

March 25, 2008

Thank you for expressing interest in the Surgical Technology program at Apollo. Each class is filled on a “first come-first served” basis from those who successfully complete the application process. We begin accepting applications September 1st for the following school year.

Each fall we start the application process for students to come into our class, which is 10 months in length. The program begins the first week of September and completes in the middle of June. **There are three requirements that all applicants must meet before they are accepted into the program.**

- All applicants are required to take *and successfully pass* the HOBET (Health Occupations Basic Entrance Test).
- After successfully passing the HOBET, applicants will have an interview with the program coordinator. If the results of the interview are positive, applicants will proceed to the final pre-entrance requirement.
- All applicants are required to take the Health Careers Assessment test (Work Keys).

After successfully completing these three steps, applicants are accepted into the program for the coming year.

If you are interested in the program, please begin the application process upon the receipt of these materials. We encourage you to complete the application process as soon as possible to determine whether you are accepted into the Surgical Technology Program. If it should happen that you are accepted, but are placed on a waiting list, please understand that changes do occur and you would be notified when an opening develops.

Again, thank you for your interest in our program.

Sincerely,

Barbara Cook, RN, BSN, CNOR
Surgical Technology Coordinator/Instructor

Read the following BEFORE you sign. Your signature will indicate that you have read and understand.
If you do not understand, please ask for an explanation BEFORE you sign.

The Surgical Technology Program is a CAAHEP (Commission on Accreditation of Allied Health Education Programs) accredited program. This means that upon successful completion of the program, you are eligible to take the national certification exam for surgical technologists. Although, all employers do not require certification, in most cases it is preferable.

(Signature of Applicant)

(Date)

Read the following BEFORE you sign. Your signature will indicate that you have read and understand.
If you do not understand, please ask for an explanation BEFORE you sign.

I, _____, understand that

1. This is only an application and does NOT assure me of enrollment into the school.
2. All factors of the entrance requirements are reviewed by an Admission Committee
3. I will accept the decision of the admission committee
4. If I am enrolled the school has the right to ask for my resignation at any time, if I fail scholastically, or do not meet the other standards of the program.

(Signature of Applicant)

(Date)

Admission Policy

It is the policy of Apollo Career Center that education activities, employment, practices, programs, and services are offered without regard to race, color, national origin, sex, religion, age or disability.

The admission policy of the Surgical Technology Program assists the Admission Committee to select candidates who will be successful in the program.

The following is the procedure for being accepted as a candidate for the Surgical Technology Program.

1. Request an application packet. The packet contains an application, work, and personal reference forms, request forms for high school or G.E.D. transcript, and one (1) copy of the admission policy. These forms need to be completed and processed as indicated on the enclosed instruction sheet.
2. Submit the application and the application fee of \$30. Applications are reviewed on a first-come, first served basis. There is **NO REFUND** of fees paid in the admission procedure.
3. Request and submit an **OFFICIAL** copy of your high school or equivalency transcript. Those candidates who are in high school at the time of acceptance are tentatively accepted pending receipt and review of the final high school transcript.
4. Required references: Two (2) positive personal references from persons **NOT RELATED** to the applicant and one (1) positive work reference from the current or most recent employer are required. **THE PERSON GIVING THE REFERENCE MUST MAIL references to Apollo. REFERENCES WILL NOT BE ACCEPTED FROM THE APPLICANT. The applicant does NOT have the right to review these confidential materials.**
5. Applicant must take the Health Occupations Basic Entrance Test (HOBET). There is a \$20 fee for the test. Areas of testing are math and reading comprehension. If the applicant is unsuccessful after two attempts, documentation of successful remedial work must be submitted before the third and final test can be schedule. (There is a \$20 fee for each test date.)

Criteria for Being Scheduled for the Pre-Entrance Test:

When ALL of the following items have been submitted to Apollo, you will be notified of a test date:

- Application
- Application fee
- High School Transcript or Transcript of Equivalency
- 2 Positive Personal References
- 1 Positive Work Reference
- 1 Signed copy of Admission Policy (a copy will be retained to you.)

6. If applicants meet all of the above criteria, they will be scheduled for an admission interview.
7. Following the interview, the applicant is required to take the Assessment Test and Work Keys at Apollo Career Center. Results of the assessment test **MUST** show an aptitude for Surgical Technology. This Assessment must be completed prior to acceptance for the Surgical Technology Program. There is no out of pocket fee as the cost is included in the first period tuition payment.

