



To: Prospective Student

From: Patricia Kelly, MBA, MT (AMT) (ASCP)BB
Program Director Medical Laboratory Technology / Phlebotomy

We are pleased you are interested in the Phlebotomy Program. The Phlebotomy program provides an option for students who are seeking employment opportunities in the field of Clinical Laboratory Science. **The Phlebotomy program is not covered by financial aid.**

The information in this application packet allows the student to apply to Phlebotomy.

For an application for Radiologic Technology, Practical Nursing, Emergency Medical Technician (EMT), Medical Laboratory Technology, or Health Care Assistant (CNA) programs, contact the Health Sciences Department at 662-246-6503.

For an application for the Dental Hygiene Technology program, contact the Dental Hygiene office at 662-246-6249.

For an application for the Associate Degree Nursing program, contact the Associate Degree Nursing office at 662-246-6407.

Additional information can be obtained from the MDCC web site at www.msdelta.edu.

If you have further questions about the available programs, please call the Health Science department at 662-246-6503; or write to Health Science Department, Mississippi Delta Community College, PO Box 668, Moorhead, MS 38761; or e-mail Angie Cather, Administrative Support at acather@msdelta.edu.

PLEASE VERIFY THAT ALL PAGES OF THE APPLICATION HAVE BEEN PRINTED.

PLEASE READ ALL PAGES CAREFULLY.

POLICY OF ADMISSION TO HEALTH SCIENCE PROGRAMS

Applicants should obtain the appropriate application packet from the Health Sciences or Associate Degree Nursing administrative office. All required application materials must be submitted by the specified deadline in order for the applicant to be considered for admission.

The admission process is competitive. Each program uses an objective rating scale to evaluate each applicant. Specific areas that are evaluated include (but are not limited to) ACT scores, entrance test scores, academic course work required for the major, GPA or specific course grades, and timely submission of the application.

Acceptance into a Health Science Program is conditional pending results of a drug screen and criminal background check at the applicant's expense. According to Mississippi State Law, an individual may not be eligible for employment in a health care agency if the person has ever been convicted of a felony, or plead guilty to, or plead nolo contendere to a felony of possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, sex offense listed in Section 45-33-23 (f), child abuse, arson, grand larceny, burglary, gratification of lust or aggravated assault, of felonious abuse and/or battery of a vulnerable adult.

Applicants are notified by letter of conditional acceptance or non-acceptance into a program. Applicants who are conditionally accepted must comply with all orientation requirements in order to preserve a place in the class. Academic and career counseling is available for applicants who are not accepted into Health Science Programs.

POLICY ON READMISSION TO HEALTH SCIENCE PROGRAMS

A student may be considered for readmission to a specific health science program one time only with the following exception: a student who had a passing grade in the classroom and clinical setting, but was forced to withdraw due to illness, accident, pregnancy, or family crisis may be considered for a second readmission.

Each student requesting readmission into a health science program will be considered on an individual basis. The student should contact the appropriate program director/supervisor for the readmission procedure. Space must be available in the class. No precedent will be set by the decision of the committee.

At the discretion of the Chairperson, Division of Health Sciences with the recommendation of the Admission Committee, a student requesting readmission to a health science program may be required to take a challenge exam to assess placement. It may be necessary for the applicant to repeat courses. After admission information is reviewed, every effort is made to readmit students; however, readmission may be denied based on objective data regarding the student's request for readmission.

MISSISSIPPI DELTA COMMUNITY COLLEGE

HEALTH SCIENCES SUBSTANCE USE POLICY

It is the goal of Mississippi Delta Community College to maintain an environment that is free from the effects of intoxicants or other behavior affecting substances. It is our belief that a drug free environment is to the benefit of students and employees of Mississippi Delta Community College as well as the surrounding community.

Preadmission drug screening is required as a part of the physical exam for all students admitted to the Health Science Programs. A satisfactory drug screen is required for admission. All drug screening will be done in a manner to assure verification of an accurate specimen. All students who are tested must be witnessed by an approved MDCC Official or a staff member of the collecting agency. If there are any discrepancies with the specimen, the student may be subject to retesting. If any student(s) is caught falsifying a urine specimen or in possession of a falsified urine specimen that individual(s) will be immediately re-tested and be subject to disciplinary action by the College and the Health Science Department. All prescription medications taken regularly or as needed should be listed on the medical form. The student must notify the program director when taking prescription drugs which affect behavior.

