

# COLLEGE OF NURSING AND TECHNOLOGY

## Confidential Qualification Questionnaire

Program:  LVN  Ultrasound  Medical Assistant

### PERSONAL INFORMATION

FIRST NAME \_\_\_\_\_ LAST NAME: \_\_\_\_\_

SOCIAL SECURITY NO. \_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME PHONE \_\_\_\_\_

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

DRIVERS LIC/ID # \_\_\_\_\_ MARITAL STATUS: \_\_\_\_\_ NUMBER OF DEPENDANTS: \_\_\_\_\_

CELL PHONE NUMBER: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

EMERGENCY CONTACT NAME / NUMBER: \_\_\_\_\_

REFERENCE NAME / NUMBER / ADDRESS: \_\_\_\_\_

ARE YOU A U.S. CITIZEN?  YES  NO \_\_\_\_\_

IF NO, PLEASE PROVIDE YOUR ALIEN REGISTRATION NUMBER

HOW DID YOU HEAR ABOUT COLLEGE OF NURSING & TECHNOLOGY? \_\_\_\_\_

### EMPLOYMENT DATA

OCCUPATION: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_

WORK ADDRESS: \_\_\_\_\_ WORK # \_\_\_\_\_

### CERTIFICATION OF EDUCATION

I HAVE A  HIGH SCHOOL DIPLOMA  G.E.D. Granted to me on \_\_\_\_/\_\_\_\_/\_\_\_\_ from \_\_\_\_\_

City \_\_\_\_\_, STATE/Country \_\_\_\_\_ HIGHEST GRADE COMPLETED: \_\_\_\_\_

LIST SCHOOLS ATTENDED AFTER HIGH SCHOOL:  I HAVE NOT ATTENDED ANY OTHER POSTSECONDARY SCHOOLS

SCHOOL NAME \_\_\_\_\_ CITY \_\_\_\_\_ STATE/COUNTRY \_\_\_\_\_

SCHOOL NAME \_\_\_\_\_ CITY \_\_\_\_\_ STATE/COUNTRY \_\_\_\_\_

### PERSONAL DATA

I PREFER WORKING WITH:  OTHER PEOPLE  ALONE

I PREFER MY JOB TO BE:  CREATIVE  ROUTINE AND DETAIL

I WORK WELL:  ONE MY OWN  WITH SUPERVISION

IF ACCEPTED AS A STUDENT:  I WILL NEED FINANCIAL ASSISTANCE

**PLEASE CHECK ALL THE APPROPRIATE BOXES** (For statistical use only. Required by State and Federal Agencies)

Black (Non-Hispanic)  Asian or Pacific Islander  Resident Alien/Refugee  Visually Impaired  Physical Handicap

American or Alaskan Indian  White (Not Hispanic)  Limited English  Hearing Impaired

Hispanic  Speech Impaired  Other Impairments \_\_\_\_\_

I hereby certify that the information above is true and correct to the best of my knowledge. Furthermore, I understand that enrollment is on a first come first serve basis. If the processing time for any loans takes longer than the number of students enrolling by payment or having loans approved quicker, I may lose my seat in the class.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_