



Physical Therapist Assistant Program
Science and Health Dept.
University of Cincinnati
Clermont College At UC East
1981 James E. Sauls Sr. Drive
Batavia, OH 45103

Phone: (513) 558-5340

Fax: (513)732-1525

January 3, 2012

Dear PTA Applicant,

Enclosed is an application packet for admission to the PTA Technical Core. Applications will be accepted Monday, March 26 until Friday, April 6, 2012. The complete original application plus 1 additional copy (totaling 2 copies) of the application *must* be received in the Allied Health Office in UC East no later than April 6, 2012 at 3:00 p.m. It is the *student's responsibility* to assure that all the materials, including 2 letters of recommendation forms, documentation of job shadowing hours, and official, unopened transcript(s) have been received by that date. Official transcripts must include Winter 2011-12 grades (or Fall 2011 term grades, if semesters). The applicant may submit the Winter 2011-12 quarter grade report in addition to the official transcript, which may exclude Winter quarter. However, the application *in its entirety* must be enclosed in the same packet. The application may be requested from the program and then typed or neatly printed in black ink. To facilitate an error free packet, the program will hold a series of informational sessions during which time guidelines will be discussed and any student desiring a check off of materials will be offered, without content quality review.

Please be advised that the official transcript may *only* be accepted in its original, college/university sealed, envelope; if the envelope is opened, this transcript is no longer considered valid and subsequently will **NOT** be accepted. If all coursework was taken at UC or its branch campuses, an unaltered, printed degree audit or copy of the student's academic work is sufficient, again supplying the required 2 copies. PTA prerequisite courses may be repeated up to a limit of 15 credit hours or 5 courses, by written request, with two options specified below.

The final component of the application involves a process of timed, written responses to short essay questions. The applicant will be required to meet at UC East campus on a predetermined date during the spring quarter to participate in the above process during the *Preview Session*. An admissions committee of PT and academic community members will assist the faculty in the ratings of and recommendations for advancement to the technical core, which is limited to twenty students. The student will be notified in writing by early May of his or her status, including advice about any incomplete PTA-related course work that will need to be completed by the end of the Spring term. If a seat is conditionally offered to a student at this time, it will be contingent upon the student's successful completion of the remaining Spring quarter course work at a "C" or better grade level in each course attempted. (See course listing below)

If there are any questions concerning applications or admissions, please feel free to contact me at 513-558-5340; the alternate contacts are: Jean Shannon, PT at 513-558-9871 or the Dept. administrative assistant at 513-732-5339.

Sincerely,

Sam Coppoletti, PT, DPT, CSCS
Program Coordinator/Educator
Assistant Professor

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**

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APPLICATION FOR ADMISSION TO THE TECHNICAL CORE
(Please type or print)

Applicant's Name _____
Last First

Home Address _____

Email: _____

Phone _____ Birth Date _____

M # _____

I hereby swear that to the best of my knowledge all of the information I have supplied in this application is true, complete and correct. I realize that the admission process involves a review of my application and college records by the PTA Admissions Committee and give my permission for the information in this packet to be copied and distributed as needed. The decision of the PTA Admissions Committee is final.

Signature _____

Date _____

The Clermont College PTA Program encourages all qualified applicants to apply and admission will be determined without respect to age, race, color, religion, national origin, sex, sexual orientation or status as a veteran.

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**

Admissions Checklist-copy for personal use and include original with application

1. Application to PTA Technical Core _____

2. Transcripts to University of Cincinnati: Clermont College *

Name of College: _____

Name of College: _____

Name of College: _____

3. Recommendations

PT / PTA _____

Science / Health Education Faculty _____

4. Job Shadowing Experience Documentation (See attached)

From: _____
(clinical site name)

From: _____
(clinical site name)

From: _____
(clinical site name)

* Note any other document submitted-e.g. UC degree audit or academic record. Altered records may lead to immediate rejection of the application.

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**

ACADEMIC PREPARATION

A. Completion of Prerequisite Courses

1. Indicate in Column A the month and year of each of the following courses completed.
2. Indicate in Column B the grade you received for each of the following courses.
3. If any of the course requirements have not been met, indicate in Column B the month and year they will be.
4. In Column C, indicate whether your courses were taken (1) while a matriculated student in the College of Allied Health Sciences; (2) while a student in another University of Cincinnati College or division; or (3) at other colleges or universities (indicate college).
5. If you have received administrative approval for a course substitution, indicate the course approved for substitution and the date of approval. (Please attach or comment below)
6. If you have taken a prerequisite course more than once, be sure to report all results from the respective course(s) in the appropriate column(s). **The grades and hours for repeated courses will be averaged in the calculations of points if not formally replaced; or optionally, if the course has been formally replaced, the most recent replacement grade will be used. Limit of one retake in the averaging process.**
7. A minimum grade of “C” is expected in all prerequisite coursework; students may obtain his or her cumulative GPA by performing the calculation, as indicated below. #

OFFICIAL (SEALED, UNOPENED FROM THE UNIVERSITY / COLLEGE) TRANSCRIPT(S) NEED TO BE INCLUDED FOR ALL COURSEWORK TAKEN OUTSIDE UNIVERSITY OF CINCINNATI OR CLERMONT COLLEGE.