Random and/or group drug screening may take place each semester. Any person in the role of a student in a Health Science Program who exhibits sensory symptoms or behavior indicative of being under the influence of mind altering substances will be required to have a drug and/or alcohol screening performed immediately. The student will be suspended pending test results. Refusal by a student to participate in a drug screening is in violation of the established policy and will result in dismissal.

If any drug screening is positive, the student is dismissed immediately from the program. The student will be given an opportunity to meet with the Program Director and the Department Chairperson. The student will be considered for probationary readmission following completion of a chemical dependency program approved by the Health Science Program at the student's expense. If probationary readmittance is granted, after-care monitoring will be required for the duration of the course of study at the student's expense.

Lab results must be submitted directly from the lab to the Vice President of Student Services. The Vice President of Student Services sends notification of drug testing results to the Health Science Program department chairperson or director. Results are confidential and will be placed in the student's file.

PHLEBOTOMY TECHNICIAN

Program Supervisor: Patricia Kelly

Instructors: Patricia Kelly & Janet Cooper

The Phlebotomy Program is designed to train individuals to collect blood for laboratory analysis necessary for the diagnosis and care of the patient. This one-semester program trains the phlebotomist to perform venipuncture, capillary puncture, and CPR.

This evening course is ideal for health professionals seeking to expand their current skills, for currently employed phlebotomists seeking certification, or for those interested in a profession in laboratory medicine. Other topics covered include medical terminology, laboratory safety, basic anatomy and physiology, quality assurance methods, and medicolegal issues of phlebotomy.

The clinical practicum, consisting of 120 hours of supervised clinical experience, is provided at regional medical affiliates, allowing participants to achieve proficiency in the health-care setting. Students must complete a minimum number of successful unaided collections before course completion. The practicum is not required for students who have been employed as phlebotomists for at least six months within the past five years, as documented by letter from their employer.

Affiliated health care organizations are Delta Regional Medical Center in Greenville, Greenville Clinic in Greenville, Greenwood Leflore Hospital in Greenwood, Grenada Lake Medical Center in Grenada and Northwest Mississippi Regional Medical Center in Clarksdale. Clinical assignments are at the discretion of the college.

Upon completion, students take a national examination to become a Certified Phlebotomy Technician.

Legal Limitations for Employment as a PBT:

According to Mississippi State Law, an individual may not be eligible for employment in a health care agency if the person has ever been convicted of a felony, or plead guilty to, or plead nolo contendere to a felony of possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, sex offense listed in Section 45-33-23 (f), child abuse, arson, grand larceny, burglary, gratification of lust or aggravated assault, of felonious abuse and/or battery of a vulnerable adult.

MINIMUM ADMISSION REQUIREMENTS:

Applicants must:

- meet general admission requirements for technical students.
- be a high school graduate or have a satisfactory GED score.
- have a minimum ACT score of 18 (15 if taken before October 28, 1989) if entering college for the first time OR
a minimum ACT score of 16 to 17 (12 to 14 if taken before October 28, 1989)
and have completed at least 12 semester hours with a "C" average or better on courses approved by the Phlebotomy program.
- submit a signed, notarized Healthcare Criminal History Background Affidavit.
- have completed a biology course within the past 5 years, either in high school or college with a grade of "C" or better. This requirement may be waived for applicants who have been employed in a healthcare capacity providing patient care for at least 6 months within the past 5 years. A letter from the employer is required for this requirement to be waived.

PROCEDURE:

Applicants must have the following documents on file in the Health Sciences office by July 1 to be considered for admission to the fall class and by November 1 for the spring class.

- MDCC application for admission or readmission
- MDCC application to the Phlebotomy Program (Health Sciences Application packet).
- An official high school transcript from an approved high school or GED equivalency score
- An official college transcript, if college work has been completed
- Signed, notarized Healthcare Criminal History Background Affidavit

Students are encouraged to submit all parts of the application well in advance of the deadline. **Incomplete applications will not be reviewed for admission.**

SELECTION:

No applicant will be considered unless the minimum admission requirements are met.

