

## Application Packet

---

# Surgical Technology Program

**Effective: 2024-2025**

Includes the following admission cycles:

- January, 2025

**Submit application to:**

Career Planning and Placement  
Francis Tuttle Health Sciences Center  
12777 N. Rockwell Avenue  
Oklahoma City OK 73142  
[www.francistuttle.edu](http://www.francistuttle.edu)  
(405) 717-4900

## ACCREDITATION/APPROVAL STATUS

The Surgical Technology Program is approved by the following agencies.

Agency	Date of the Next Approval
The Surgical Technology Program at Francis Tuttle Technology Center at the Rockwell Campus located in Oklahoma City, Oklahoma is accredited through the State of Oklahoma by the:	
Oklahoma Board of Career & Technology Education 1500 West 7th Ave. Stillwater, Oklahoma 74074 1-405-377-2000 <a href="http://CareerTech.oklahoma.gov">CareerTech (oklahoma.gov)</a>	Fall 2025
Oklahoma State Department of Education 2500 North Lincoln Boulevard Oklahoma City, Oklahoma 73105 1-405-521-3301 <a href="http://Oklahoma State Department of Education">Oklahoma State Department of Education</a>	

## THE INFORMATION IN THIS PACKET IS SUBJECT TO CHANGE

### NONDISCRIMINATION POLICY

Francis Tuttle is in compliance with Title VII of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title IX of the Education Amendments of 1972, Americans with Disabilities Act, and other federal and state laws and regulations and shall not discriminate with regard to race, color, religion, gender, national origin, age, marital status, veteran status, or disabilities. This policy is followed in the operation of its education programs and activities, recruitment, admissions, employment practices and other education services.

Inquiries concerning this policy may be directed to either the Human Resources Executive Director or Deputy Superintendent who both serve as Coordinator of Title IX and Section 504 responsibilities for all campuses of Francis Tuttle Technology Center, 12777 N. Rockwell, Oklahoma City, Oklahoma 73142-2789, telephone 405-717-7799.

## TABLE OF CONTENTS

<b>Application and Program Dates .....</b>	<b>2</b>
<b>Application Process .....</b>	<b>2</b>
<b>Program Overview .....</b>	<b>3</b>
<b>Admission Requirements.....</b>	<b>3</b>
Academic Admission Requirements .....	3
Assessment Testing Information.....	3
Non-Academic Admission Requirements .....	4
Physical and Mental Requirements.....	4
International Applicant Requirements .....	5
<b>Preference Points System.....</b>	<b>7</b>
<b>Requirements for New Students .....</b>	<b>9</b>
Criminal Background Check .....	9
Urine Drug Screening.....	9
Marijuana Statement .....	9
Tuition Payment .....	9
Computer Equipment and Literacy Requirements .....	10
Additional Documentation.....	10
CPR-BLS.....	10
<b>Application Forms</b>	
ST Application Checklist.....	11
Validation of Work Experience Form .....	12
Background Check Procedures and Release of Information Form .....	13

## APPLICATION AND PROGRAM DATES

Important application and program date information is noted in the chart below.

Enrollment Option	Program Option Length	Application Deadline	Selected Applicants Notified	Class Begins	Last Day of Class
Spring Cohort <ul style="list-style-type: none"><li>• 2025</li><li>• January - December</li></ul>	Begins: January Ends: December Duration: 10 months depending on clinical and lab schedule. A summer break is included. *	Second Friday in November	Three weeks after the application deadline	Tuesday January 7, 2025	TBD December 2025 *

*\* Dates are subject to change.*

## APPLICATION PROCESS

**Application to the Surgical Technology (ST) Program CANNOT BE COMPLETED ONLINE**  
**One must complete the general paper application to Francis Tuttle Technology Center.**

Applications and all supporting documents are to be submitted in person to the Career Planning Center (CPC) on the first floor of the Rockwell Campus Center, Room A1040. An advisor will assess the applicant's file for completion. It is the applicant's responsibility to verify the completeness of the application file with a Career Advisor. **Only completed files with all documents on the checklist, transcripts, and test scores verifying eligibility requirements will be forwarded to the program director for review.**

Due to the volume of applications and the number of items per applicant, applicants must submit all of the required documents at one time.

All applications (regardless of submission date) are considered current from January 1 – December 31. After two admission cycles, the applicant should submit a new FTTC application, and ST Enrollment Option form. Assessment test results may also need to be updated.

