

**ARKANSAS STATE UNIVERSITY- JONESBORO**  
**COLLEGE OF NURSING AND HEALTH PROFESSIONS**  
**DEPARTMENT OF CLINICAL LABORATORY SCIENCES**

**APPLICATION INFORMATION**

Applicants to the Clinical Laboratory Technician (AAS in CLT) or Clinical Laboratory Science (BS in CLS) Program are expected to meet certain physical and mental requirements to ensure safe performance in clinical laboratory procedures by students in the clinical education affiliates. These technical standards of performance include the following six criteria:

- 01 Visually inspect medical test requests, medical test results, condition of medical reagents, equipment, and devices, and work in low light environments. Corrective glasses are approved.
- 02 Hear colleagues, instructors, patients, and other health care providers both face-to-face and with the back turned. Hearing aids are approved.
- 03 Communicate effectively and sensitively with instructors, colleagues, patients, and other health care providers. Verbalization is essential under stress and emergency situations.
- 04 Orthopedic functions to include reaching, manipulating, and operating necessary clinical laboratory equipment and instrumentation. Ability to respond to stressful and emergency circumstances.
- 05 Intellectual and conceptual integrative and quantitative abilities that enable one to measure, calculate, reason, analyze, evaluate, and synthesize information. One must understand three-dimensional relationships and have problem-solving skills.
- 06 Behavioral and social attributes that demonstrate the exercise of good judgment, the prompt completion of responsibilities, and development of mature, sensitive, and effective relationships.

**Application materials must be received by April 15 for consideration for fall semester admission.**

Letters of official admission into the CLS Program will be mailed by May 1.

**NOTES ON THE APPLICATION AND SELECTION PROCESS**

- 01 The submitted application packet is to consist of a completed application form, two completed reference forms (one from a current or former employer, and one from a professional or instructional reference, both of whom you've interacted with in the past 3 years), and college/university transcripts of all college work attempted. If applying directly from high school for the AAS in CLT, please provide high school transcripts and a copy of your ACT scores.
- 02 Applications are not reviewed on a first come/first served basis.
- 03 The minimum cumulative grade point average (CGPA) for admission is 2.50.
- 04 Factors considered in the application process include the following:
  - A. Cumulative grade point average:
    - Worth up to 56 points of possible 156 points for BS in CLS application.
    - Worth up to 56 points of possible 80 points for AAS in CLT application.
  - B. For BS in CLS application only, support course grades:
    - Worth up to 72 points of possible 156 points for BS in CLS application
    - Support courses include General Chemistry I & II, Anatomy & Physiology I & II, Microbiology for Nursing & Health Professions, Principles of Clinical Laboratory Science
    - Grade of A = 6 points, B = 5 points, C = 4 points, and D = 2 points for each support course
  - C. Proficiency in a second language, spoken and written, confirmed through testing (Praxis II or Oral Proficiency Interview):
    - Worth up to 10 points of possible 156 points for BS in CLS application.
    - Worth up to 6 points of possible 80 points for AAS in CLT application.

- D. Two references provided by the applicant evaluated according to a standardized rubric:  
- Worth up to 18 points of possible 156 points for BS in CLS application.  
- Worth up to 18 points of possible 80 points for AAS in CLT application.
- 05 Applications received after April 15<sup>th</sup> will not be accepted.
- 06 Completion of or current enrollment in CLS 1511 & CLS 1512, Basic Principles of CLS, for both AAS and BS applicants, with a grade of “B” or better.
- 07 Completion of (or current enrollment in) key coursework before beginning the BS in CLS is required (this does not apply to the AAS in CLT):
- A. General Chemistry I & II (ASU courses CHEM 1011, 1013, 1021, 1023)
  - B. Anatomy & Physiology I & II (ASU courses ZOOL 2001, 2003, 2011, 2013)
  - C. Microbiology (ASU courses BIOL 2101, 2103)
- 08 Students who are admitted into the 2-year CLT or 4-year CLS Program will be expected to provide their own transportation to and from assigned clinical sites. Transportation is not provided by ASU or the CLT/CLS Programs.
- 09 For applicants who are proficient in the Spanish language: *Actualmente en la región que sirve ASU, se necesitan profesionales de la salud que hablen español. Por favor, indique aquí si usted tiene esta habilidad. Se da crédito adicional a los candidatos que puedan demostrar esta competencia.* Spanish proficiency documentation includes one of the following:
- A. Praxis II – Spanish: World Language (minimum score 168)
  - B. ACTFL-OPI (Oral Proficiency Interview) (minimum score “Advanced Low”)
- 10 Foreign-born applicants must submit test scores of English proficiency with their application. English proficiency documentation includes one of the following:
- A. Test of English as a Foreign Language (TOEFL) – minimum score of 83 on the preferred internet-based test (iBT), 570 on the paper-based test, or 213 on the computer-based test
  - B. International English Language Testing System (IELTS) – minimum score of 6.5 and a spoken band score of 7
  - C. Pearson Test of English Academic (PTE) – minimum score of 56

Only a completed application packet, consisting of the application form, criminal background check acknowledgement, 2 reference forms, and transcripts of all college and/or high school work attempted, will be accepted for review. The application may be taken to Eugene W. Smith Hall - Room 101, or mailed to the following address:

Clinical Laboratory Sciences Department  
College of Nursing and Health Professions  
Arkansas State University - Jonesboro  
Attention: CLS Program Director  
P. O. Box 910  
State University, AR 72467

Arkansas State University is an equal opportunity institution and will not discriminate on the basis of race, color, religion, sex, national origin, age, impediment/disability, or unlawful factors in the admission and treatment of students.

