

Application for Admission to the Hennepin Healthcare Phlebotomy Technician Program



Phlebotomy Technician Program Application Instructions

The application process involves submission of a packet of materials. These materials will be evaluated by the HCMC Lab Education Team and students who meet eligibility requirements will be offered interviews for the available seats. Students are selected using a point system based on information contained in the application, GPA, biographical sketch, and the interview.

APPLICATION DUE DATES

The Phlebotomy Technician program accepts students two times each year.

- The application deadline for students wishing to enroll for the **January start date is November 15.**
- The application deadline for students wishing to enroll for the **April start date is February 15.**
- The application deadline for students wishing to enroll for the **October start date is August 15.**

APPLICATION PACKET CHECKLIST

- ☐ Read Instructions carefully (*pages 1-2*)
- ☐ Complete application form (*pages 3-4*)
- ☐ Review Technical Standards (*pages 5-6*)
- ☐ Complete Signature form (*page 7*)
- ☐ Include biographical sketch (*see instructions below*)
- ☐ Request 2 Letters of Recommendation (*use pages 8-10 – Letter of Recommendation form*)
- ☐ Request transcripts from most recent school attended or GED (*see instructions below*)

APPLICATION PACKET INSTRUCTIONS

- All pages of the application must be filled out completely.
- Official transcripts from the most recent school attended. This can be either college or high school transcripts. Official means that the transcripts are sent to the Program Director directly from the college or High school or are delivered in an envelope sealed by the school. GED transcripts/results are acceptable also. Students with a cumulative **GPA of 2.5 or higher** to given precedence for admission.
- Biographical sketch must be included. Prepare and attach a brief biographical sketch that includes your reasons for wanting to enter the phlebotomy technician program, your goals, what you feel you can contribute to the profession, what personal positive/negative qualities you feel would be an asset/detriment to you in this profession, and what reservations, if any, you have about the healthcare field. (maximum - 400 words).

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- **Signature page.** Must be signed by the student acknowledging and agreeing to the 4 statements found on that page.
- **Two or three recommendation forms** must be completed by instructors, work supervisors, or volunteer supervisors. Distribute the **Letter of Recommendation** form at the end of the application. Ask that they be mailed or emailed directly to the Hennepin Healthcare Phlebotomy Technician Program Director at the address on the bottom of the page.

Return all documents to the Phlebotomy Program Director at:

By mail: **Lynn Poth**
 Clinical Laboratories, P4
 Hennepin Healthcare - HCMC
 701 Park Avenue
 Minneapolis, MN 55415

By email: **Lynn.poth@hcmcd.org**

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Please type or print clearly

Date: _____

Application Type:

☐ January start – due November 15

☐ April start – due February 15

☐ October start – due August 15

Applicant Information

Name _____
(last) (first) (middle) (former, if any appear on records)

*Provide information that will allow us to contact you over the next six months.

Address: _____
(street) (city/state) (zip code)

Home phone: () _____ Social security number: ***-**-____ (Last 4 digits only)

Cell phone: () _____ Email address: _____

Qualifications

1. **Education:** Contact the last academic institution that you attended (college, trade school, or high school) and request that your official transcripts be sent directly to the Program Director (name/address at end of application).

	Name and location of institution	Dates attended. (From – To)	Quarter or semester hours completed	Major, degree, or certificate
1				
2				
3				
4				

2. **Work Experience:** List previous work experience within the past four years

	Company	Position held	Dates of Employment	Healthcare related?
1				<input type="checkbox"/> Yes <input type="checkbox"/> No
2				<input type="checkbox"/> Yes <input type="checkbox"/> No
3				<input type="checkbox"/> Yes <input type="checkbox"/> No

May we contact your previous employers? Yes ☐ No ☐

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Letters of Recommendation

List the people to whom you have distributed the attached Letter of Recommendation forms. (At least two must be received from instructors or employers.) ***References must be sealed or mailed by the person writing the reference.***

	Name	Position/Title	Phone number
1			
2			
3			

NOTICE: The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C § 1232g; 34 CFR Part 99) specified that students have the right to inspect and review their education records including recommendations within 45 days of the date the Hennepin Healthcare MLS Program receives a request for access.

This law also permits you to sign a waiver relinquishing your right to inspect letters of recommendation. **Your signature in the Applicants Waiver of Right to Inspect References box below this notice constitutes a waiver. No signature means you have the right to inspect the recommendations secured from the above references.**

Applicants Waiver of right to inspect references:

Printed name

Signature

Date

Finances

Tuition is \$1600.00 plus approximately \$80.00 for the textbook. \$880.00 must be paid by the first day of class, the final \$800.00 must be paid by week 4 of the program. Failure to pay amounts due will be cause for termination of your program and forfeiture of all amounts previously paid. The refund/cancellation policy is available on the website.

Are you prepared to meet the expenses of the program costs, as discussed in the program information? **Yes** ☐ **No** ☐

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Technical Standards

Technical Standards represent the essential non-academic requirements of the program. Therefore, all applicants would be expected to be able to do the following upon completion of the Program requirements:

1. Perform phlebotomy related skills.
2. Perform specified laboratory procedures that require manual dexterity.
3. Prepare blood films for clinical interpretation.
4. Read, understand, and perform tasks from written procedures.
5. Distinguish color changes on indicators.
6. Follow Standard Precautions at all times to decrease risk to the individual.
7. Follow safety guidelines to protect the individual.
8. Follow regulations regarding patient confidentiality.
9. Communicate with patients.