## PROGRAM OVERVIEW

The Surgical Technology Program is designed to prepare students for a career as a Surgical Technologist, a critical member of the surgical team. Surgical Technologists assist in surgical operations, preparing the operating room, sterilizing instruments, and ensuring that the surgical team has the necessary tools and supplies. This program combines classroom instruction with hands-on clinical experience to equip students with the skills and knowledge required to excel in this fast-paced and demanding field.

**Please note:** This program is open exclusively to post-secondary adult students. Applicants must have completed high school or obtained an equivalent diploma, such as a GED, prior to applying.

### Program Schedule

Class begins on January 7th, 2025 and ends in December 2025. \*

Class will be held from 0755 to 1530 Monday – Friday with a lunch break around midday.

Clinicals will begin in August, at various locations, Monday -Thursday from 0630-1430\* with an admin/class day every Friday.

*\*Times/dates may vary depending on the schedule.*

## ADMISSION REQUIREMENTS

### 1. Academic Admission Requirements\*

- a. Admission to Francis Tuttle Technology Center.
- b. Proof of High School Graduation from a high school in the United States or Equivalent.
- c. Must meet minimum Assessment Test requirements; see boxes below. **Scores must be less than 2 years old at the time of application**

*\* International applicants may have to meet other admission requirements*

Accuplacer Next Generation
Reading - 240 Writing - 240 Math - 240

**Applicants must submit Assessment Test scores. The following options qualify for the Assessment Test requirements:**

### **Assessment Testing Information**

**Accuplacer Next Generation Testing** – The Accuplacer Next Generation Exam is administered at Francis Tuttle and is also available at many other colleges and universities.

- [Frequently Asked Questions | Francis Tuttle Technology Center](#)

**DAT (Abstract Reasoning)** - To be administered on campus at the Testing Center or results provided by applicant. (\$17 fee)

**Schedule the above two exams at** [Francis Tuttle Technology Center - Rockwell Campus Exam Selection | RegisterBlast](#)

**Dexterity Test** – To schedule, contact Program Director Nathaniel Beck at [Nathaniel.Beck@francistuttle.edu](mailto:Nathaniel.Beck@francistuttle.edu).  
*Title email Dexterity Test Appointment.*

## **2. Non-Academic Admission Requirements**

Criteria taken into account when admitting first time or transfer students:

- Whether the applicant has been expelled, suspended, or denied admission by any educational institution.
- Whether the applicant's conduct has been such that if the applicant were a student at the time of the conduct in question would have been grounds for expulsion, suspension, dismissal, or denial of readmission to the program.

Criteria taken into account when readmitting withdrawn students:

- Reason for withdrawal
- Faculty recommendation
- Actions taken to correct deficiencies

Students must have reliable transportation for both class/lab and clinicals.

CPR-BLS for healthcare providers – to be taken after acceptance into the program.

Provided documentation of:

- OSBI background check.

## **3. Physical and Mental Requirements**

The following minimal physical and mental requirements are necessary for successful progression through the Practical Nursing Program:

- Ability to lift or move weights of up to 35% of recommended body weight (approx. 50 pounds).
- Motor ability necessary to ambulate independently in clients' rooms and in work areas.
- Visual acuity sufficient to observe and assess client behavior, prepare and administer medications, and accurately read monitors and computer screens.
- Auditory acuity sufficient to hear instructions, requests, monitoring alarms, and to auscultate heart tones, breath sounds, and bowel sounds.
- The ability to speak, write, and comprehend the English language proficiently (safety issue).
- The ability to communicate in a professional manner and establish rapport with clients and colleagues.
- The ability to resolve conflicts appropriately and function effectively under stress.
- The absence of situations where a court has adjudged a student incompetent, mentally ill, chemically dependent, or dangerous to the public.

Students in the Surgical Technology Program will be held accountable for the performance of these requirements while they are in the program.

## INTERNATIONAL APPLICANT REQUIREMENTS

### Definition

The term “International Student” is defined as a person for whom **English Is A Second Language** and/or who has graduated from high school in a foreign country.

### I-20 Documentation

Be aware that Francis Tuttle Technology Center does not issue I-20 documentation.

### High School Equivalency

High School Equivalency Assessment letter indicating foreign country education is equivalent to US High School education is required as proof of high school equivalency. The evaluation and letter are available through the International Students office at many colleges and universities. It can also be obtained from World Education Services at [www.wes.org](http://www.wes.org).