The Clinical Laboratory Science Program is accredited by the following agency:

National Accreditation Agency for Clinical Laboratory Sciences  
8410 West Bryn Mawr Avenue, Suite 670  
Chicago, Illinois 60631 – 3415

**ARKANSAS STATE UNIVERSITY - JONESBORO**  
**COLLEGE OF NURSING & HEALTH PROFESSIONS**  
**DEPARTMENT OF CLINICAL LABORATORY SCIENCES**

**APPLICATION FORM**

This application is submitted for the academic year beginning the fall semester of 20\_\_\_\_\_, for admission to the:

- Clinical Laboratory Technician (CLT) Program  
(2-year Associate of Applied Science degree)
- Clinical Laboratory Scientist (CLS) Program  
(4-year Baccalaureate Science Degree)
- CLT → CLS (MLT → MT) "Bridge" Program  
(4-year Baccalaureate Science Degree for current MLTs)

An application for admission to Arkansas State University - Jonesboro:

has been submitted OR

is being submitted to the Office of Admissions and Records, P.O. Box 1630, State University, AR 72467 (phone 870-972-3024).

Date of submission (month \_\_\_\_\_, day \_\_\_\_\_, year \_\_\_\_\_).

Name: \_\_\_\_\_  
Last First Middle

ASU ID#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Phone Number: \_\_\_\_\_  
(current ASU Student)

Present Address: \_\_\_\_\_  
\_\_\_\_\_  
City State Zip

Permanent Address: \_\_\_\_\_  
(if different)  
\_\_\_\_\_  
City State Zip

Notification of admission decision should be sent to (check one) \_\_\_\_\_ present address or \_\_\_\_\_ permanent address. If applicant does not indicate a choice, notification will be sent to the first address given.

Email: ASU: \_\_\_\_\_

Other: \_\_\_\_\_

High School/Home town: \_\_\_\_\_

List all colleges, universities or other secondary institutions attended since high school, credits earned, and degree(s) if applicable. Submit transcripts from each institution.

| <b>College/University</b> | <b># Credits/Degree</b> | <b>Date Attended</b> |
|---------------------------|-------------------------|----------------------|
|                           |                         |                      |
|                           |                         |                      |
|                           |                         |                      |
|                           |                         |                      |

Do you have proficiency in another language? No Spanish Other: \_\_\_\_\_

Were you born in a foreign country? Yes No If yes, what country? \_\_\_\_\_

*All applicants, please respond to the following three questions:*

Do you have work experience in a health care institution? If so, briefly describe:

List two factors that influenced you to choose this field of study. If you are seeking readmission what factors have changed in your life that you believe will help you to be successful?

What would be your ideal job in the field of CLS?

*“Bridge” Program applicants only, please respond to the following two questions:*

What have you done to prepare yourself to re-enter academia?

Describe how you will balance school work with your other responsibilities.

*All applicants, please read the following statement, sign, and date:*

I hereby affirm that all information supplied on this application is complete and accurate. It is my understanding that I will not be considered for admission to this program until I have submitted all credentials specified.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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Arkansas State University - Jonesboro  
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P.O. Box 910  
State University, AR 72467  
Arkansas State University - Jonesboro**

**College of Nursing & Health Professions  
Criminal Background Check Acknowledgement**

Student name: \_\_\_\_\_

I understand that criminal background checks will occur as part of my professional education at ASU. I understand that I need a social security number in order to undergo a criminal background check. Evidence of a previous charge or conviction of a felony/misdemeanor on my record may affect my progress in this program. While the faculty cannot realistically determine whether this will have any future impact on my ability to work in my profession, I do understand that the following issues could arise during my time as a student or as a graduate of the program.

1. Certain rotation sites could deny me access for rotation.
2. Hospitals or other health care institutions could refuse to allow me access for a clinical experience.
3. The above two issues could make it impossible for me to complete the clinical portion of my education and therefore not graduate.
4. Upon graduation, a state licensing agency could refuse to grant me a license.
5. As a licensed professional, certain health care institutions could refuse to grant me privileges.
6. There could be other, unforeseen, impacts of this incident on my ability to practice as a professional.