8. The applicant is informed in writing of the decision of the Admission Committee. The decision is based on high school grades or equivalency scores, positive references, interview, and Assessment Test.
9. The applicant is required to have a physical examination, at his/her own expense, prior to starting the Surgical Technology Program. Included will be required diagnostic screening, as well as proof of immunity to identified communicable disease. The applicant must be determined to meet the following demands to safely and accurately carry out the surgical technology duties. These include, but are not limited to:
 - Full range of motion of motion of body joints.
 - Ability to stoop, bend, reach, pull and push
 - Fine motor ability and visual acuity in order to accurately manipulate needles and sutures finer than a human hair
 - Good peripheral vision
 - Ability to stand unassisted for eight continuous hours during a surgical procedure.
 - Ability to move objects weighing up to 60 pounds on a daily basis
 - Ability to maintain composure / adapt under high stress situations
 - Adequate skin integrity-without the presence of open, weeping lesions of the skin.
 - No confirmed latex allergy.**
10. The applicant is required to be currently certified in Basic Cardiac Life Support (Health Care Provider CPR) prior to starting clinicals in the Surgical Technology Program.

I, _____, have read and understand what is required of me to become a candidate for the Surgical Technology Program.

(Signature of Applicant)

(Date)

(Signature of Surgical Technology Program Coordinator)

(Date)

I, _____, hereby give the Faculty of Apollo Career Center permission to review my application materials for the purpose of determining my acceptability as a candidate for the Surgical Technology Program.

(Signature of Applicant)

(Date)

Apollo Career Center
3325 Shawnee Road
Lima, OH 45806-1497

Instructions for Application—Surgical Technology Program

1. Print or type the information requested on the application, including reading, signing, and dating in the areas requested on the second page of the application.
2. Read, sign, and date the enclosed copy of the Admission Policy. Read, sign, and date the release on the second page of the admission policy.
3. Return the completed application and admission policy along with the \$30 application fee to Apollo Career Center, Surgical Technology Program, 3325 Shawnee Road, Lima, OH 45806-1497. Applications will be accepted between September 1st and March 1st.
4. Please complete the following steps that apply to you:
 - a. If you are a high school graduate, complete the form, “Request for High School Transcript” and submit it with any required fee to the school from which you graduated.
 - b. If you have a GED diploma, complete the transcript form from the Ohio Department of Education and submit it with the required fee to the appropriate agency.
 - c. If you obtained a GED in another state, request a transcript from the appropriate agency.
 - d. If you are currently in high school, complete the “Request for High School Transcript” for a current transcript of your grades. You will also need to submit a FINAL transcript to Apollo after your graduation from high school.
5. Complete the top portion on the one (1) work reference for your current or most current employer and the two (2) personal reference forms from persons NOT related to you. Address four (4) envelopes to Apollo Career Center, Surgical Technology Program, 3325 Shawnee Road, Lima, OH 45806-1497. Place the proper postage on each envelope. Give the reference form and envelope to the appropriate reference person. **THESE REFERENCES MUST BE MAILED TO APOLLO DIRECTLY FROM THE REFERENCE PERSON.** References will NOT be accepted from the applicant. The applicant does NOT have the right to review these confidential materials.
6. Pre-Entrance Test
When all of the following have been received, you will be notified of a test date.
 - Application
 - Application fee
 - High school transcript or a Transcript of Equivalency
 - 2 Positive Personal References
 - 1 Positive Work Reference
 - 1 Signed copy of the Admission Policy
7. Apollo will contact you regarding an interview following successful pre-entrance testing.

Request for High School Transcript

Please send an official transcript to:

Apollo Career Center
Surgical Technology
3325 Shawnee Road
Lima, OH 45806-1497

For:

Applicant's Name _____

Year of Graduation _____

Name at Time of Graduation _____

School from which graduated: _____

(Signature)

(Phone #)

(Date)

Apollo Career Center
Surgical Technology
3325 Shawnee Road
Lima, OH 45806-1497
FAX—419-998-2994

WORK REFERENCE

I, _____, give my permission to the business/institution/person identified below as a work reference to provide information to Apollo Career Center. I further realize that any information will remain confidential between the school and the party giving the information.

