**Applicants must have the following requirements to apply to the program: Math, Biology & Chemistry**

SUBJECT	REQUIREMENT	GRADE	INSTITUTION	DATE
Math	Two years of college preparatory math (may substitute MAT 109)			
Biology	High School Biology + AHS 131			
Chemistry	High School Chemistry or CHE 107, + CHE 131			

**Applicants please indicate below the following courses that have been completed at NCC.**

**\*A minimum of 12 credits is required for admission to the program.**

Course	Semester/Year	Grade	Course	Semester/Year	Grade
AHS 131			AHS 132		
CHE 131 or 151			CHE 132 or 152		
AHS 202			MAT 109 or higher		
Other Science (BIO 109,110, PHY 101, 102)					

My signature below indicates that I have read and understand all deadlines, requirements, and evaluation methods described on both sides of this form. I further understand that entrance into the Medical Laboratory Technician program is competitive and that there is no guarantee of admittance.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
MLT Faculty Advisor Signature

\_\_\_\_\_  
Date

