

COMMITTEE ON MEDICAL TECHNOLOGY EDUCATION

Renee Rydell, MBA, MS, MT(ASCP)
COMTE Coordinator
Sanford USD Medical Center
1305 W. 18th Street
Sioux Falls, SD 57117-5039

TO: Prospective Clinical Laboratory Science/Medical Technology Students
FROM: Committee on Medical Technology Education

Application for admission to any hospital-based Clinical Laboratory Science/Medical Technology Program listed on the enclosed sheet is made through the Committee on Medical Technology Education. Included with this letter are the forms to be completed for application. A resume is encouraged but not required.

Please note the deadline stated on the application form is October 1. Applications postmarked after October 1 will not be considered. Applicants must have a GPA of at least 2.80 to be considered for evaluation.

References: Three reference forms are required. These should be delivered by you, to the three persons you have selected for reference. At least two of these people must be college science professors or Clinical Laboratory Science Advisors. The third reference must be from a former/current employer. Please select persons with whom you have had sufficient contact to make a meaningful reference possible. Request that they return the completed form to the COMTE Coordinator by **October 15**.

Interview: A single interview is requested of each applicant. You will be contacted by your college advisor or the COMTE Coordinator to schedule this interview. If possible, you will be interviewed by a representative of your first choice hospital. If you would like an interview with a second person, you may make arrangements for it with the hospital of your choice. The interview would be conducted at the hospital site.

Applications : Applications will be processed in the following manner: After the application, transcript, references, and interview material have been received, each candidate will be evaluated and rated by members of the Committee, with ratings established according to a predetermined grid. This grid is designed to give different weights to various aspects of the application data. Your college advisor has a copy of this grid. After completion of the review, the applicants will be ranked and matched with a Clinical Laboratory Science Program, based on the indicated preference for attendance at that institution and the acceptance decision of the Program. If any questions arise about the application process, you may contact the COMTE Coordinator or a Program Director at one of the participating hospital programs.

****Mailing of Applications:** If you have completed the application on the computer, print, sign, and mail to the COMTE Coordinator.

COMMITTEE ON MEDICAL TECHNOLOGY EDUCATION

Participating Programs in Clinical Laboratory Science/Medical Technology

Mercy Medical Center-Sioux City

801 5th Street

Sioux City, IA 51101

Dr. Askar Qalbani, Medical Director

*Mary Smith, Education Coordinator

<http://www.mercysiouxcity.com/ProgramsServices/MedicalTechnologyProgram>

712-279-2052

FAX: 712-279-2372

712-279-2371

smithmk@mercyhealth.com

Rapid City Regional Hospital

353 Fairmont Blvd

Rapid City, SD 57701

Dr. Susan Eliason, Medical Director

*Pam Kieffer, Program Director

<http://www.rcrh.org/clsp>

605-719-8080

FAX: 605-719-2205

605-719-8092

pkieffer@rcrh.org

St. Luke's Regional Medical Center

2720 Stone Park Blvd

Sioux City, IA 51104

Dr. James Quesenberry, Medical Director

*Pam Briese, Program Director

<http://www.stlukescollege.org>

712-279-3164

FAX: 712-233-8017

712-279-3967

briesepeg@stlukes.org

Sanford USD Medical Center

1305 W. 18th Street

Sioux Falls, SD 57117-5039

DesiRae Muirheand, MD, Medical Director

*Renee Rydell, Program Director

www.sanfordhealth.org/clsmtprogram

605-333-6440

Fax: 605-333-1532

605-333-7104

rydellr@sanfordhealth.org

COMMITTEE ON MEDICAL TECHNOLOGY EDUCATION
PERSONAL REFERENCE

NAME OF APPLICANT: _____
(First Name) (Middle) (Last)

Applicant's Waiver of Right to Access:

The Family Educational Rights and Privacy Act of 1974, as amended, (PL 93-380), allows a candidate for admission to waive his or her right of access to confidential statements written on his or her behalf if the recommendation is used solely for the purposes of admission and if the candidate, upon request, is notified of the names of all persons making such recommendations on his or her behalf. The Committee on Medical Technology Education does not require that you make such a waiver as a condition for admission. However, under the legislation, you have the option of signing such a waiver as follows:

I hereby voluntarily _____ waive, _____ do not waive my right to examine this confidential evaluation.