The positions available in the field of phlebotomy may require all combinations of the following physical, sensory, and environmental conditions:

Key: **Rare** = Less than once or twice per week
 Frequent = Total of 2.5-5.5 hours per day

Occasional = 0-2.5 hours per day
Constant = >5.5 hours per day

RARE:

Exposure to radiation (Dependent upon type of procedures)
Toxic/caustic chemical exposure
Fumes/Odors/Noxious smells from various types of specimens

OCCASIONAL:

Carrying less than ten pounds	
Climbing stairs	Stooping/bending
Reaching below shoulder	Far Vision (>20+ feet)
Simple grasping	Pushing/Pulling

FREQUENTLY:

Walking	
Standing	Sitting
Hand-arm controls	Static neck positions
Talking to co-workers/ or on telephone	Hearing oral information over telephone
Fingering	Carrying negligible amounts of weight
Keying/typing/computer screen navigation	
Fine manipulation	
Writing	

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CONSTANT:

Blood Borne Pathogen Exposure - Standard Precautions are followed to decrease risk and protect the individual.

Seeing

- Near Vision (Reading 20 inches or less)
- Depth Perception
- Color Vision

The following work situation factors may be present:

- Hygiene/appearance demands
- Possible shift work (dependent upon position)
- Customer/public contact
- Reading
- Writing
- Mathematics
- Attentiveness duration - maintaining alertness
- Attentiveness intensity - concentration
- Short term memory
- Long term memory
- Working under specific instructions (No independent action or judgement)
- Ability to problem solve
- Transferring knowledge to unique situations
- Performing multiple tasks concurrently
- Attaining precise set limits, tolerance, and standards (precision)
- Working under time constraints
- Perceive pertinent detail in objects, make visual comparisons and discriminations

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Signature Form

1. I understand that upon successful completion of the course of study, I will be eligible to take a nationally recognized certifying examination.
2. I acknowledge that the information I have supplied in this application form is correct to the best of my knowledge and understand that any falsification of information on this form may be cause for rejection as an applicant. I understand that this information is subject to verification.
3. I authorize the director of the hospital phlebotomy technician program to verify my employment and academic history and release them from any liability in connection with this information.
4. I have read the **Technical Standards** (non-academic requirements) and fully understand them. Program representatives have answered any questions that I have concerning them, and how they apply to me, to my satisfaction. It is my belief that I can satisfy each of the Technical Standards based on my existing skills and abilities, or using corrective devices.

I, _____ have read, understand, and agree to the 4 statements above.
(Print name)

(Signature)

DATE _____

Return this signature sheet along with the Phlebotomy Technician application form to the Phlebotomy Program Director at:

By mail: **Lynn Poth**
 Clinical Laboratories, P4
 Hennepin Healthcare - HCMC
 701 Park Avenue
 Minneapolis, MN 55415

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Letter of Recommendation

NAME OF APPLICANT _____
Last First Middle Initial

How long have you known the applicant? _____ (Minimum of 3 months)

In what capacity is the applicant known to you?

1. _____ employee
2. _____ student
3. _____ other (please specify) _____

INSTRUCTIONS: Based on your knowledge of the applicant, select one response for each item by checking or filling in the circle.

ITEM	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
PUNCTUALITY: Would be on time for classes, work, or other events.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
INTEGRITY: Would report errors, check a result, assignment, or problem without being told to, etc...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ATTENTION TO RULES AND REGULATIONS: Follows rules without being reminded or prodded into doing so.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
COMMUNICATION: Communicates well verbally and in writing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
INITIATIVE: Looks for things to do. Does extra reading. Tries to find solutions to problems. Shows leadership abilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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ITEM	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
EMOTIONAL MATURITY: Shows good judgement, is mature and self-reliant.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
RESPONSIBILITY: Accepts responsibility. Completes assigned tasks on time. Is orderly and neat.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ABILITY TO FOLLOW INSTRUCTIONS AT WORK OR SCHOOL: Listens to or reads instructions carefully. Good attention to detail.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
QUALITY OF WORK AREA, RECORDS, OR REPORTS: Work area is orderly and uncluttered. Records are neat, legible, and understandable. Reports are neat and correctly written.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ORGANIZATION IN LAB WORK, ASSIGNMENTS, OR CUSTOMER RELATIONSHIPS: Very efficient and well organized.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SPEED IN COMPLETION OF WORK TASKS, LAB WORK, OR ASSIGNMENTS: Works quickly without loss of accuracy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
QUALITY OF WORK WITH CONSIDERATION TO NEATNESS AND ACCURACY REGARDLESS OF VOLUME: Work is accurate and complete with no spoilage or waste.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
COOPERATION AND ATTITUDE TOWARD WORK, OTHER STUDENTS, AND EMPLOYERS: Shows ability to work with others. Goes out of the way to cooperate. Does not have to be asked. Adapts to situations cheerfully. Thoughtful of others.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
DEPENDABILITY: 100% dependable on the job and conscientious. Can be trusted to work alone without supervision.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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ITEM	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
PHYSICAL DEXTERITY (Especially hands): Markedly agile with good control	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<p><i>While the following categories will not be applicable for evaluation by all people completing this form, if you have observed the student in any of the following capacities, it would be beneficial for us to review your comments.</i></p>					
ABILITY TO WORK UNDER PRESSURE: Works carefully and calmly in an organized manner.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
JOB KNOWLEDGE AND VERSATILITY: Thorough grasp of the job and more. Able to work out own problems that arise.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
REACTION TO UNPLEASANT SITUATIONS: Actively seeks solutions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

COMMENTS:

EVALUATED BY: _____

Printed name
Title
Phone number

Place of Employment
Department

Signature
Date