To apply for an Oklahoma High School Diploma, complete the top portion of this application and submit to the above address along with the following documents:

1. Official sealed transcript from an accredited Oklahoma college or university with 30 earned credit hours. Any person who has been admitted to any accredited college or university may be awarded a high school diploma by the State Department of Education within this state, provided that such person has successfully completed at least thirty (30) hours of college work at an accredited college or university. Title 70 O.S. § 24-116

OR

Official transcript from an accredited out of state college or university with 30 earned credit hours with a sealed letter from an accredited Oklahoma college or university stating transferrable hours and proof of prior enrollment in an Oklahoma school. Any person who has previously been an Oklahoma student and has earned at least thirty (30) hours of college credit at an accredited college or university may apply for a diploma under this section, regardless of whether the credits were earned at an institution located in Oklahoma. A former Oklahoma student applying for a diploma after earning credits from an accredited college or university outside Oklahoma must submit an official transcript showing credits earned, as well as documentation showing that the applicant was previously an Oklahoma student. OAC 210: 35-3-47 2.

2. Government issued photo ID
3. See the following link to complete the application: [Application for OK HS Diploma.pdf](#)
4. Same day service, if you “walk-in” to the office before 3:30 pm
5. Can obtain by mail and takes approximately one week.

For More Information Contact

Oliver Hodge Education Building - Capitol Complex  
2500 N. Lincoln Blvd. Room 210  
Oklahoma City, OK 73105-4599  
Phone: 405-521-3369

Students may also meet this requirement by passing a high school equivalency exam.

### International Students Requirement

If not a U.S. citizen, submit a copy of either a current VISA, Passport number, or verification of permanent resident status.

## Accuplacer English as a Second Language (ESL)

ALL international students for whom English is a second language, regardless of U.S. citizenship, must present evidence of proficiency in the English language by submitting the following Accuplacer ESL test, in addition to meeting the **required minimum scores** for admission:

- ESL Reading Skills 80
- ESL Sentence Meaning 80
- ESL Language Use 80
- ESL Listening 80

Francis Tuttle administers the Accuplacer ESL exam in the Testing Center. However, if applicants have previous results, within the last two years, they must be submitted with the application.

Accuplacer ESL Exemption: International students who meet one of the exceptions below are exempt from taking the test.

- 1) A student is from one of the countries included in the list of English-Speaking Countries (See below for a list of Exempt Countries), or
- 2) A student has earned a baccalaureate degree from a regionally accredited United States college or university, or
- 3) A student has attended and earned a high school diploma from a United States high school with an overall GPA = 2.5 (minimum).

## English Speaking Countries – No Accuplacer ESL test Required

Antigua	Namibia
Australia	New Zealand
Barbados	Nigeria
Belize	Sierra Leone
Bermuda	Singapore
Botswana	South Africa (English-speaking, i.e., not Afrikaans)
Canada (English-speaking, i.e., not Quebec)	St. Lucia
Cayman Islands	St. Vincent
Dominica	Swaziland
Gambia	Tanzania
Ghana	The Bahamas
Grand Turks and Caicos Islands	The British Virgin Islands – St. Kitts-Nevis, Anguilla
Grenada	Trinidad and Tobago
Guyana	U.S. Virgin Islands – St. Thomas, St. Croix, St. John
Ireland	Uganda
Jamaica	United Kingdom
Kenya	Zambia
Lesotho	Zimbabwe
Liberia	
Montserrat	

**NOTE:** Puerto Ricans are U.S. citizens but the Accuplacer ESL is required.



**PREFERENCE POINTS SYSTEM**  
**Maximum Number of Points = 36**

Applicants are ranked for admission by preference points. The four categories of preference points are: Grade Point Average, Assessment Test Scores, Credit for College Degree and Health Care Certification/License.

**1. Grade Point Average** – The Cumulative GPA will be used.

High School GPA or College GPA	GED prior to 2002 Overall Average Score	GED 2001-2016 Grand Total Score	GED after 2016 Grand Total Score
2.50 - 2.99      1 pt	50 – 59      1 pt	2500-2999      1 pt	145-164      1 pt
3.00 - 3.49      2 pts	60 – 69      2 pts	3000 3499      2 pts	165-174      2 pts
3.50 - 4.00      3 pts	70 – 80      3 pts	3500-4000      3 pts	17-200      3 pts

**2. Assessment Test Scores** – Only the Accuplacer Next Generation or ACT Scores are acceptable, but must have been completed **within the 2 years** of the date of application. Only one score for each section will be used for a maximum of 15 points.

