



Arrowhead Regional Medical Center  
School of Radiologic Technology  
400 North Pepper Avenue  
Colton, CA 92324-1817  
(909) 580-4349  
E-mail: [huynhm@armc.sbcounty.gov](mailto:huynhm@armc.sbcounty.gov)

**Dear Applicant,**

The following is the **application** to Arrowhead Regional Medical Center School of Radiologic Technology. This program is affiliated with Crafton Hills College. All graduates will receive an Associate of Science Degree from Crafton Hills College

The applicant shall:

- 1) **Submit** a completed application package and \$50.00 fee
- 2) **Provide** official College Transcripts to Crafton Hills College, if attended other institutions
- 3) **Provide** unofficial College Transcripts with application package
- 4) **Complete** the program prerequisites with a minimum **2.7 GPA** plus complete all General Education Courses for AA or AS degree prior to the April 1<sup>st</sup> deadline.
- 5) **Submit** a completed general education form titled: **Crafton Hills College AA/AS Degree**.
- 6) Have a Crafton Hills College counselor complete and sign **Radiography Program Prerequisites Checklist**.

Application can be sent via email [HuynhM@armc.sbcounty.gov](mailto:HuynhM@armc.sbcounty.gov) by April 1<sup>st</sup>.

The application fee is **\$50.00** please Venmo **Melissa-Huynh-14**  
The application **fee** is **non-refundable**.

Sincerely,

*Melissa Huynh*

Melissa Huynh, MSRS, RT(R) (CT) (ARRT), CRT  
Program Director



## APPLICATION FOR ADMISSION

Print Name: \_\_\_\_\_

Maiden name: \_\_\_\_\_ Last 4 digits of SSN: XXX-XX-\_\_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Other contact number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

Have you ever applied to this radiography program? \_\_\_\_\_ If yes, what year? \_\_\_\_\_

How did you learn about this Program? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **EDUCATION**

College: \_\_\_\_\_  
Name Location Degree (yes/no)

College: \_\_\_\_\_  
Name Location Degree (yes/no)

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

\_\_\_\_\_

\_\_\_\_\_

**EXPERIENCE:** Give your employment history for the last three years, *including relevant volunteer experience*. If additional space is needed, add an attachment.

Institution: \_\_\_\_\_

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ Supervisor: \_\_\_\_\_

How Long at this Job? \_\_\_\_\_ Duties \_\_\_\_\_

Institution: \_\_\_\_\_

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ Supervisor: \_\_\_\_\_

How Long at this Job? \_\_\_\_\_ Duties \_\_\_\_\_

Institution: \_\_\_\_\_

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ Supervisor: \_\_\_\_\_

How Long at this Job? \_\_\_\_\_ Duties \_\_\_\_\_

**REFERENCES:** List three personal references (other than relatives) who have known you for at least two years.

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Note: You may include a resume or personal reference letter(s)  
With this application, however they are not required.

Degree  Yes  No  
 If Yes, Type of Degree \_\_\_\_\_  
 Institution \_\_\_\_\_

**Radiography Program Prerequisites Checklist**

To be completed by CHC Counselor

Course	Year Completed	Units	Letter Grade	MET	IP	NEED
English Composition						
Computer Literacy						
Intermediate Algebra						
Anatomy						
Physiology						
Medical Terminology						
RADIOL 090 -Survey of Radiologic Technology						

COUNSELOR \_\_\_\_\_ DATE \_\_\_\_\_

**Note:**

The applicant shall:

1. Submit a completed application package and \$50.00 fee
2. Provide **official** College Transcripts to Crafton Hills College, if attended other institutions
3. Provide **unofficial** College Transcripts with application package
4. Complete the college courses listed above with minimum 2.7 GPA, plus complete all General Education Courses for AA or AS degree **prior** to the April 1<sup>st</sup> deadline.
5. Submit a completed general education form titled: Crafton Hills College AA/AS Degree
6. Have a college counselor complete and sign Radiography Program Prerequisites Checklist

**A photograph is preferred, but not required.**