Requirements are based on ACT and transcript. Meeting the minimum requirements does not guarantee admission into the program. The number of applicants accepted is limited due to the nature of the program.

All applicants are considered on a competitive basis. Admission is tentative

based on:

- satisfactory completion of First Aid CPR (HPR 2211) taught during the phlebotomy program
- satisfactory background check (see Policy on Admission to Health Science Program)
- health evaluation form completed by a physician or nurse practitioner
- proof of Hepatitis-B vaccination, MMR vaccination and Mantoux TB skin test
- acceptable pre-admission drug screen

Applicants will be notified by letter of their acceptance or non-acceptance to the program.

STUDENT RESPONSIBILITIES:

Students who are accepted into the program must:

- attend a Health Science orientation session
- be aware that, in addition to the regular college fees, Phlebotomy Technician students will incur expenses for such items as scrubs, books, supplies, liability insurance, physical examination, Hepatitis B vaccination series, background check, and CPR certification and national certification examination fees.
- be responsible for their own transportation to the college campus and clinical agencies.

PROGRESSION:

Students are required to maintain a “C” average (grade of 75) or better in both academic and clinical aspects of the program to obtain course credit and receive a certificate of completion.

READMISSION OR TRANSFER:

Students seeking readmission to the program are considered on an individual basis according to health sciences readmission policies. Due to the nature of the semester program, students are not eligible to transfer into the phlebotomy program.

COMPLIANCE STATEMENT:

“Mississippi Delta Community College complies with all applicable laws regarding affirmative action and equal opportunity in all its activities and programs and does not discriminate against anyone protected by law because of age, color, disability, national origin, race, religion, sex, handicap, or status as a veteran or disabled veteran.” The following persons have been designated to handle inquiries regarding the non-discrimination policies: Dr. Lynda Steele, Vice President of Administrative Services, Stauffer-Wood Administration Building, P. O. Box 668, Moorhead, MS 38761, 662-246-6558. The student contact is The Center of Learning at 662-246-6251.

Certification and Licensure

Upon completion of the program, students are eligible to sit for a national certification examination. Most students choose certification through the American Society of Clinical Pathology Board of Registry (ASCP) or the National Credentialing Agency for Laboratory Personnel (NCA). Applications for either exam are due three months prior to the quarter in which you wish to test. The Program Instructors will provide applications. Cost is approximately \$125.00.

Scores are usually received within 1-3 weeks. You may be employed as “registry eligible” before taking the examination or receiving scores.

Mississippi does not require a state license, though a number of states do. In most states requiring a license, national certification exams are accepted as proof of competency and no other testing is required.

Completion of the PBT Program is not contingent upon passage of any external certification examination.

PHLEBOTOMY TECHNICIAN

Advisors: Patricia Kelly, Janet Cooper

REQUIRED COURSES

(to be completed within the same semester)
PBT 1113 Phlebotomy.....3
PBT 1122 Clinical Practice2
Electives (optional)

MISSISSIPPI DELTA COMMUNITY COLLEGE
PHLEBOTOMY TECHNICIAN
Standard Functions for Admissions and Progression

The following standard functions provide descriptions of basic cognitive, sensory, affective, and psychomotor requirements for successful Phlebotomy program completion. Applicants and students who cannot meet one or more of the requirements will be considered on an individual basis in terms of whether reasonable modification/accommodation can be made. Reasonable accommodations will be examined in accordance with the Americans With Disabilities Act (ADA) as well as the Standard functions for Admission and Progression.

In order to successfully complete the Phlebotomy, an applicant/student must be able to do the following:

Standard Observation Requirements

In order to perform phlebotomy duties, the individual must be able to meet the following requirements:

- **Vision** – The Phlebotomy Technician student must be able to read test order requisitions, discriminate colors, and record information.
- **Speech and Hearing** – The Phlebotomy Technician student must be able to communicate effectively and sensitively in order to elicit information. The student must be able to assess non-verbal communication and must be able to transmit the information to all members of the health care team.
- **Fine Motor Functions** - The Phlebotomy Technician student must manifest all the skills necessary to manipulate instruments and equipment. The student must be able to perform phlebotomy safely and accurately.
- **Psychological Stability** – The Phlebotomy Technician student must demonstrate the emotional health required for full utilization of the applicant’s intellectual abilities. The student must be able to recognize emergency situations and be able to take the appropriate action.