Accuplacer Next Generation Scores					
Writing		Reading		Math	
Scores	Points	Scores	Points	Scores	Points
240-255	1	240-255	1	240-255	1
256-269	2	256-269	2	256-269	2
270-279	3	270-279	3	270-279	3
280-289	4	280-289	4	280-289	4
>289	5	>289	5	>289	5

**3. Credit for College Degree:** Preference points will be given for the following college degree(s) completion:

*Degree Completed	Points
Associate's Degree	2
Bachelor's Degree	3
Graduate Degree (Master's or Doctorate)	4

\*Degree must have been completed from a **regionally** accredited public or private institution of higher education in the United States.

**4. Health Care Certification/License** – Must provide:

- Copies of current certificates or licenses. (CPR does not qualify for preference points)
- Signed copy of the Francis Tuttle Technology Center "Validation of Health-Related Work Experience Form" The form must be completed fully for points to be awarded.
- Proof of 30 hours or more must be provided on the "Validation of Health-Related Work Experience" form for points to be counted.

The **MAXIMUM** number of points in this area is 5

Health Care Certification(s)/License, Experience, and/or FTTC Pre-Nursing Program Credit	Points
Current/Non-Expired Health Care Certificate/License – (1 point per certificate/license, maximum of 2 points)	2
Health Care Experience ( $\geq 6$ months full-time) with Limited Patient Contact Examples: Unit Secretary, Medical Office Receptionist, Phlebotomist, Scrub Tech, Dietary Aid, Pharmacy Tech, Health Unit Coordinator, <b>OR</b>	2
Health Care Experience ( $\geq 6$ months full-time) with Direct Patient Contact Examples: CNA, AUA, Medical Assisting	3

## REQUIREMENTS FOR NEW STUDENTS

Once an applicant has been selected for admission the following items must be completed by the first day of class in order for the student to be fully accepted into the program. Complete information regarding these activities is provided to the applicant when she/he is notified of acceptance.

### 1. Criminal Background Check

Every applicant selected for admission must complete the Group One Background Check process. This background check collects data from national, state, and county sources including sex offender and violent offender registries. The approximate cost is \$45.00 and must be paid by credit card. An "Affirmation of Criminal History Background Check Procedures and Self-Disclosure Statement and Release of Information" form must be submitted prior to beginning the program.

Applicants with a positive criminal history report may be denied access by partnered clinical facilities. In the event this should occur and an equal, alternative experience cannot be arranged, the applicant will be dismissed from the program.

### 2. Urine Drug Screen

Every selected applicant must submit to a urine drug screen. The screen must be performed at the contracted facility and be dated after notification of contingency admission. Information regarding how to complete the urine drug screen will be included in the acceptance packet. The approximate cost of the urine drug screen is \$50.00. An "Affirmation of Drug Testing Procedures and Release of Information" form must be submitted prior to beginning the program.

Applicants with a positive drug screen report may be denied access by partnered clinical facilities. In the event this should occur and an equal, alternative experience cannot be arranged, *the applicant will be dismissed from the program.*

### 3. Marijuana Statement

While medical marijuana is legal in the State of Oklahoma, it is not accepted in healthcare or in any of the Health Sciences Center's Programs at Francis Tuttle Technology Center. *A positive test for marijuana will result in the student's loss of eligibility to remain in a Health Sciences Center program.*

### 4. Tuition Payment

[Financial Aid | Francis Tuttle Technology Center](#)

Tuition must be paid or payment arrangements made, approximately one month prior to the first day of on campus attendance. Applicants admitted to the program should receive a letter from the **Cashier's Office** outlining the steps for tuition payment.

Applicants seeking financial aid should begin the process at the time their application is submitted. The first step in this process is to complete the "Free Application for Federal Student Aid" (FAFSA) at [www.fafsa.gov](http://www.fafsa.gov). The Financial Aid Office is located in Campus Center-Room A1094. The phone number is (405)717-4315.

Information regarding refunds is located in the ST Student Handbook (website link is located on the Surgical Technology program information page on Francis Tuttle Technology Center's website at [www.francistuttle.edu](http://www.francistuttle.edu))

## **5. Computer Equipment and Literacy Requirements**

Equipment: A computer with a camera, microphone, speaker, and reliable internet are required for online instruction. MS Office software is required and may be used on either Microsoft or Mac computers. iPad and smart phones are not compatible with some applications used in the ST program. Computer Literacy: Basic computer skills required. Students will be using MS Office software, internet, downloading apps, etc.

**NOTE: In the event that a statewide shutdown of schools occurs, all instruction will be moved to an online format.**

## **6. Provide additional documentation of:**

Proof of current physical.

TB skin test – may be completed once in program.

Proof of current immunization record.

Drug screening – prior to first day of class and randomly throughout the program.

