

Please include the following Checklist and information with your Application

(Applicants Name)

Date of completed application

☐ **Completed 2018 RT Application form** – completely filled out and include:

☐ **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 filing application with the counselor – failure to email Director will void application (see bottom of page)**

☐ **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

☐ **2 Letters of Recommendation** –written within **2 years** 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 requirements)

**Check all that apply:**

☐ 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)  
o 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 PROGRAM DIRECTOR [RadTechDirector@elcamino.edu](mailto: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 message:

→ Type the following message:

**SUBJECT LINE: 2018 RT Application Submission**

**Include the following information in your e-mail message:**

**My name is \_\_\_\_\_, on (DATE) I met with (name of counselor) to file a completed application for the Radiologic Technology Program 2018.**

**My contact information is:**

- **Address:**
- **Phone (Cell or other #)**
- **Personal Email Account & El Camino Email Account**

→ You will be notified of your ranking via your El Camino email address by **July 6,2018.**

***Thank you for your interest in our Program!***