

Checklist: The following items are required to complete your admission file:

- | | |
|---|--|
| <input type="checkbox"/> Official High School Transcript or GED | <input type="checkbox"/> Typed Summary |
| <input type="checkbox"/> ACT/SAT Scores (if applicable) | <input type="checkbox"/> \$50.00 Application Fee |
| <input type="checkbox"/> Official College Transcripts (if applicable) | |

Official transcripts from high school, colleges, and/or technical schools are required for admission and should be sent directly from the respective school to the Admissions Office at St. Luke's College. Transcripts are used for academic evaluation and become the property of St. Luke's College and will not be reproduced, reissued or returned.

I certify that the above information is true and complete to the best of my knowledge.

Signature of Applicant

Date



Mail this form and \$50 application fee to:
St. Luke's College
2720 Stone Park Blvd.
Sioux City, IA 51104
Attn: Admissions

Apply online:
www.stlukescollege.edu

Please check one of the following:

- Nursing, Associate Degree
- Radiologic Technology, Associate Degree
- Respiratory Care, Associate Degree
- Phlebotomy, Certificate

Advanced Radiology Specialties:
(Registry No. _____)

Check one:

- Computed Tomography (CT)
- Ultrasound
- Magnetic Resonance Imaging (MRI)
- Mammography

Applicant Information:

Applicant Name:

Date:

Desired Year of Enrollment:

Semester Requesting Enrollment: Fall _____ Spring _____ Summer _____

Student Application

Personal Information		
(First)	(Middle)	(Last Name/Include former last names)
Name:		
Current Address:		
City:	State:	Zip:
Permanent Address:		
City:	State:	Zip:
Date of Birth (optional):	Gender (optional): <input type="checkbox"/> Female <input type="checkbox"/> Male	
Home Telephone:	Cellular Telephone:	
E-Mail Address:		
Social Security Number:		
U.S. Citizenship: <input type="checkbox"/> Yes <input type="checkbox"/> No	Permanent U.S. Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Country of Citizenship:	Native Language:	
Alien Registration No.:		
Have you ever been convicted of a crime in this state or any other? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have a record of convicted child or dependent adult abuse? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you currently incarcerated? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been excluded from or served with notice of exclusion from any government programs, i.e. Medicare, Medicaid, financial aid, loan default? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Education			
Name of School	City and State	Dates of Attendance	Diploma, degree, or certification
High School			
College			
College			
College			
Have you taken the ACT or SAT? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Employment History				
Employer	City and State	Starting Date	Departure Date	Job Title

Admission	
Have you previously applied for admission to St. Luke's College? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Please submit a typed summary addressing each of the items below. (Attach typed sheets to this application).	
<ul style="list-style-type: none"> A. Academic distinctions/honors. B. Leadership and community activities C. Reasons for selecting this career. D. Reasons for selecting St. Luke's college. E. Plans and aspirations for the future. F. Have you job shadowed in any health related field? Please explain. 	
How did you hear about St. Luke's College? (Please check all that apply)	
<input type="checkbox"/> College <input type="checkbox"/> College/Career Fair <input type="checkbox"/> Internet <input type="checkbox"/> Advertisement <input type="checkbox"/> Guidance Counselor <input type="checkbox"/> Alumni <input type="checkbox"/> Faculty/Staff <input type="checkbox"/> Friends/Family <input type="checkbox"/> Other (please specify)	

Iowa Administrative Code 655-2.11(152) requires a nursing program to initiate criminal history and dependent adult abuse record checks of students and prospective students to ensure a student's ability to complete the clinical education component of the program.

Iowa Administrative Code 147.3 requires all individuals seeking nursing licensure by initial examination or endorsement who have criminal conviction(s), other than a minor traffic violation, to submit copy(s) of the sentencing order(s) when submitting application materials.

Iowa Administrative Code 655-2.8(5) states that students and prospective students (a) who have been denied licensure by the board, (b) whose license is currently suspended, surrendered or revoked in any U.S. jurisdiction or (c) whose license/registration is currently suspended, surrendered or evoked in another country due to disciplinary action may not take the clinical component of nursing courses. Students must notify the Department Chair, Nursing Education if they are in violation of this code.

St. Luke's college does not discriminate on the basis of race, color, creed, marital status, gender, age, national and ethnic origin or qualified disability and is in compliance with the Family Educational Rights and Privacy Act of 1974 as amended as well as the Drug Free Workplace Act of 1988.

Note: Licensing boards consider past felony convictions of applicants for licensure. A prior conviction does not automatically bar an individual from eligibility for licensure. Documentation may need to be presented.