



MEDICAL ASSISTANT PROGRAM ADMISSION APPLICATION

Please note that the due date of the MEDICAL ASSISTANT program admission application is August 22, 2023.

Please make sure the information provided is accurate. Letters of acceptance or denial will be emailed to the email address you provide in the application.

Once you start the online application you need to finish and submit. You cannot return to an application if you leave it.

1. Student ID# (if already a WSCC student) _____
2. Name _____
3. Address _____

4. County _____ Township _____
5. Phone _____ Email _____

General Education Course Information

Students do not have to complete any of the general education courses before applying to the Medical Assistant program but may complete them ahead of time if they wish.

Must have a C or better in each of the general education courses.

6. Please check each of the general education courses that you have completed or are currently enrolled in.

ALH 104 ANP 118 COM 100 COM 110 COM 206

(Student has the choice of taking ONE of COM 100, COM 110 -or- COM 206)

7. Month and Year the ANP 118 was completed, or completion is expected. _____
8. All general education courses have been taken two times or less. General Education courses may only be taken twice, and withdrawals count as an attempt of taking the class.
9. If you answered No to Question 8, have you previously received an exemption for any general education courses taken three times? Please list the course(s) for which you received an exemption. _____

Transfer Students

- 10. For transfer students, all official transcripts have been sent to the WSCC Registrar?
- 11. For transfer students, list all institutions from which you expect to transfer prerequisite coursework.

Example: Central Michigan College, Lansing Community College

WSCC Credits

- 12. Number of credits successfully completed at WSCC as of application submission date. _____
- 13. If a current WSCC student, how many credits are you taking currently? _____

Previous Earned Degrees

- 14. I have a previous earned degree.
- 15. If yes to above question, please list degree earned and the educational institution where the degree was earned.

Example: Medical Assistant Associate of Applied Arts and Sciences from WSCC

Health Care Work or Health Care Volunteer Experience

- 16. Do you have previous Health Care Work or Health Care Volunteering Experience?

Health Care **Work** Experience

Health Care **Volunteer** Experience

Additional Requirements/Statements

- 17. By checking this box, I certify that my answers are true and complete to the best of my knowledge. I am responsible for ensuring all documents are received and all required are completed to apply. Late documents will NOT be accepted for consideration.
 I agree to and understand this statement.
- 18. Final acceptance into the Medical Assistant program is pending a clear criminal background check and drug screening. These tests will be at the students' expense.
 I agree to and understand this statement.
- 19. Immunizations/vaccinations and CPR/First Aide certification will be required for clinical education.
 I agree to and understand this statement.

Signature _____ Date _____