Please sign and return this form to the Phlebotomy Program. This indicates your intention to enroll in the class.

PLEASE CHECK:

_____ I do not have any disabilities requiring special accommodations for the above standard functions.

_____ I will need the following accommodations to meet the above standard functions.

Please list: _____

I understand the standard functions and feel that I can achieve the standards described for the Phlebotomy Technology Program.

Signature _____ Date _____

**ESTIMATED COST SHEET
PHLEBOTOMY**

Tuition	\$450.00
Textbooks	100.00
Liability Insurance	15.00
Uniforms (3 sets @\$70 per set)	210.00
2 Fluid Resistant Lab Coats	8.00
Drug Screening	30.00
Criminal Background	70.00
CPR	25.00
Total	\$908.00

PHLEBOTOMY IS NOT COVERED BY FINANCIAL AID.

MISSISSIPPI DELTA COMMUNITY COLLEGE
PHLEBOTOMY

Directions for Application:

In order to be considered for admission into a Health Science Program, all admission requirements must be completed and submitted in a timely manner. Completed applications will be judged on information submitted as part of the application. Students are encouraged to submit all parts of the application well in advance of the deadline. Incomplete applications will not be considered for admission.

1. Mail all application documents to:

Office of Admissions
Mississippi Delta Community College
P.O. Box 668
Moorhead, MS 38761

2. Applicants **previously enrolled** at Mississippi Delta Community College:

a. Complete the enclosed "Application for Readmission"

OR

Applicants **who have not attended** Mississippi Delta Community College:

a. Complete the enclosed MDCC "Application for Admission"

3. **ALL** applicants must do the following:

a. Complete the "Application for Health Science Programs"

b. Complete the "Background Information Signature Form".

c. Submit a signed, notarized Healthcare Criminal History Background Affidavit.

d. Submit **one** reference using the enclosed form. Your personal/work reference form should be filled out by someone who has known you for at least one year and is **not a relative**. The form should be mailed by the person completing the form, not the applicant.

4. **ALL** applicants must arrange for an **official** transcripts from **each** school attended to be sent to:

Office of Admissions
Mississippi Delta Community College
P.O. Box 668
Moorhead, MS 38761

5. If the applicant has no previous college, an official high school transcript or GED score should be sent to the address in #5. If presently attending high school **you must send a partial transcript** and a complete transcript upon graduation.

6. The applicant must verify that the Department of Health Sciences has received an official record of his/her ACT score that is required for the program to which he/she is applying.

7. **The deadline for having the application process completed is July 1, for fall and November 1 for spring.** It is the applicant's responsibility to verify that the necessary information has been received. This may be done via e-mail: emallette@msdelta.edu. If all information is not received, the applicant will not be considered for admission.

8. All applicants will be notified by letter of acceptance or non-acceptance.

The Phlebotomy program is not covered by financial aide.

List of Documents

The documents listed below are included in this application packet.

1. Memo to Prospective PBT student
2. Health Science Division Information
3. Substance Use Policy and Substance Use Policy Signature Sheet
4. Performance standards for Admission and Progression
5. Cost Estimate
6. Application for Admission to MDCC
7. MDCC Application for Readmission
8. Background Check Signature form
9. Healthcare Criminal History Background Affidavit form
10. Personal/Work Reference

**MISSISSIPPI DELTA COMMUNITY COLLEGE
PHLEBOTOMY**

APPLICATION FOR THE PHLEBOTOMY PROGRAM

“Mississippi Delta Community College complies with all applicable laws regarding affirmative action and equal opportunity in all its activities and programs and does not discriminate against anyone protected by law because of age, color, disability, national origin, race, religion, sex, handicap, or status as a veteran or disabled veteran.” The following persons have been designated to handle inquiries regarding the non-discrimination policies: Dr. Lynda Steele, Vice President of Administrative Services, Stauffer-Wood Administration Building, P. O. Box 668, Moorhead, MS 38761, 662-246-6558. The student contact is The Center of Learning at 662-246-6251.