Hepatitis B series, positive Hep B titer or declination waiver.

Flu vaccine agreement.

Other vaccines, or paperwork, may be required, per clinical sites. \*

## **7. CPR-BLS for Healthcare Providers**

To be taken after acceptance into the program or current documentation provided once accepted into the program.

## SURGICAL TECHNOLOGY PROGRAM – APPLICANT CHECKLIST

**Applicant's Name (printed):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Directions:** You are responsible for submitting all required documents with this checklist, to ensure that your application packet is complete. Please initial each line before you submit all required documents to the Health Sciences Advisor in the Career Planning Center (CPC) on the Rockwell campus. **Incomplete application packets will not be considered for acceptance.** It is the applicant's responsibility to ensure that a complete packet has been submitted.

<b>Applicant Initials</b>	<b>CPC Initials</b>
-------------------------------	-------------------------

\_\_\_\_\_

\_\_\_\_\_

**APPLICATION:**

- ☐ Francis Tuttle Adult Application for Admission form

**HIGH SCHOOL COMPLETION/EQUIVALENCY; COLLEGE/CTE TRANSCRIPT(S):**

- ☐ High school transcript with graduation date or diploma (original or true copy made by CPC staff), or  
☐ GED scores (original or true copy made by CPC staff), or  
☐ Oklahoma Department of Education issued diploma, or  
☐ International Equivalency Assessment

**Additional Documentation:**

- ☐ Official transcript(s) from college and/or Career Tech center  
     - List schools attended:  
     - Type of college degree/date completed:

\_\_\_\_\_

\_\_\_\_\_

**ASSESSMENT TEST SCORES (Submit Copy – Minimum Scores Listed):**

- ☐ Accuplacer Next Generation (Valid for 2 years):  
     Reading 240/\_\_\_\_\_; Math 240/\_\_\_\_\_; Writing 240/\_\_\_\_\_  
☐ DAT testing \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**INTERNATIONAL STUDENTS:**

- ☐ Submit Accuplacer ESL Test Score (Minimum):80  
     Reading\_\_\_\_\_Sentence\_\_\_\_\_Language\_\_\_\_\_Listening\_\_\_\_\_  
☐ If from an exempt country, list the country: \_\_\_\_\_  
☐ If not a US citizen, submit copy of either a current VISA, Passport number, or verification of permanent resident status

\_\_\_\_\_

\_\_\_\_\_

**ADDITIONAL DOCUMENTATION:**

- ☐ Copy of current/non-expired health certificate(s) or license (two maximum)  
     #1: \_\_\_\_\_ #2: \_\_\_\_\_  
☐ Validation of health-related work experience (**must use form provided**)  
☐ **Completed** OSBI Criminal History Record: <https://osbi.ok.gov/services/criminal-history>  
☐ **Completed** Affirmation of Criminal History Background Check (signed form)

**Applicant's Signature:** \_\_\_\_\_ **Date Submitted:** \_\_\_\_\_

Revised September 2024

**Francis Tuttle Technology Center  
Division of Surgical Technology**

**VALIDATION OF HEALTH-RELATED WORK EXPERIENCE FORM**

**DIRECTIONS:**

1. **STUDENT** completes SECTION A of the form and then delivers to the Employer to validate the work experience.
2. **EMPLOYER** completes SECTION B and returns to the student to include in the application packet.

**SECTION A**

**STUDENT NAME – PRINTED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_

**Job Duties:** \_\_\_\_\_

\_\_\_\_\_

I give permission for my present/previous supervisor to release information concerning my employment background.

**Student Signature** \_\_\_\_\_

**SECTION B**

**Agency/company name:** \_\_\_\_\_

**Agency phone number:** \_\_\_\_\_

**Employee job title:** \_\_\_\_\_

**Employed from:** \_\_\_\_\_ **to** \_\_\_\_\_

**Average hours worked per week:** \_\_\_\_\_  
(must be 30 hours or more for points to be counted)

**Employer Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**FRANCIS TUTTLE TECHNOLOGY CENTER – HEALTH SCIENCES CENTER**

**AFFIRMATION OF CRIMINAL HISTORY BACKGROUND CHECK PROCEDURES  
AND SELF-DISCLOSURE STATEMENT AND RELEASE OF INFORMATION FORM**

As an applicant to one of the professional Health Sciences programs, I affirm that I have read and understand the program's Criminal History Background Check Procedures, and

I fully understand that I may be denied admission to the program based upon an evaluation of records by authorized personnel, and

I understand that any clinical facility may deny my participation in clinical experiences based upon criminal background check records. If this occurs, I will be subject to dismissal from the program.