<u>Course</u> (credit hours)	<u>Column A</u> Date Completed	<u>Column B</u> Grade or Date to be completed	<u>Column C</u> CAHS, UC or other
English 1 (3)	_____	_____	_____
English 2 (3)	_____	_____	_____
Chem 1 Lect (3)**	_____	_____	_____
Chem 2 Lect (3)**	_____	_____	_____
Chem 3 Lect (3)**	_____	_____	_____
Anat/Phys 1 (4)*	_____	_____	_____
Anat/Phys 2 (4)*	_____	_____	_____
Anat/Phys 3 (4)*	_____	_____	_____
Psychology 1 (3)	_____	_____	_____
Psych II (3)	_____	_____	_____
ALH 187 (or substitute**) (3)	_____	_____	_____
PTA 101 (3)	_____	_____	_____
PTA 173 (3)	_____	_____	_____
PTA 194 (3)	_____	_____	_____
PTA 175 (3)	_____	_____	_____

(* indicate if an approved online A&P refresher course was taken, in addition to the regular courses)
(**exceptions or substitutions, as approved by PTA coordinator, in concert with PTA major advisors)

#Cumulative GPA of above coursework, to date: _____ (Divide total earned quality points by total # of credit hours attaching and entering courses, grades, and hours into the online GPA generator)

<http://www.registrar.iastate.edu/gpa-calc/gpaCalculator.html>

Please note: A minimum grade of “C” is required in all PTA prerequisite coursework and a minimum overall 2.5 GPA in all coursework that leads to graduation. Technical core coursework must be completed at a minimum “C” or above (75%). **Previous Science coursework is valid for 6 years (or 7 years if from the KY Consortia).** The ten **bolded** courses are the essential courses under GPA consideration, while others may be in process. The calculation will be based upon a quarter hour equivalent basis, if transfer/substitute credit arrived in the semester or other system formats.

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**

8. List any College or professional degrees you presently have. Indicate college and date received. (A narrative description or a bulleted list is acceptable)

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**

Part Two
BACKGROUND INFORMATION

1. List the names and addresses of the two people you have asked to recommend you. One should be a Physical Therapist or a Physical Therapist Assistant and the other a College / University Faculty member. Individuals should not be family members or close friends; they should be able to *objectively* comment on your abilities and qualities that would allow you to function successfully in the health care field, specifically as a Physical Therapist Assistant.

A. _____

B. _____

2. Applicants deficient in courses required for admission or with GPA below a 2.5 should use this space to explain to the Admissions Committee the reasons their applications should be considered. *Science courses taken over 6 years ago will need to be repeated to assure the committee that all students are current with regards to this essential information (unless approved by the Program Coordinator in concert with the PTA Major advisor, or unless courses are taken at a KY consortia school-7 year limit).* Students are reminded that a minimum GPA of 2.5 in PTA prerequisite courses is required for consideration for admission and that an overall University GPA of 2.5 is required to graduate from the Clermont College.

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**

3. Please list academic honors, accomplishments, extracurricular and summer activities, including volunteer work and employment. Be sure to mention any activities related to physical therapy. (A narrative description or a bulleted list is acceptable)

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**

REQUIRED RECOMMENDATION TO THE PTA TECHNICAL CORE

Candidate's Name: _____

I the undersigned:

_____ wish to retain the ability to review this recommendation

_____ agree I will not review this recommendation. (please place into a sealed envelope)

Candidate's Signature _____ Date _____

.....
The above student is applying for admission into the Technical Core of the Physical Therapist Assistant Program at the University of Cincinnati Clermont College and has selected you as a reference. If possible, please rate his/her potential for success as a physical therapist assistant, as listed below. **Note to the Recommending Party: please complete as many areas as you deem appropriate, as students earn points by the ratings, as shown in the following table, using 1→5 (1 = least to 5 = best) scale. N/A is reserved for not sufficient information or exposure and averages will reflect this difference. (Copy this form for a total of 2copies)**

	N/A	1	2	3	4	5	COMMENTS
POTENTIAL FOR SUCCESS IN THE HEALTHCARE FIELD							
PROFESSIONALISM							
MOTIVATION							
RELIABILITY							
INTELLECTUAL ABILITY							
INTERPERSONAL SKILLS							
COMMUNICATION SKILLS							
INTEREST IN THE FIELD							

___ **Strongly recommended** ___ **Recommended** ___ **Recommended with Reservations**

___ **Do not recommend at this time-needs more development in more than a few areas.**

___ **An optional letter in addition to the above is attached for more detail.**

Are there any other qualities you feel this individual has or lacks which should be considered by the Admissions Committee? _____

Please indicate how long and in what capacity you have known the applicant. _____

Name/ Signature _____ Title _____

Address and Phone Number _____

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**

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Candidate's Name: _____

I the undersigned:

