



RESPIRATORY CARE FALL 2012 Application Information & Forms

This application is an on-line application process with a \$50 fee.
You must complete all steps to be considered.

1. **PROGRAM COUNSELING & ADVISING**

All of the information necessary to make a successful application to the Respiratory Care program is included in the following pages. It is your responsibility to be aware of program entrance and degree completion requirements.

For Counseling and Advising assistance in meeting program or application requirements, please go to Counseling and Advising in Building 1, Room 103 or E-mail RCProgram@lanecc.edu.

An [Academic Advising Resource](#) is available to all students. To access this go to www.lanecc.edu choose "Moodle." Select "Academic Advising" and then choose "Academic Advising Resources – Respiratory Care." The following information is intended for program entrance only and does not include information on courses required for degree completion. These can be found in the catalog listing for [Respiratory Care](#).

2. **APPLICATION PROCESS & DATES**

2A. Selection Criteria.

Acceptance into this program is limited to **25 Lane County** students and **5 out-of-county** students. Program admission *is based on a point allocation system*. In addition to admitted students, there will be designated alternates. An alternate is allowed to enter the program if an admitted student declines. Remaining alternates will need to reapply the following year.

You are NOT considered an applicant to the program until you meet all application requirements.

2B. Important Dates:

Mandatory Program Application Review Sessions (attendance at one is required).....**3-5 p.m., Mar 15; 9-10 a.m., Apr 16; 10 a.m.-12 p.m., Apr 28, 2012**

Application opens: On-line Application & Payment, forms and documents submission opens. . **Mar 28, 2012***

Application closes: On-line Application & Payment, forms and documents submission closes. **May 8, 2012***

Application notification: Program status announced..... **May 30, 2012**

Mandatory orientation: Attendance required for accepted or alternate status..... **3-5 p.m., Jun 28, 2012**

*On-line Application and Payment admission system opens approximately 12:15 a.m. and closes approximately 11:45 p.m. each day. You must submit your On-line Application and Payment before the system closes.

3. **APPLICATION REQUIREMENTS**

To apply to this program, you must complete and submit the following by the close date listed above. Details of requirements are provided in the following sections.

- Be admitted to Lane Community College as a college-[credit student](#).
- Complete all application course requirements as described in the [catalog](#)
 - MTH 095 Intermediate Algebra (5 credits), or higher (4 or more credits) graded C- or better.
 - CH 112 Chemistry for Health Occupations* and BI 112 Cell Biology for Health Occupations* (3 credits each), or 100-level or higher college chemistry course (5 credits or more) pass/no pass option okay, or grade equal to C- or better
 - BI 231 Human Anatomy and Physiology 1 (4 credits) Graded "C-" or better
 - HO 100 Medical Terminology 1 (3 credits) pass/no pass option okay, or grade equal to C- or better
 - WR 121 Introduction to Academic Writing * (4 credits) pass/no pass option okay, or grade equal to C- or better
- Submit transcripts, if required, to Enrollment Services prior to submitting Forms 1 and 2.

- Attend one Mandatory Application Review Session – see dates and times above (2B).
- Submit Forms 1 and 2, and supporting documentation as required prior to completing On-line Application and Payment Process.
- Complete the RC Program On-line Application and Payment process.

4. APPLICATION WORKSHEET & REQUIRED STEPS

Use this check list to complete all steps in the order provided.

You must complete all steps and submit all documentation by the close date listed above.

Keep this check list as a reference.

_____ **1. E-mail Account.** You will need to obtain an [E-mail address](#) if you do not already have one. Lane’s Enrollment Services and Health Professions Application Center use E-mail to send information.

It is your responsibility to set your “spam filter” system to accept mail addresses containing @lanecc.edu . Do this even if you are currently receiving E-mails from Lane. **We cannot be responsible for notices which are not received due to spam or junk mail handling.**

_____ **2. Admission to Lane as a credit student.** If you are not currently a credit Lane student, complete [Lane’s college admission process](#) and obtain a student “L” number. Make sure to complete all “[Steps to Enroll in Credit Classes](#)” including testing.