DIRECTIONS: Complete all of the following applicable information. Your application will be considered incomplete if blanks are left.

First Name _____ MI _____ Last Name _____

All Previous Names _____ Home Phone _____ Cell
Phone _____

Mailing Address _____ City, State, Zip _____

Social Security Number _____ Birthdate (mm/dd/yy) _____

E-Mail Address _____ Age * _____ Sex* _____
(*Data is used for statistical purposes only.)

ACT Score _____ Year Taken _____

Have you ever attended a program for Medical Laboratory Technology or Phlebotomy? YES NO
Where? _____

Name of high school you graduated from _____

Have you ever attended Mississippi Delta Community College? YES NO
I give my permission to have a copy of my MDCC transcript obtained by the PBT Department.
The PBT Department will obtain this copy – you do not need to contact the Admissions Office.

Signature

List all colleges/universities previously or presently attending:

Are you presently enrolled in any courses? YES NO
If yes, list the courses and the college you are attending.

Have you ever been employed in a health care setting? YES NO If yes, please explain.

Present occupation and place of employment and phone number _____
Will you receive a loan or scholarship to assist with your education? YES NO If yes, describe

Do you plan to work while you are in the program? YES NO

Agency _____

Phone _____ Hours/week _____

Have you ever been convicted of, plead no contest to, or are charges pending against you for a felony or misdemeanor in any state? (Includes moving vehicle violations) YES NO

If yes, please explain _____

Have you ever been convicted of a felony, or plead guilty to, or plead no contest to a felony of possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, sex offense listed in Section 45-33-23 (f), child abuse, arson, grand larceny, burglary, gratification of lust or aggravated assault, or felonious abuse and/or battery of a vulnerable adult? YES NO

If yes, please explain _____

Have you ever been disciplined by any state or federal regulatory agency or national certifying agency? YES NO If yes, provide details

All applicants should be advised of the following:

1. Any statement made on this application which is false and known to be false by the applicant at the time of making such statement, shall be deemed fraudulent and subject the applicant to disciplinary proceedings.

I certify that the information on this application is true and accurate.

Applicant's Signature

Date

SEE REVERSE SIDE FOR SELECTION OF MAJOR

A MAJOR MUST BE INDICATED AND YOUR SIGNATURE AND THE DATE MUST BE PRESENT TO VALIDATE THIS APPLICATION CHECK ONLY ONE (1) MAJOR

ALL UNIVERSITY PARALLEL PROGRAMS ARE AVAILABLE WITHIN THE FOLLOWING DIVISIONS (Examples: Elementary Education - Humanities, Psychology -Humanities, Accounting –Business)

UNIVERSITY PARALLEL PROGRAMS

A.A. DEGREES

(Leads to Bachelor's Degree)

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Art | <input type="checkbox"/> Business | <input type="checkbox"/> Biological Sciences | <input type="checkbox"/> Computer Information Systems |
| <input type="checkbox"/> English | <input type="checkbox"/> Foreign Language | <input type="checkbox"/> General Education | <input type="checkbox"/> HPER & D |
| <input type="checkbox"/> Mathematics | <input type="checkbox"/> Music | <input type="checkbox"/> Chemistry/Physical Sciences | <input type="checkbox"/> Pre-Architecture |
| <input type="checkbox"/> Pre-Engineering | <input type="checkbox"/> Pre-Health Profession | <input type="checkbox"/> Humanities | <input type="checkbox"/> Speech /Communication |

TECHNICAL PROGRAMS

(Leads to Associate in Applied Science Degree)

