



Hillsborough Community College
Dale Mabry Campus
Health Sciences Admissions

Deadline
Fall term – August start
MRI – April 15

MAGNETIC RESONANCE IMAGING PROGRAM ADDENDUM

Student name: _____ Student ID # _____
Last Name First Name MI

- A. Are you currently employed as an Imaging Technologist or Radiation Technologist? ____ Yes ____ No

If Yes, Name of Agency: _____

If No, explain _____

Do you have experience working with Magnetic Resonance Imaging? How many years? Explain? _____

- B. Please identify all the days and times that you are available for *clinical experience*. Clinical hours are offered 24/7. Please include midnight hours if that is an option.

Days of Week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Student hours of availability							

IMPORTANT – The MRI Program Faculty will work to place each applicant in a clinical rotation based upon the choices of locations, days, and shifts listed above. Applicants need to list all locations, times, and days that they will be available for clinical experience. Once clinical assignments have been made, a change in availability by a student may result in the student losing their seat in the program..

- C. Select which county or counties you would be able to travel to for clinical sites:

☐ Hillsborough ☐ Polk ☐ Pinellas ☐ Pasco

- D. Specific program requirements that need to be included with the application packet, or received prior or by the program deadline:

1. Applicants with a complete application are ranked by their ATI TEAS test scores and the overall GPA is the tie-breaker.
2. The program requires a student has a minimum of a 2.0 overall GPA.
3. Copy of valid National Certification from the ARRT or NMTCB (Radiography, Nuclear Medicine, and/or Radiation Therapy).
4. Copy of valid Florida Certified Radiologic Technologist certification/license.
5. Copy of valid CPR certification by the American Heart Association.
6. Proof of good standing form – **ONLY** applies to students currently enrolled in HCC's Radiography, Radiation Therapy or Nuclear Medicine Programs and express intent to comply with board certification and Florida Licensure **before the start** of the Program. The student that is unable to provide proof of National Certification by the ARRT or NMTCB before or by the program orientation will *forfeit* his/her seat in the program.
7. Employer support letter – A letter from your supervisor in acknowledgement that you will enroll in the MRI Program, and that you will need to complete at least 16 hours of clinical.

Student signature

Date

HCC Hawkmail

Contact phone number