_____ **3. Academic Advising.** Meet with a Health Professions counselor or advisor. See Section 1 Program Counseling and Advising.

_____ **4. Prior to turning in Forms 1 and 2 [Submit Non-Lane Transcripts to Enrollment Services.](#)**
All courses used for points must be recorded on your transcript.

- **Do not** submit transcripts from Lane Community College to Enrollment Services or the HP Application Center.
- **Sealed, official,** transcripts from schools other than Lane must arrive the same date or before Online Application and Forms are submitted.
Lane Enrollment Services, ATTN: HP Transcript
4000 East 30th Ave., Eugene, OR 97405
- **Do not** submit official transcripts to the Health Professions Application Center, they will **NOT** be forwarded to Enrollment Services.

_____ **5. Request Course Equivalency Evaluation (if required).**

Courses taken at other colleges may be eligible for use in the application process. Use the following steps and make sure to consult with a program advisor/counselor.

DO NOT DELAY. It is your responsibility to initiate the process early and make sure it has been completed by the application deadline.

IMPORTANT. *Equivalencies must meet both Core Program and AAS degree requirements. See [Academic Advising Guide](#) or consult with a [program counselor or academic advisor](#).*

1. For colleges other than Lane, submit an official, sealed transcript to Enrollment Services. College transcripts received by Lane’s Enrollment Services may be verified in *myLane*.
2. Go to the Enrollment Services website [Lane Transfer Tool](#).
3. Review “General Information for Transferring Credits.”
4. Select “Look up Transferable Credits” to check on transferable classes for courses listed on the Point Petition Sheet. If your course(s) are listed as equivalent to course numbers and titles provided- no further action is needed.
5. If your Medical Terminology course is not listed in the Lane Transfer tool you may have your course evaluated by submitting a copy of the course syllabus; email to HPApplicationCenter@lanecc.edu or mail to HP Application Center Attn: RC Application Documentation, 4000 E 30th Ave., Eugene, OR 97405
6. If the college/course is not shown *see instructions provided in the [Transfer Advising Guide](#).*
 - If you obtain course equivalencies or substitutions request copy of the approval in-person or by email.
 - Course equivalencies must be approved and received in Enrollment Services by your date of application.

If the instructional department/division has determined your transfer work does not meet Lane Course equivalency criteria you may discuss your transfer work with the RC Program Coordinator.

- _____ **6. Attend one Mandatory Application Review Session. You must** attend one session to apply to the program. Sessions will be in Building 30/Room 213 (see dates/times in Section 2B). At the review session, have the presenter sign **Form 2a: Mandatory Application Review Session.**
- _____ **7. Complete the Acknowledgement Statement and Condition of Application, Form 2b.**
- _____ **8. Complete Form 1: Application Point Sheet.** Only courses which have been completed and transcribed may be used for points. **Extra points will NOT be awarded if you do not complete the points table.**
- _____ **9. Submit application to the HP Application Center** (see Point Sheet for address):
 - Form 1: Point Sheet,
 - Supporting documentation for Course Equivalencies and/or Health Care points, if applicable,
 - Form 2a: Attendance of Mandatory Application Review Session,
 - Form 2b: Acknowledgement Statement and Condition of Application,
- _____ **10. Complete the RC Program On-line Application and Payment.** You will be charged a **\$50 non-refundable application fee.**

Before you begin the On-line Application and Payment

 - You must have a student “L” number to complete this process.
 - You must have an E-mail address to complete this process.
 - You must have a Visa or MC credit card to pay the application fee.

Instructions on how to access and complete the On-line Application & Payment – see last page of this document.

5. NOTIFICATION

Notification of your status will be announcements by **E-mail or through your myLane** portal by the date listed in the *Important Dates* section.