Student signature: \_\_\_\_\_

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

CLINICAL LABORATORY SCIENCES DEPARTMENT

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**REFERENCE EVALUATION OF CLINICAL LABORATORY SCIENCE APPLICANT**

**To Be Completed By Applicant:**

**Applicant's Name:** \_\_\_\_\_  
Last First Middle

Please check one of the following two release statements:

\_\_\_\_\_ Letter is confidential. I waive my rights of access under the Family Education Rights and Privacy Act of 1974, or other laws, regulations or policies. (Applicants NOT permitted to read evaluation.)

\_\_\_\_\_ Letter is NOT confidential. I do not waive my right of access. (Applicants ARE permitted to read evaluation.)

\_\_\_\_\_  
(Applicant's Signature)

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**To the evaluator:** The above-named applicant to Arkansas State University Clinical Laboratory Sciences Department is requesting a reference evaluation from you. If you do not know the applicant well enough to complete the following form, please return it to him/her. It is more helpful for the applicant and the Admissions Committee to have a recommendation from someone who knows him or her well, so please consider this carefully.

Reference evaluations play an important role in our selection process, and we greatly appreciate your thoughtful and frank appraisal of the applicant. The enclosed form has been designed to obtain the specific information we desire, therefore it is important that you utilize it primarily in your evaluation and submit additional letters ONLY if you need to present information not covered on the form.

Applicants have been notified that evaluation materials will be considered confidential unless they specifically state that their right of access has not been waived. The applicant has indicated above whether he/she waives the right of access to this information.

After completing this form, please place it in an envelope, seal the envelope and sign it across the seal. Then return it to the applicant who will forward it to the Clinical Laboratory Science Program Director, unopened, with the remaining application materials. This procedure allows the applicant to know that he/she has all necessary documents to submit a complete application packet by our deadline. Please confirm with the applicant the due date to him/her for this letter of evaluation. Thank you for your assistance.

**Evaluator's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please print name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Organization** \_\_\_\_\_

**Evaluator's Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

- I. Compared to other individuals of college age, rate to what extent the applicant appears to possess the attributes listed below. Please use the following scale:  
**0 = not observed, 1 = lower 50% (below average), 2 = in the 50% (average), 3 = upper 30% (above average), 4 = upper 20% (outstanding individual), 5 = upper 10% (exceptional individual)**

|    |  |   |   |   |   |   |   |
|----|--|---|---|---|---|---|---|
| A. | Ability to communicate effectively (oral, include poise)             | 0 | 1 | 2 | 3 | 4 | 5 |
| B. | Ability to communicate effectively (written, include clarity)        | 0 | 1 | 2 | 3 | 4 | 5 |
| C. | Ability to work with others (interpersonal skills)                   | 0 | 1 | 2 | 3 | 4 | 5 |
| D. | Evidence of psychological maturity and stability                     | 0 | 1 | 2 | 3 | 4 | 5 |
| E. | Ability to accept criticism and grow with life experience            | 0 | 1 | 2 | 3 | 4 | 5 |
| F. | Interest in and knowledge of clinical laboratory science             | 0 | 1 | 2 | 3 | 4 | 5 |
| G. | Potential for success in the field of clinical laboratory science    | 0 | 1 | 2 | 3 | 4 | 5 |
| H. | Potential as a leader  | 0 | 1 | 2 | 3 | 4 | 5 |
| I. | Reliability to complete assignments/jobs accurately and on time      | 0 | 1 | 2 | 3 | 4 | 5 |
| J. | Breadth of general knowledge, intellectual ability, logical thinking | 0 | 1 | 2 | 3 | 4 | 5 |
| L. | Interest in independent inquiry, ingenuity, originality, imagination | 0 | 1 | 2 | 3 | 4 | 5 |
| M. | Personal qualities (sincerity, initiative, enthusiasm, patience)     | 0 | 1 | 2 | 3 | 4 | 5 |

- II. Using the same rating scale as before, please indicate the strength of your overall endorsement and your expectations of performance by the applicant for our clinical laboratory science program:

1 = Below Average (Lower 50%)                       4 = Outstanding (Upper 20%)  
 2 = Average (in the 50%)                               5 = Exceptional (Upper 10%)  
 3 = Above Average (Upper 30%)

- III. Indicate in what capacity you have been associated with the applicant:

as a student in a lecture course  
 as a student in laboratory courses  
 as a student engaged in research/independent study under my direction  
 as my advisee  
 as an employee (describe) \_\_\_\_\_  
 other (describe) \_\_\_\_\_

- IV. How long have you known the applicant? \_\_\_\_\_

- V. How well do you know the applicant? A.  Very Well B.  Fairly Well C.  Slightly

- VI. What would be your attitude toward having this applicant in a responsible position under your direction?

A.  Definitely would want him/her.                      D.  Would prefer not to have him/her.  
 B.  Would want him/her.                                      E.  Definitely would not want him/her.  
 C.  Would be satisfied to have him/her.                      F.  Unable to judge.

- VII. General Comments: You may use the space below or on an additional sheet of paper to make further comments about the applicant if you so desire.

CLINICAL LABORATORY SCIENCES DEPARTMENT

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