



## Medical Laboratory Technology Program Application

Today's Date \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

List other names which records may be found, including maiden names: \_\_\_\_\_

\_\_\_\_\_

Social Security Number or SJC Identification Number: \_\_\_\_\_

Phone Number (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Have you previously applied for the Medical Laboratory Technology program at SJC? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, indicate term previously applied for: \_\_\_\_\_

Enrollment Information (respond to one item only):

A. New Student \_\_\_\_\_ Or;

B. Current SJC Student \_\_\_\_\_

Registered at - SJC: *Central* \_\_\_\_\_ *North* \_\_\_\_\_ *South* \_\_\_\_\_ Or;

C. Returning Student \_\_\_\_\_

Campus last attended - SJC: *Central* \_\_\_\_\_ *North* \_\_\_\_\_ *South* \_\_\_\_\_

Term \_\_\_\_\_ Year \_\_\_\_\_

List all colleges attended: \_\_\_\_\_

\_\_\_\_\_

Have you ever been enrolled in another Medical Laboratory Technology program? \_\_\_\_\_

If so, where and when: \_\_\_\_\_

\_\_\_\_\_

# SAN JACINTO COLLEGE

## CENTRAL CAMPUS

Military      Active       Reserve       Retired

Previous Work Experience (last three years) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Coursework:	Not Taken	Completed Course Grade	In Progress
BIOL 2404	_____	_____	_____
ENGL 1301	_____	_____	_____
MATH 1314	_____	_____	_____

Grade point average at San Jacinto College: \_\_\_\_\_

Have you made a formal application to San Jacinto College? \_\_\_\_\_

Have your official transcripts for all colleges you have attended been sent to Enrollment Services?      Yes \_\_\_\_\_      No \_\_\_\_\_

Student Signature: \_\_\_\_\_      Date: \_\_\_\_\_

Department Chair Signature: \_\_\_\_\_      Date: \_\_\_\_\_