I understand that authorized school personnel are responsible to provide a copy of the criminal history background check records (and related course documents) to a clinical site for their review, if deemed necessary.

I understand that I am responsible to report any arrests and/or convictions that may occur after submission of my Criminal History Background Check to the program director. The program director may require another background check (at my expense), if deemed necessary.

I further understand that I am responsible for self-disclosure by completing this form by answering all questions completely and honestly. I understand that I will be subject to dismissal, if accepted to the program, if answers are found to be inaccurate. In addition, I understand that failure to report subsequent arrests or convictions may result in dismissal from the program.

**Self-Disclosure Statement** (Check either Yes or No)

Do you have a current criminal charge that is pending?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you ever had a criminal conviction, including a deferred sentence?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you ever had a professional certification or license suspended or revoked?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Are you currently on parole, probation, or a deferred sentence?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Are you listed on any state's Sex Offenders Registration List?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

**Release of Information**

My signature below indicates that I grant full permission, without recourse, for the use and release of information as necessary for the purpose explained.

**Applicant Name/Signature**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Legal Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Name of Program \_\_\_\_\_

# OKLAHOMA STATE BUREAU OF INVESTIGATION

## Criminal History Record Information Request

6600 North Harvey Place  
Oklahoma City, OK 73116  
(405) 848-6724  
(405) 879-2503 FAX  
<https://osbi.ok.gov/>

### Type Of Search Requested:

- ☐ X Name Based - \$15.00  
☐ X Sex Offender - \$2.00  
☐ X Mary Ripsey Violent Offender - \$2.00  
☐ State Fingerprint-based - \$19.00  
\* Must provide fingerprint card.

DATE \_\_\_\_\_

Request Submitted via:

☐ Fax ☐ Mail ☐ In Person  
**REQUESTS WILL BE RETURNED  
IN THE MANNER RECEIVED.**

Mail requests should include postage-paid reply envelope.

Fax requests must include payment by credit card and a dedicated Fax Phone Line for return of completed search:

\* Includes name based search.

### ACCEPTABLE FORMS OF PAYMENT:

☐ CASH ☐ CASHIER'S CHECK / MONEY ORDER

*For Visa, MasterCard and Discover, security code is 3 digits on back of card.*

☐ BUSINESS CHECK *No Personal Checks Accepted.*

☐ CREDIT CARD *For Amex, security code is 4 digits on front. These are the only cards accepted.*

CREDIT CARD # \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_ SECURITY CODE \_\_\_\_\_

CARD HOLDER \_\_\_\_\_

*Please print the name of the individual card holder as it appears on the credit card.*

CARD HOLDER SIGNATURE (REQUIRED) \_\_\_\_\_

### REQUESTOR INFORMATION: (Type or print clearly in blue or black ink) Results will only be returned to the original requestor

REQUESTOR'S NAME \_\_\_\_\_ SIGNATURE OF REQUESTING PARTY \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

*Requestors outside of the United States are strongly encouraged to provide an e-mail address for purposes of correspondence.*

PURPOSE OF REQUEST \_\_\_\_\_

### SUBJECT INFORMATION: (Type or print clearly in blue or black ink)

*Forms with corrections made with white out or by striking through the fields in this section will not be processed.*

NAME \_\_\_\_\_  
LAST FIRST MIDDLE

ALIAS/MAIDEN NAME(S) \_\_\_\_\_  
MAXIMUM OF THREE ALIAS NAMES PER REQUEST

DATE OF BIRTH \_\_\_\_\_ (MM/DD/YYYY). *If date of birth is unavailable, include exact age of subject.*

RACE \_\_\_\_\_ SEX \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

### SEARCH RESULTS (Please do not write in the spaces below):

Oklahoma State Bureau of Investigation  
Computerized Criminal History

Oklahoma Department of Corrections  
Sex Offender

Oklahoma Department of Corrections  
Violent Offender



---

*For questions on the Sex Offender / Violent Offender Registry, please contact the Oklahoma Department of Corrections.*

*OSBI CHRU 02/2019*

# FRANCISTUTTLE

## TECHNOLOGY CENTER

### ADULT COMPETITIVE HEALTH APPLICATION FOR ADMISSION 2024-2025

#### PERSONAL INFORMATION Complete all pages – please print.

Date of Application: \_\_\_\_\_

Legal Name: \_\_\_\_\_  
(Last) (First) (Preferred First Name) (MI)

Mailing Address: \_\_\_\_\_  
(Street) (Apt)