- | | | |
|--|---|---|
| <input type="checkbox"/> Agriculture Mechanics Technology | <input type="checkbox"/> Industrial Electricity/ Industrial Maintenance Technology | |
| <input type="checkbox"/> Computer Network Technology | <input type="checkbox"/> Drafting and Design Technology/ Architectural Engineering Technology | |
| <input type="checkbox"/> Electronics Technology | <input type="checkbox"/> Biomedical Equipment Repair Technology | |
| <input type="checkbox"/> Automotive Technology | <input type="checkbox"/> Sheet Metal Technology | <input type="checkbox"/> Machine Tool Technology |
| <input type="checkbox"/> Culinary Arts Technology | <input type="checkbox"/> Field Crops Technology | <input type="checkbox"/> Precision Agriculture Technology |
| <input type="checkbox"/> Office Systems Technology | <input type="checkbox"/> Accounting Technology | <input type="checkbox"/> Medical Office Technology |
| <input type="checkbox"/> Medical Billing and Coding Technology | | |

CAREER PROGRAMS

(Career Certificate)

- | | | |
|---|--|---|
| <input type="checkbox"/> Agricultural Mechanics | <input type="checkbox"/> Automotive Machinist | <input type="checkbox"/> Automotive Mechanics |
| <input type="checkbox"/> Brick, Block and Stone Masonry | <input type="checkbox"/> Commercial Truck Driving (16 weeks) | <input type="checkbox"/> Construction Equipment Operation |
| <input type="checkbox"/> Industrial Electricity | <input type="checkbox"/> Heating & Air Conditioning (HVAC) | <input type="checkbox"/> Machine Tool Operation |
| <input type="checkbox"/> Sheet Metal | <input type="checkbox"/> Welding | |

HEALTH SCIENCE PROGRAMS

- | | | |
|--|--|--|
| <input type="checkbox"/> Medical Laboratory Technology | <input type="checkbox"/> Associate Degree Nursing (RN) | <input type="checkbox"/> Radiologic Technology (X-Ray) |
| <input type="checkbox"/> Nuclear Medicine Technology | <input type="checkbox"/> Practical Nursing (LPN) | <input type="checkbox"/> Dental Hygiene Technology |
| <input type="checkbox"/> Pre-Health Science Technology | <input type="checkbox"/> Health Care Assistant | <input type="checkbox"/> Emergency Medical Technician |
| <input type="checkbox"/> Phlebotomy
(one semester) | (one semester) | (one semester) |

An official transcript of all previous school work must be submitted to the Registrar's Office by the high school principal or registrar of the last school attended. This should be done as soon as possible after high school graduation or the close of the current semester. DO NOT SEND AN INCOMPLETE TRANSCRIPT EXCEPT FOR NURSING, MEDICAL LABORATORY TECHNOLOGY, RADIOLOGIC TECHNOLOGY, and DENTAL HYGIENE TECHNOLOGY. A statement of acceptance will not be issued to the applicant until the following documents are received and approved by the registrar: (1) a completed application form (inaccurate or incomplete information will invalidate the application); (2) a transcript of your school record or GED scores; and (3) ACT scores.

I have read and understand the conditions of the Student/Patron Use Agreement located at Admission on the MDCC Web Site.. I realize that failure to comply with any of those conditions could result in disciplinary action against me as described in the college's Student Handbook. I also understand that the college is not responsible for any consequences or legal actions that may result because of my misuse of the college network resources. I hereby make application for admission to Mississippi Delta Community College and agree to abide by the regulations of the college.

USUAL SIGNATURE _____ DATE SIGNED _____

Mississippi Delta Community College complies with all applicable laws regarding affirmative action and equal opportunity in all its activities and programs and does not discriminate against anyone protected by law because of age, color, disability, national origin, race, religion, sex, handicap, or status as a veteran or disabled veteran. The following person has been designated to handle inquiries regarding the non-discrimination policies: Dr. Lynda Steele, Vice President of Administrative Services, Stauffer-Wood Administration Building, P.O. Box 668, Moorhead, MS 38761, 662-246-6558. The student contact is The Center of Learning at 662-246-6251.

MISSISSIPPI DELTA COMMUNITY COLLEGE
DIVISION OF HEALTH SCIENCES
BACKGROUND INFORMATION SIGNATURE FORM

All Health Science students who will be providing direct patient care in health care institutions regulated by the MS Department of Health should be aware that Mississippi law requires background checks for individuals seeking employment in a health care facility.

