

# Internal Transfer Application Medical Imaging Degree program

Complete the following application and contact the Allied Health Coordinator to set up an interview appointment. (Dr. Kipe-Nolt: jkipenol@bloomu.edu, 389-4319, 269 HSC). Students must have a minimum of: a 2.5 overall GPA, grades of C in any core courses (\*) that have been taken (grades of B in any repeated core course). Students who transferred to BU are not eligible.

**Name:** \_\_\_\_\_ **BU email:** \_\_\_\_\_ **@ ID #** \_\_\_\_\_

Number of credits completed at BU \_\_\_\_\_ Cumulative GPA \_\_\_\_\_

Total number of college credits completed \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

If you have taken any of the following courses note semester and grade

Course	Semester Taken	Grade Earned
Concepts of Biology 1* (Biology 114)		
Anatomy & Physiology I* (Biology 173)		
Anatomy & Physiology II* (Biology 174)		
Physics for Health Sciences * / Intro Physics 1 (Physics 107/111)		
Math for Health Science*, College Algebra, or Pre-Calculus		
Computer Science / Info & Technology Management		
Introductory Chemistry (Chemistry 101)		
Other Science Courses		
University Course # Course Name (if other than BU)		
_____		
_____		
_____		
_____		
_____		

Have you done any shadowing of medical imaging professionals? Explain. Note: A shadowing experience is required for admission into the major.

What attracts you to the Medical Imaging field?

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What characteristics do you have that you believe will make you a good technologist?

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The medical imaging degree program involves transferring into a hospital based clinical program. Admission into a clinical program is not automatic or guaranteed; it is very competitive and requires high scholastic achievement, knowledge of the profession, and good interpersonal skills.

List at least 5 hospital based certificate programs you may be interested in applying to:  
The following websites can be reviewed for listings of accredited programs:

in radiography – <http://www.jrcert.org>

in sonography - <http://www.caahep.org>

in nuclear medicine - <http://www.jrcnmt.org>


**Sign this form and bring it with you to your interview**

Signature of Transfer Student Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

OFFICE USE:

Registrar: This student \_\_\_\_\_ has been accepted for transfer into the Medical Imaging degree program.

\_\_\_\_\_  
Allied Health Coordinator

\_\_\_\_\_  
Date