(City) (State) (ZIP) (County)

E-mail: \_\_\_\_\_ Primary Phone: \_\_\_\_\_ ☐ ☐

Work Phone: \_\_\_\_\_ Cell Phone : \_\_\_\_\_ May we text you at this number? ☐ Yes ☐ No

Social Security #: \_\_\_\_\_ Birthdate: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

#### Ethnicity (Optional) ☐ ☐

Are you Hispanic or Latino? ☐ Yes ☐ No Please mark all that apply: Gender: ☐ Male ☐ Female ☐ Other

☐ American Indian/Native Alaskan ☐ Black, or African American ☐  
☐ Hawaiian/Pacific Islander ☐ Asian ☐ White, not of Hispanic origin

#### Educational History ☐ ☐

Do you have a high school diploma or GED? ☐ Yes ☐ No Have you attended Francis Tuttle before? ☐ Yes ☐ No Year(s)? \_\_\_\_\_

If under a different name, please list: \_\_\_\_\_ ☐

Highest education level achieved: ☐  
☐ Less Than a High School Diploma ☐ Some College, No Degree ☐ Associate's Degree ☐ Master's Degree  
☐ High School Graduate/GED ☐ Technical Diploma ☐ Bachelor's Degree ☐ Doctorate Degree

List all colleges/tech centers you've attended: \_\_\_\_\_ ☐ ☐

Do you have previous related training or education that you would like evaluated for advanced standing credit? ☐ Yes ☐ No

#### Emergency Contact Information

##### Contact 1

Name \_\_\_\_\_

Relationship to you \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_

Cell Phone \_\_\_\_\_

##### Contact 2

Name \_\_\_\_\_

Relationship to you \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_

Cell Phone \_\_\_\_\_

#### Miscellaneous ☐ ☐

Have you ever been convicted of a felony? ☐ Yes ☐ No

If yes, in what state(s) did you receive this conviction(s)? \_\_\_\_\_

Have you ever been dismissed from another educational institution for disciplinary action? ☐ Yes ☐ No If yes, please explain \_\_\_\_\_

Background check will be required in any/all states in which a felony conviction was received. For felony convictions in Oklahoma, form available at [www.ok.gov/osbi](http://www.ok.gov/osbi). Please include a written statement.

Are you a U.S. citizen? ☐ Yes ☐ No If no, what is your country of citizenship? \_\_\_\_\_

#### Consent to Receive Automated Messages

Francis Tuttle Technology Center may use automated messages to communicate with our students regarding enrollment and attendance.

☐ You do not want to be contacted, please check the box.

☐ Opt-out

FRANCIS TUTTLE USE ONLY

Name \_\_\_\_\_

Major accepted in \_\_\_\_\_



This is a Project BUILD application

FT AM PM EV

FT ID # \_\_\_\_\_

#### Notice:

Completion of this application by itself does not constitute admission to Francis Tuttle Technology Center or placement on a waiting list for a program that may be full at the time application is made.

## PROGRAM AREAS

All Health Science Programs are Full Time Daytime Programs

**Health Sciences**, Rockwell Campus (NW 122nd & Rockwell)

Practical Nursing\* ☐

Respiratory Care\* ☐

Surgical Technology\* ☐

*Admission into Health Sciences programs, requires submission of additional documents. Application checklist available online.*

*\* State licensing agencies require documentation for U.S. citizenship for licensure in this area.*

## TUITION INFORMATION

### Tuition Payment and Financial Aid

Note: Financial aid is not provided for the online programs.

Federal Student Aid and State Grants are not available to any program except Practical Nursing.

Will you be applying for Next Step Scholarship? ☐ Yes ☐ No

To receive the Next Step Tuition-Waiver Scholarship, you must complete the Next Step Tuition Waiver application:

You may download an application at: <https://www.francistuttle.edu/sites/default/files/2021-03/Next%20Step%20Application-2021.pdf>

If applying for the Next Step Tuition-waiver scholarship, please list the name of your high school:

Are you a Veteran? ☐ Yes ☐ No

Have you resided in Oklahoma for the past 12 months? ☐ Yes ☐ No

### \*Next Step Tuition-Waiver Scholarship

Through this program, new adult students who begin a Career Training Program prior to their 21st birthday will receive a tuition waiver for one field of study. Scholarship recipients will be required to pay for books, clothing and any other materials or fees required by that Career Training Program.