According to the Mississippi State Law, an individual may not be eligible for employment if the criminal history record check discloses a felony conviction, guilty plea or plea of nolo contendere to a felony of possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, sex offense listed in Section 45-33-23 (f), child abuse, arson, grand larceny, burglary, gratification of lust or aggravated assault, or felonious abuse and/or battery of a vulnerable adult that has not been reversed on appeal or for which a pardon has not been granted.

Students are asked to submit a signed, notarized Healthcare Criminal History Background Affidavit as part of the admission requirement. If a student is unable to sign the affidavit and would like to continue with the application into a health science program, an appointment should be made with the Director to discuss the circumstances of the felony.

Students admitted to Health Science Programs may be required to complete additional paperwork and pay additional fees related to the background check requirement.

Students assigned to some agencies may also be required to have additional background checks to comply with specific clinical agency contracts which may include criminal record check, credit check, driving history check and license check.

Students must be able to attend clinical agency sites in order to meet the requirements of the specific Health Science Program.

I have been informed of the above information regarding the MS State Law requiring background checks for individuals providing direct patient care in health care institutions regulated by the MS Department of Health.

Signature of Student

Signature of Witness

Date of Signature

***Return this completed form with your application information.**

****This form must be signed by a witness to the applicant's signature for this form to be complete.**

MISSISSIPPI DELTA COMMUNITY COLLEGE
HEALTH SCIENCE DIVISION

HEALTHCARE CRIMINAL HISTORY
BACKGROUND AFFIDAVIT

STUDENT APPLICATION

State of Mississippi, County of _____

Before me, a Notary Public in and for the County and State aforesaid, personally appeared the undersigned _____, who, after being by me duly sworn did state upon his/her oath as follows:

- a. That the affiant is currently making application for enrollment as a health science student at Mississippi Delta Community College.
- b. That the affiant has not been convicted of or pleaded guilty or nolo contendere to a felony of possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, sex offense listed in Section 45-33-23(f), Mississippi Code of 1972, child abuse, arson, grand larceny, burglary, gratification of lust, aggravated assault, or felonious abuse and/or battery of a vulnerable adult.
- c. That the affiant has not been convicted of or pleaded guilty or nolo contendere to other crimes which Mississippi Delta Community College (1) has determined to be of a nature and/or frequency as to be disqualifying for admission; (2) has adopted such as part of its written policies; and (3) has fully disclosed of such to the affiant prior to his/her requirement during his/her enrollment, in addition to this affidavit.
- d. Further, the affiant sayeth not.

Name of Affiant (Printed)

Signature of Affiant

SWORN TO AND SUBSCRIBED BEFORE ME, this the _____ day of _____,
20_____

Signature of Notary Public

My Commission Expires

MISSISSIPPI DELTA COMMUNITY COLLEGE
HEALTH SCIENCE PROGRAMS

PERSONAL/WORK REFERENCE FORM

Name of Applicant

Social Security Number

Note to Applicant: Be sure that your name and social security number are on this form before giving to the evaluator. The reference should be mailed by the person completing the form, not the applicant.

	Above Average	Average	Below Average	Not Observed
Decision Making: (Thinks situations through completely, considers alternatives, arrives at logical conclusions, takes appropriate action.)				
Works well with others. (Works well with peers and subordinate, shows respect for others, demonstrates tact in relationships.)				
Accepts guidance and constructive criticism from authority figures.				
Maturity (Assumes responsibility for personal decisions and actions, seeks assistance when needed.)				
Dependability (Conscientious, reliable, punctual.)				
Initiative (Seeks opportunities for growth.)				
Leadership Potential (Directs group efforts effectively, organizes efficiently, is resourceful.)				
Integrity. (Guided by moral principles, is trustworthy.)				
Stability. (Adapts appropriately to new situations, does not exhibit extremes in behavior.)				

Return To:

Office of Admissions
Mississippi Delta Community College
P.O. Box 668
Moorhead, MS 38761

Signed: _____

Relationship to Applicant:

Name (Please Print)

Title

Do you recommend this applicant for admission: ___YES ___NO

School/Agency

COMMENTS: (May use back side)

City, State, Zip

Telephone Number

Date