

LCC Medical Assistant Program Fall 2024 Application Forms Packet

FORM 1 CONDITIONS FOR APPLICATION

Complete	all portions of this form as directed	i. List name as indicated in Express	Lane			
L#	First Name	Last Name				
Email (required)		1st Phone	2 nd Phone			
Al	Il courses taken at LCC					
	fficial Transcripts from other colleges ommunity College - 4000 East 30 th Av		nt Services – Attention: HP Transcript – Lan			

Application Conditions and Program Progression Completion Requirements

In submitting my MA program application by email to <u>HPApplicationCenter@lanecc.edu</u>, I affirm the following:

- I took all of my prerequisite courses at Lane Community College,
 OR I have submitted official, sealed transcripts from colleges other than Lane to Lane Enrollment Services.
- I have completed the <u>LCC Credit Admission</u> process and have an L number.
 OR I have previously taken credit classes at Lane and have an L number.
- I have completed the Medical Assistant Online Admissions Application & Payment process, including paying the \$35 non-refundable application fee.
- I understand all information in the Fall 2024 Medical Assistant Application Information Packet. I am NOT considered an applicant to the program unless all required forms and documentation are completed and submitted according to application instructions prior to the application deadline.
- My application will not be returned and I am responsible for making a personal copy.
- I have read the Enrollment Requirement Section and understand I must attend the mandatory orientation and comply with all other enrollment requirements if I am accepted or considered a program alternate.
- I am a current resident of the State of Oregon and my current Oregon address is listed in myLane.
- I understand I must successfully complete all MA Fall Enrollment Courses before Fall term 2024 and if courses are not completed and transcripted as required, I will not be allowed to enter the program.
- I understand it is my responsibility to complete all program requirements for degree completion by the end of Spring Term 2025.
- I hereby attest that all application information and documentation I have submitted in this packet is accurate and authentic.

Be sure to use the latest version of Adobe Reader to complete this form and submit as a fillable pdf form. Forms 1 and 2 that are submitted scanned, via Google docs, handwritten or delivered in person will not be accepted. Macintosh users – do not use "Preview" to view or complete this Form. Set Adobe Reader as the default PDF reader http://get.adobe.com/reader/

Submit all supporting documentation attached to
ONE e-mail by the deadline:

Health Professions Application Center:
HPApplicationCenter@lanecc.edu
Subject:
Name L number MA Application Forms Packet
File Name:
MA24 LastName_LNumber

On the same date or before:

Lane Transcript and/or submitted transcripts to Enrollment
Services reflect courses and degree(s) listed on Point
Petition Sheet.

Online Medical Assistant Program Admissions Application
and Payment has been submitted.

				Courses must meet minimum credit requirement shown. No C-						
See 2024 Medical Assistant Application Information Packet for application				grades will be accepted after Spring term 2019. Not all courses						
requirements and for Course Equivalency	e was not	accept P g	rades. Ente	er grade po	int values ir	n the right	hand 'Points'			
taken at Lane. List only the courses which are completed and are on your official column. #'s only.										
transcripts. All course information must be entered		Term/	# Credits	Grade	Grade C	Grade B	Grade	# Pts Earned		
in order to count for points:	Course & School	Year	# Orcaits	Pass	Grade 6	Grade B	A	# 1 to Lumba		
course/school, term/year, credits	Use "N/A" if no course.									
Part 1. Fall Entry Requirements: listed must be completed by the end of Summer term 2024.										
Items 1: Writing Requirement: Choose one option.										
WR 115, WR 115W (3/4 Cr) OR				N/A	6	9	12			
WR 121, 122, 123, 227 (3/4 Cr)				N/A	6	9	12			
OR Prior Bachelor's degree; must			N1/A							
appear on a submitted transcript			N/A	N/A	N/A	N/A	12			
Item 2: Medical Terminology Require	ment:									
HP/HO 100 (3 Cr)				N/A	6	9	12			
Item 3: Mathematics Requirement: Co	ompleted Summer Term 2019 or la	ater. Choo	se one optic	on.						
MTH 052 (4 Cr)				N/A	12	20	20			
Lane Math Placement Test *	See note below:		N/A		12	2				
*Students may use MTH	052 taken before July 2021	if they pa	ss placem	ent tests -	- See App	lication Inf	formation	Packet.		
Items 4: Anatomy & Physiology Requ	irement: Choose one option.									
**HP/HO 150 (3 Cr) OR				0	6	9	12			
**BI 231 (4 Cr)				0	6	9	12			
Part 2. Additional points given for comp	letion of these courses. List only th	ne courses	which are	completed	and are on	vour officia	l transcrin	ts.		
	·	ic courses	Willon arc	completed	and arc on	your officia	ii tianscrip			
Items 5: Business and Computer Cou	irse Options:				•					
BT 165 (3-4 Cr)				0	6	9	12			
BT 120 OR CIS 101 (4 Cr) OR				0	6	9	12			
CS 120 (4 Cr)				0	6	9	12			
Items 6: Psychology										
PSY 110 (4 Cr) OR Higher				0	6	9	12			
Items 7: Health Occupations and Hea	Ith Science courses:									
HP/HO 110 (3 Cr)				0	6	9	12			
HIT/HP 105 (3 Cr) OR HIT/HIM 107 (3				0	6	9	12			
Cr)										
MA 112 (3 CR) OR HIM 112 (3 Cr)				0	6	9	12			
MA 119 (3 Cr) OR HIM 114 (3 Cr)				0	6	9	12			
HIM 220 (3 Cr)				0	6	9	12			
HIM/HP 153 (3 Cr)				0	6	9	12			
**HP/HO 152 (3 Cr) OR				0	6	9	12			
**BI 232 (4Cr)				0	6	9	12			
**BI 233				0	6	9	12			
**Complete one option Fall 2017 or late.	r: Either HP 150-152 or BI 231-23	33. Progra	m reauires	completion	of HP 152	or BI 233 I	by end of V	Vinter 2025 .		
**Complete one option Fall 2017 or later: Either HP 150-152 or BI 231-233. Program requires completion of HP 152 or BI 233 by end of Winter										
Total Course Points Earned										
Part 3. Additional Points.										
Prior College Degree: Associate, bachelors, masters, or higher degree. Transcript must indicated egree granted . = 5 pts										
Health Records Technology Certificate /HIM Transcript must indicated egree granted. = 5 pts										
State Board of Nursing Certified Nursing Assistant Unencumbered License submit verification. = 2 pts										
2 700										

Required Minimum Points to Apply: 68 (Total Course Pts. Possible: 176)	Total Application Points					
List any additional information that didn't fit into spaces provided above:						