#### **Qualifying Criteria:**

- Applicant must submit a Next Step Tuition Waiver application and proof of high school graduation to the Financial Aid Office.
- Applicant must have a diploma from one of Francis Tuttle Technology Center's partner schools, or have lived within the Francis Tuttle Technology Center school district upon high school graduation.
- Applicant must start their Career Training Program before their 21st birthday.
- Many program openings are filled on a "competitive basis." Students must qualify for program openings under the same standards and criteria as all other students.

For additional scholarship opportunities, check out our website,

<https://www.francistuttle.edu/admissions-costs/financial-aid/types-aid/scholarships>

**Veteran Scholarship**

[www.francistuttle.edu/scholarships](http://www.francistuttle.edu/scholarships)

### Tuition Adjustments for Withdrawals (*Not applicable to Respiratory Care applicants*)

Students who withdraw, prior to the last one-fourth (1/4) of their career major, are only responsible for paying for the hours they were scheduled to attend prior to their withdrawal.

There will not be tuition adjustment for students withdrawing in the last one-fourth (1/4) of their career major.

There is not a tuition adjustment for early completion.

For more information regarding financial aid and scholarships, please contact the Financial Aid Office at **405.717.4315** or via email at [finaid@francistuttle.edu](mailto:finaid@francistuttle.edu). For more information on tuition payment options, please contact the Cashier at **405.717.4224** or via email at [contact@francistuttle.edu](mailto:contact@francistuttle.edu).

**Financial Aid Students:** If a student completely withdraws from school, the school must calculate according to a specific formula the portion of the total scheduled financial assistance he or she has earned and therefore is entitled to receive up to the time of withdrawal. The portion of the federal grants the student is entitled to receive is calculated by comparing the number of hours the student was scheduled to complete in the payment period to the total number of hours in the payment period. Once a student has been scheduled to complete more than 60% of a payment period, he or she has earned all aid for that period. If a student has not been scheduled to complete more than 60% of a period, that student may owe funds back to the federal program. Francis Tuttle will also return to the Title IV Programs the percentage of unearned tuition of students who do not complete more than 60% of a period.

### Admissions Agreement

I certify that all information given here is complete and correct to the best of my knowledge. I understand that submission of false information or academic records is grounds for denial of admission or immediate suspension. I agree to submit all required credentials, including those specifically mentioned, and that failure to do so may result in my being denied admission.

I further agree that upon admission to Francis Tuttle, it is my responsibility to read the Francis Tuttle student handbook and abide by its rules and regulations regarding conduct and other obligations which have been made by properly constituted authorities.

### Payment of Tuition Agreement

I understand that I am fully responsible for payment of tuition at Francis Tuttle Technology Center. It is my responsibility to obtain the necessary documents from my funding agency each semester and to be aware of the amount of those funds. In the event that my funding agency does not pay for tuition and other expenses for my program, I understand that I must pay those expenses from my personal funds.

### Release of Information

I, ☐ do ☐ do not give permission/consent to Francis Tuttle Technology Center to release academic and personal information (for example, grades, educational progress, or attendance records) from school files and sources to an inquiring school or agency.

I understand that completing this form with written consent (signature) releases Francis Tuttle Technology Center and any person or persons connected with Francis Tuttle Technology Center from any and all liabilities of student confidentiality relating to any information described above which is given to the inquiring school or agency.

### Adult Model Release and Consent to Use Name and Picture

I ☐ do ☐ do not give permission/consent to use my name and photograph or photographs for advertising and promotional purposes in the interest of Francis Tuttle, and/or its designates.

I understand that this consent extends to photographs and electronic images of myself, which may be used in printed materials, television and video productions, web sites, CD ROMs or other technologies. Any use of my image will relate to the school and its activities only. I also understand that I will receive no compensation for use of my picture and/or name.

**I HAVE READ, DO UNDERSTAND, AND WILL ABIDE BY ALL OF THE POLICIES IN THIS APPLICATION.**

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
TODAY'S DATE

**To review Francis Tuttle's crime and safety report, please visit  
<https://www.francistuttle.edu/about/consumer-information/campus-safety>.  
For a hard copy of the report, please contact (405) 717-4315.**

### Nondiscrimination Policy

It is the policy of Francis Tuttle not to discriminate with regard to race, color, religion, gender/sex, national origin, age, marital or veteran status, or disabilities. This policy shall be followed in the operation of its educational programs and activities, recruitment, admissions, employment practices and other educational services. Inquiries concerning application of this policy may be directed to the Human Resources Director, who serves as the Coordinator of Title IX; Section 504; and Americans with Disabilities Act for all campuses, at 12777 N. Rockwell, Oklahoma City, OK 73142-2789, (405) 717-7799.