_____ wish to retain the ability to review this recommendation

_____ agree I will not review this recommendation. (please place into a sealed envelope)

Candidate's Signature _____ Date _____

.....
The above student is applying for admission into the Technical Core of the Physical Therapist Assistant Program at the University of Cincinnati Clermont College and has selected you as a reference. If possible, please rate his/her potential for success as a physical therapist assistant, as listed below. **Note to the Recommending Party: please complete as many areas as you deem appropriate, as students earn points by the ratings, as shown in the following table, using 1→5 (1 = least to 5 = best) scale. N/A is reserved for not sufficient information or exposure and averages will reflect this difference. (Copy this form for a total of 2 copies)**

	N/A	1	2	3	4	5	COMMENTS
POTENTIAL FOR SUCCESS IN THE HEALTHCARE FIELD							
PROFESSIONALISM							
MOTIVATION							
RELIABILITY							
INTELLECTUAL ABILITY							
INTERPERSONAL SKILLS							
COMMUNICATION SKILLS							
INTEREST IN THE FIELD							

___ Strongly recommended ___ Recommended ___ Recommended with Reservations

___ Do not recommend at this time-needs more development in more than a few areas.

___ An optional letter in addition to the above is attached for more detail.

Are there any other qualities you feel this individual has or lacks which should be considered by the Admissions Committee? _____

Please indicate how long and in what capacity you have known the applicant. _____

Name/ Signature _____ Title _____

Address and Phone Number _____

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**

RECORD OF VOLUNTEER, OBSERVATION, OR JOB SHADOW HOURS

Applicant's Name (Printed) _____

(Applicants may attach documented hours on facility letterhead in addition to this form. Please complete these hours in a timely manner; times may not be available or clinicians may not be able to complete these in time, if scheduled very close to the deadline; 2-3 weeks prior notice suggested.)

DATE	NAME OF FACILITY/ PHONE NUMBER	TYPE OF FACILITY SETTING	PT'S or PTA's NAME and SIGNATURE	# of HOURS	COMMENTS about students observation skills, appearance, communication, timeliness, sensitivity to pt/ PT/PTA-REQUIRED

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**

**Information and Instructions for Job Shadowing Hours for
The UC Clermont College PTA program: 2010-11**

Purpose and Introduction:

The purpose of job shadowing is to provide each applicant with a more detailed and face to face exposure to the actual work, personnel, and settings of the practicing PTA. Accordingly, the student is able to make an informed decision about his or her career choice. In addition to this experience, students may review career information at www.apta.org, specifically: <http://www.apta.org/PTACareers/>

Documentation is required for the admission process: the student is required to observe **35** hours of physical therapy in **3 different practice settings*** while shadowing a PT /PTA . The student **MUST** observe at **LEAST 8** hours in any one of the 3 practice settings to count as a legitimate setting. Observations may not be from more than 3 years ago. HIPAA training and clearance may be required at some facilities in order to observe patient treatment activities. Joining as a volunteer at most hospital/rehabilitation systems will enable you to gain access to training and clearance for confidential patient information. (Training may be required and is available at the web site of the Greater Cincinnati Health Council at www.gchc.org.) TB/Mantoux testing and updated immunizations may be required. Students need to **maintain professional levels** of hygiene, grooming, dress, and behavior while visiting the sites.

Practice settings may include, but not limited to: home health, occupational medicine, acute medical-surgical, federal (VA)# facilities, school based cooperatives, skilled nursing centers, inpatient rehabilitation units or CARF facilities, outpatient (ambulatory care) orthopedics/sports medicine, neurorehabilitation, private practice, or transitional care units.

Applicants should be sensitive to the busy clinicians' schedules and be appropriately flexible in consideration of observational scheduling. Please be courteous to the sites by contacting them 2-3 weeks prior to the scheduled visits.

*Special note:* Federal facilities such as the VA recommend a limit of 8 hours of job shadowing, due to increased demands upon students beyond this minimum total. (I.e., extensive background checks, etc.)

Other options to typical job shadowing include: employment as a therapy aide/technician, assistance offered in a full therapy program as an attendant with a family member or friend, or therapy received to self, all within the past 3 years. *These other options may only be considered as one of your practice settings.

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**

**DETERMINATION OF ADMISSIONS STANDING
Part Three**

Student Name _____ M # _____

This form is for your reference only-the Admissions Committee will evaluate your standing, based upon a fair and equitable review of all of the submitted materials, utilizing the following format:

1. Academic Performance

Multiply by 15 the cumulative *GPA of the 10 PTA prerequisite courses to date* (including winter quarter)

15 x Cum. GPA _____ = _____/60

2. Interest or Aptitude for PTA

- a. 1 (one) form letter of Recommendation-Health Education / Sciences Faculty _____ / 10
- b. 1 (one) form letter of Recommendation from PTA or PT clinician _____ /10
- c. Essay Responses-Written exercise during *Preview Session* _____/10
- d. Job Shadowing and positive comments from clinicians _____/10
(5 points awarded for appropriate hours completion, 5 points awarded for comments)

TOTAL BASE SCORE _____ / 100

Bonus for higher level chemistry, honors, or Anatomy/Physiology courses
_____ points

TOTAL SCORE _____

**University of Cincinnati
Clermont College
Physical Therapist Assistant Program**