Applicant's Signature _____ Date _____

I. How long have you known the applicant? _____
In what capacity have you known the applicant? _____
How well do you know the applicant? _____ Very well _____ Fairly well _____ Slightly

For Questions II to X, please circle the appropriate rating.

II. QUALITY OF PERFORMANCE

5. Requires minimum supervision and completes work accurately and on a timely basis
 - 4.
 3. Requires some supervision and completes work accurately most of the time
 - 2.
 1. Needs direct supervision to correct frequent errors
- NA Unable to evaluate

III. DEPENDABILITY/ATTENDANCE

5. Always punctual, very conscientious and dependable; minimal absenteeism
 - 4.
 3. Usually punctual; absenteeism average/acceptable; usually reliable
 - 2.
 1. Poor in punctuality; excessive absenteeism; unreliable
- NA Unable to evaluate

IV. INITIATIVE/COOPERATION

5. Energetic, enthusiastic; a self-starter; performs all tasks willingly and without complaint
 - 4.
 3. Average enthusiasm; sometimes needs encouragement; does only what is assigned
 - 2.
 1. Does just enough to get by or seldom finishes a task; lazy; uncooperative
- NA Unable to evaluate

V. PERSONAL APPEARANCE

5. Displays a professional demeanor; dresses appropriately for the occasion
 - 4.
 3. Generally neat and clean, somewhat more casual than preferred
 - 2.
 1. Dresses inappropriately; hygiene needs improvement
- NA Unable to evaluate

VI. STABILITY/ACCEPTANCE OF CRITICISM

- 5. Tactful, even-tempered, tolerates pressure and accepts constructive criticism well
- 4.
- 3. Sometimes frustrated and confused; usually accepts constructive criticism well
- 2.
- 1. Has difficulty under stress; loses temper, especially when offered constructive criticism
- NA Unable to evaluate

VII. DECISION-MAKING ABILITY

- 5. Makes decisions quickly and intelligently after evaluating information
- 4.
- 3. Usually makes the best decision after some thought; sometimes uncertain
- 2.
- 1. Unable to set priorities; often changes mind; unsure; makes poor choices
- NA Unable to evaluate

VIII. COMMUNICATION SKILLS

- 5. Communicates well with others; outgoing, positive attitude
- 4.
- 3. Hesitant and sometimes uncomfortable in communicating with others
- 2.
- 1. Shy, very reserved; avoids meeting and interacting with others
- NA Unable to evaluate

IX. HONESTY/INTEGRITY

- 5. Above reproach; truthful; readily admits mistakes and corrects them, or seeks help
- 4.
- 3. Usually admits mistakes; generally seeks help to correct them
- 2.
- 1. Hides errors or blames them on others; not trustworthy; would probably cheat on an exam
- NA Unable to evaluate

X. IF YOU WERE RESPONSIBLE FOR ACCEPTING/HIRING THIS APPLICANT, YOU

- 5. Would definitely hire or accept
- 4. Would probably hire or accept
- 3. Would hire or accept with reservations
- 2. Would hire or accept if only the last resort
- 1. Would not hire or accept

XI. NARRATIVE (NOT REQUIRED BUT VERY MUCH APPRECIATED)

The Admissions Committee would appreciate any other comments regarding the character, ability or the background of this applicant, or specific reasons why you have judged him/her as you have. You may include an extra page for your comments. Thank you.

EVALUATOR

Signature: _____ Title/Occupation: _____
Address: _____ Date: _____

PLEASE RETURN THIS FORM BY OCTOBER 15 TO

Renee Rydell, MBA, MS, MT(ASCP)
COMTE Coordinator
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