Signature: _____ Date _____

Name of Business/Institution: _____

Mailing Address _____

The above mention person has identified the above business or institution as a work reference. We would appreciate your assistance in helping us determine acceptability for the surgical technology program.

Employed as _____ from _____ to _____
(position)

Reason for leaving (if not presently employed) _____

Personal appearance: _____

Work Attitudes: _____

Physical & Emotional health: _____

Punctuality & Reliability: _____

If given the opportunity, would you re-hire this individual? YES NO

Comments:

Signature: _____

Position: _____ Phone #: _____

Apollo Career Center
Surgical Technology
3325 Shawnee Road
Lima, OH 45806-1497

PERSONAL REFERENCE

I, _____, give my permission to the person identified below to provide information to Apollo Career Center. I further realize that any information will remain confidential between the school and the party giving the information.

Signature: _____ Date _____

Name of Personal Reference: _____

Address _____
(Number / Street / PO Box/ or RR) (City) (State) (Zip)

The following information will be used to determine acceptability for the surgical technology program. Your assistance is appreciated.

How would you rate the individual on the following traits?

	Excellent	Good	Fair	Poor
Cooperation				
Tact				
Dependable				
Punctual				
Honesty				
Integrity				
Initiative				
Perseverance				
Tolerance				
Poise				
Character				

Does he/she like to work with people? YES NO

How long have you known this person? _____

In what capacity have you known this person? _____

Additional Comments:

Signature: _____ Phone #: _____ Date _____

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Surgical Technology
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Punctual				
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Integrity				
Initiative				
Perseverance				
Tolerance				
Poise				
Character				

Does he/she like to work with people? YES NO

How long have you known this person? _____

In what capacity have you known this person? _____

Additional Comments:

Signature: _____ Phone #: _____ Date _____

Apollo School of Surgical Technology

2008-09 ST Program Calendar

Professional DevelopmentAugust 18th & 19th
(Tentative dates / Attendance Required)

Health Care ProviderSee attached sheet or call Apollo for class schedule
419-998-2972

Surgery Tech Start Date Tuesday, September 2, 2008
End of 1st Schedule Friday, November 15, 2008
2nd Schedule starts Monday, November 17, 2008
Thanksgiving- No School..... Monday - Friday, November 24-28, 2008

Winter Break Starts Monday, December 22, 2008
Classes Resume Monday, January 5, 2009
Martin Luther King Day-No School ... Monday, January 19, 2009
End of 2nd Schedule Friday, January 30, 2009

3rd Schedule starts Monday, February 2, 2009
President's Day-No School Monday, February 16, 2009
Spring break..... Friday, April 10, 2009
End of 3rd schedule Friday, April 10, 2009

4th Schedule starts – classes resume Monday, April 13, 2009
Memorial Day – No School Monday, May 25, 2009
End of 4th Schedule..... Monday, June 15, 2009

Graduation Thursday, June 18th, 2009

March 2008

Dear Surgical Technology Student:

Below is a cost ESTIMATE for your attendance at Apollo's School of Surgical Technology for the 2008-2009 school year.

Dates and fees are subject to change.

Application fee	\$30
HOBET pre-entrance test	\$20
CPR - Health Care Provider	\$70
Physical Exam *	\$70
2 Step Mantoux (TB skin testing)	\$24
Chest x-ray, if skin test positive..	\$100
Hepatitis B Vaccines (series of 3)	\$205 (\$24 if under 18)
2 MMR Vaccines.....	\$120
1 set of Ceil blue scrubs	\$30
White work shoes.....	\$60
	-
ESTIMATED TOTAL	\$729

Estimated total cost for the program will be \$8300.00. This includes books, fees and tuition.

A non-refundable deposit of \$500.00 of the total cost must be paid by July 14th, 2008.

Regular classes for the surgical technology program will begin on Tuesday, Sept. 2, 2008.

Graduation will be on June 18th, 2009.

I hope this will assist you in your financial planning for the program.

Sincerely,

Barbara Cook, RN, CNOR

419-999-5618

barb.cook@apollocc.org

*Immunization documentation of already completed vaccines or documentation of history of disease are accepted and vaccines would not need to be repeated