

# Cardiovascular Technology Program Application for Admission

Date: \_\_\_\_\_ NWCC Student ID #: \_\_\_\_\_

**ACT Composite Score:** \_\_\_\_\_ **A&P I/A&P I Lab Grade:** \_\_\_\_\_ / \_\_\_\_\_

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

Preferred Phone number: \_\_\_\_\_

Second Phone number: \_\_\_\_\_

Number for text: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Yes No I have had health-related training:**

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Yes No I have other work experience.**

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **Educational Background**

**GED** Yes No

**High School Graduate** Yes No

If yes, name of high school: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_

**College** Yes No

If yes, name of college(s) Major or Degree Obtained

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Please visit the Northwest website at [www.northwestms.edu/affirmativeaction](http://www.northwestms.edu/affirmativeaction) to view the College's Notice of Non-Discrimination, Equal Opportunity and Affirmative Action.