6. FALL 2012 ENROLLMENT REQUIREMENTS

If accepted or considered an alternate to the program, you must complete the following. **Failure to do so will result in forfeiture of program eligibility.**

- **Fall Term 2012 Enrollment Academic Requirements.** Complete **prior to Fall term 2012.**
 - BI 232 (4 cr), letter grade of C- or better.** Pass, No-pass, or lower than C- will not be accepted.
- **Attend the Mandatory Program Orientation.** *Students accepted into the program or given alternate status must attend the orientation session* - see Section 2B above. Session will be in Building 30, Room 213.
- **Documentation of program/clinical requirements (to be paid by student) which will include:**
 - Physical exam and immunization
 - CPR certification
 - Proof of health insurance
 - Drug testing
 - Criminal background check

Specifics will be included in notification of program acceptance or alternate status, and discussed at the Mandatory Program Orientation.

Print Clearly. (Enter Name as indicated in **myLane**)

Indicate if all coursework has been taken at Lane.

L# _____

First _____ Last _____

Address _____

City _____ ST _____ Zip _____

E-mail _____

1st Phone _____ 2nd Phone _____

Form 1: Application Point Sheet / Respiratory Care

1. List colleges/universities attended. See **Sections 4 & 5** for transcript requirements and course equivalency information.

Name of College/University. Do not abbreviate the names.	State	Quarter or Semester	From - Dates Attended - To

2. No points awarded for meeting minimums for application. Complete the information on course completed and circle Course Grade received. Courses that meet the grade criteria as listed may be eligible for Application Points. Minimum criteria is grade of C- or higher.

Note: Chemistry 100 level or higher, and BI 233 must be completed **Fall 2005** or later.

	Lane Course	Course	Term/Year	School	Credits	1 point	2 points	3 points	Office Use Only	
CHOOSE ONE	*MTH 095					B	A			
	MTH higher than 095					C	B	A		
CHOOSE ONE	*CH 112 or CH 100 level					B	A			
	CH 200 level or higher					C	B	A		
	*BI 112 if CH 112 taken					Enter Grade Received here (no point value): (C- or higher required)				
	*BI 231					B	A			
	*HO 100					B	A			
	*WR 121 (may use WR 122, 123 or 227)					B	A / or BA, BS or higher			
	BI 232					C	B	A		
	BI 233					C	B	A		
	BI 234					C	B	A		
	Health Care Experience	POINTS AWARDED FOR HIGHEST LEVEL ACHIEVED (Circle) / MUST ATTACH DOCUMENTATION								
MILITARY	CNA						Certificate of Completion of Training	State Certification		
	Medical Primary Specialty							Minimum 1 year Hospital Experience		
	EMT-Basic						Certificate of Completion of Training	State Certification		
	PRIOR DEGREE						Associate's Degree	BA, BS, or higher		
DEDUCTIONS: Two points per occurrence will be deducted for each N/P, W, D, or F in BI 231-233, Winter Term 2009 or later: _____ x 2 = _____										
Office Use Only:										

*Prerequisite courses listed must be completed by the end of **Winter 2012**.

Students who have earned a Bachelor's Degree or higher from an accredited school in the US will receive maximum points for WR121.

Maximum points possible are 29

Enter Your ESTIMATE OF TOTAL POINTS: _____

I certify that the information for this petition is true and complete, and acknowledge that incomplete packets or information are not accepted toward application.

Applicant Signature: _____ Date _____

Form 2a: Proof of Mandatory Application Review Session Attendance

Application Review Session

Applicant Print Clearly. Name as indicate in **myLane**

L# _____ First _____ Last _____

Session Date _____

To be signed by presenter: _____ Presenter Signature _____

Form 2b: Acknowledgement Statement and Condition of Application

Acknowledgement Statement and Condition of Application. All must be initialed to qualify.

