Please include the following Checklist and information with your Application

(Applicants Name) Date of completed application	
ompleted 2017 RT Application form – completely filled out and includes:	
☐ ECC student ID #	
□ ECC email address	
□ Personal Email Address :	
□ Social Security number : (last 4 digits)	
☐ Send an email to Mrs. Charman to complete the Application within 48 hours of f	iling
application with the counselor – failure to email Director will void application (pg	2)
☐ Photo Identification card: submit a good copy of a current California Driver's License (CDL) or State issued ID card with the application. Poor copies will be returned	
☐ El Camino College Student ID card (if you already have one)- provide a copy	
□ Cover letter and Resume – include with application	
☐ <u>1 Letter of Recommendation</u> —written within <u>2 years</u> from the date of application. (must be signed and dated, or will not be considered)	
☐ (Copies) of Transcripts for all prerequisite courses –	
☐ Supporting Documentation for additional Points — (see instructions-for specific requirent Check all that apply:	nents)
☐ American Veteran (see pg 6)	
☐ Copies of Certificates /Licenses in Health Care related occupations (see pg 7)	
Letters / forms documenting Experience such as (see pg 7)Work/Volunteer hours, Radiology Observations, Community Service, etc.	
PLEASE NOTE – As the final step to your application appointment - you must send an EMAIL to the	

PLEASE NOTE – As the final step to your application appointment - you must send an EMAIL to the PROGRAM DIRECTOR :RadTechDirector@elcamino.edu from BOTH of your email accounts:

Send the Email from your El Camino College Email account, and put your personal email address in the CC line.

Failure to send the email within 48 hours of filing the application with the counselor will VOID your application. Please follow instructions on page 2

FINAL INSTRUCTIONS FOR APPLICANT:

☐ PLEASE NOTE — As the final step to you	r application appoint	ment - you must send an
EMAIL to the PROGRAM DIRECTOR: Mrs	s. Charman : RadTech	Director@elcamino.edu
□ From BOTH of your email accounts:		
→ Send the Email from your El Cam	ino College Email acc	ount, and put your personal
email address in the CC line.		
→ Type the following message:		
SUBJECT LINE: 2017 RT Application		
Include the following information in	•	
My name is		
<u>(name of counselor)</u> to file a comple	eted application for t	he Radiologic Technology
Program		
My contact information is:		
☐ Address:		
□ Phone (Cell or other #)		
☐ Personal Email Account:		
☐ El Camino Email Account		
You will be notified of your ranking via you	ur El Camino email ad	dress by May 15, 2017.
☐ DO NOT SUBMIT any original certificate	es, make <u>copies</u>	
(example: XI Certificate, Military	Service, etc.) Do not	submit W-2 forms
The 2017 application and suppo	orting documents will not	<u>t</u> be returned.

Thank you for your interest in the ECC Radiologic Technology Program