- ____ A. I understand that my application will not be returned and that I am responsible for making a personal copy.
- ____ B. I have attended a Mandatory Application Review Session.
- ____ C. I have read and understand point sheet and documentation requirements.
- ____ D. I have completed the On-line Application and Payment process as required.
- ____ E. I understand that I am NOT considered an applicant to the program unless all required application steps have been completed, and forms and documentation have been received by the required dates.
- ____ F. I have read the **Fall Enrollment Requirement** Section and understand ***I must attend the mandatory program orientation*** and comply with all other enrollment requirements if I am accepted or have alternate status.
- ____ G. I understand it is my responsibility to complete all program requirements for degree completion.
- ____ H. I am aware that the Respiratory Care Program is a hybrid program with lecture courses delivered in an on-line guided instruction format. I will have the required equipment, software and internet access to fully participate from the first day of Fall term.
- ____ I. I hereby attest that all application information and documentation I have submitted is accurate and authentic.
- ____ J. I will be dropped from the program if I do not comply will all the above conditions of application.

Signature _____ Date _____

Submit Form 1, Form 2a and 2b, transcripts (if required), and Health Care Experience documentation (if applicable) to:

Submit by mail. Must be received by deadline date.

**Lane Community College
Health Professions Application Center
Attn: RC Application
4000 East 30th Ave.
Eugene, OR 97405**

***Submit in person.** Staple forms and documentation.

Do not place in an envelope.

**Health Professions Application Center
Building 4, across from room 204 – breezeway
Date/time stamp (located next to the drop box)**

Date/Time Stamp in this area:

2012-2013 Health Professions Online Program Application & Payment

Before you start your On-line Application & Payment session:

- You must have applied for **credit** admissions to Lane and have a student L number.
- You must have a personal e-mail account (Lane does not issue students Lane e-mail accounts).
- You must have a credit card on which to charge the **non-refundable application fee**.
- Complete the program Application Worksheet.

Go to:..... [Lane's Admission and Program Application website](#) and Apply Online.

First time user account creation.. Click on this link at bottom of page.

Create a Login ID: Enter your L#. (If you have applied for admissions and have not yet received your L# leave the Login ID blank and the system will generate a G# for you. **Make sure to keep** your G number for reference!

All students create a new PIN: Follow instructions on the web page.

- Do not use the same PIN you use to log into ExpressLane, myLane, or Moodle.
- This PIN is only for the Application process and will not change your ExpressLane PIN.
- Use this Application PIN to check on the status of your program application. Write it down!

Login: Click this button located at bottom of page.

Continue: Click this button located at bottom of page.

Application Type: Select the correct program application type from pull down menu. Make sure of your selection.

Continue: Click this button at bottom of page.

Apply for Admissions By entering the correct information.

Admission Term:..... [Fall 2012](#). Enter from drop down menu. (For EMT Basic Spring/Summer, enter [Spring 2012](#))

Enter Name:..... Make sure your name matches the name you used in your **myLane** portal.

Fill Out Application Click this button at bottom of page.

Application Checklist..... Click this link and complete each required section of the application.

- Follow the instructions provided on each screen.
- High School Section.** *Some Health Professions programs require high school completion.*
- Previous College Section:** List all previously attended institutions.

Application is Complete Click this button only when all sections have been completed.

or Finish Later Click this button to save your information.

Complete Payment..... You must pay the On-line Application fee with a Visa or MasterCard.

Signature Page Click the button and read agreement information.

- Your On-line Application is dated and timed after submission of the Signature Page.
- This is an acknowledgement page and **does not require a signature. Ignore the "ERROR" message.**

Return to Application Menu Click this link at the bottom of the page. Your application is now listed as "submitted."

Lane Community College Admission Confirmation. An E-mail will be sent to you confirming your On-line Application and Payment and time. Retain this page for your reference.

In addition to your On-line Application and Payment, the following programs require additional form(s) and documentation. Details are in the Program Application Information & Forms.

Dental Assisting Dental Hygiene EMT Paramedic Health Records Technology	Medical Office Assistant Nursing Physical Therapy Assistant Respiratory Care
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