



3300 Gallows Road, Falls Church, Va. 22042-3300 Office Telephone Number: 703-776-2413 Fax Telephone Number: 703-776-3989

APPLICATION FOR ADMISSION

Application Date			Class Year Applying For					
Have you applied previously to Inova Fairfax MLS program?		☐ YES ☐ NO If YES, indicate year:						
Full Name	Last Name		First Name				Middle Initial	
	Street		ENIL			Apartment/Unit#		
Address	City		State			ZIP Code		
Phone #			Email Address					
Are you a citizen of the United States?			□ YES □ NO					
If no, are you au	☐ YES ☐ NO							
NOTE: All applicants must be legally eligible to work in the United States. Documentation must be provided for verification. Non-citizens must list their type of Visa, current Visa number & Expiration date								
Visa Type	Non-citizens must list	Visa #	Current visa	ı ilulilibi	Expiratio			
visa Type		VISA #			Expiratio	Date		
EDUCATION								
List all Colleges and Universities that you have attended								
College Name		700	Address				0	
From	То	Did you gra □ YES □		Degree)			
College Name			Address			L	Ц	
From	То	Did you gra ☐ YES ☐		Degree))	
College Name	9		Address			5		
From	То	Did you gra ☐ YES ☐		Degree		A		
College Name	A		Address			4		
From	То	Did you gra ☐ YES ☐	NO	Degree	Degree			
List or attach a list of courses you are currently taking or plan to take with the anticipated completion date before admission:								
		7CA	VR.	U				
REFERENCE								
	the names of three individ							
should be from professors, academic affiliates, or employers. These can be sent directly to the school by mail or								
emailed as a PDF attachment. Each letter must be signed and written on official letterhead with the recommender's contact information.								
Full Name		Ti	itle		Email Add	ress		
Full Name		Ті	itle		Email Add	ress		
Full Name			itle	Email Address				
					-1			



PREVIOUS EMPLOYMENT (IF ANY)							
Company		Superviso	r				
Address		Phone #					
Job Title	From	1	То				
Responsibilities			1				
LAY M							
Reason for leaving							
May we contact your previous supervisor for a reference? ☐ YES ☐ NO							
Company			Supervisor				
Address			Phone #				
Job Title	From		То				
Responsibilities		1					
Reason for leavi <mark>ng</mark>							
May we contact your previous supervisor for a reference? ☐ YES ☐ NO							
MEDICAL LABORATORY SCIENCE INFORMATION							
Answers must be typed on a separate sheet of paper. Use 11pt Arial font with 1.15 spacing.							
1. How did you first learn about medical laboratory science and when did you become interested in it as a career field?							
2. What led you to choose Medical Laboratory Science as your major field of study? Why do you want to be a Medical Laboratory Scientist?							
3. How/where did you find out about the Inova Fairfax Hospital Medical Laboratory Science Program? What motivated you to apply?							
4. Have you had an opportunity to work in a related field? Provide a brief description of this experience.							
5. In what ways do you think you can contribute to Inova Fairfax Hospital and to the Medical Laboratory Science Program?							
6. List or describe additional information about yourself, your training or experience that you feel may be important in considering your application for admission.							
7. Personal Statement: Please write an essay or personal statement explaining why you want to become a Medical Laboratory Scientist. Additionally, include any other information you believe is relevant to your application. Your submission will be evaluated based on grammar, spelling, flow, overall relevance, and content.							



Essential Functions for Admission to Inova Fairfax Hospital School of Medical Laboratory Science

The National Accrediting Agency for Clinical Laboratory Sciences requires the Medical Laboratory Science Program to publish the essential functions of the program. This information is to be used to become aware and informed of the skills required in the performance of the duties of a Medical Laboratory Scientist and to assess your ability to complete such duties. These essential requirements reflect performance abilities and characteristics that are necessary to successfully complete the requirements of the Medical Laboratory Science Program. These standards are not conditions of admission to the program. Prior to admission, each student must agree that they can and are prepared to meet these requirements with or without reasonable accommodation.

Inova Fairfax Hospital School of Medical Laboratory Science is an equal-opportunity employer. Inova Fairfax Hospital and its Program does not discriminate based on gender, age, race, color, creed, religion, pregnancy or related medical conditions, marital status, national origin, mental or physical disability, or any other characteristic protected by applicable federal, state, or local law. The Program will provide reasonable accommodations to otherwise qualified students with disabilities. The following is a list of the technical abilities and skills:

1. Manual Dexterity

Students must:

- Be able to manipulate objects precisely and perform assays that require fine or gross motor skills using good hand-eye physical coordination (such as pipetting, measuring and aliquot liquids).
- Be able to handle needles and syringes and perform phlebotomy safely and accurately.
- Be able to handle flammable and hazardous chemicals, electrical, and infectious biological materials.
- Be able to reach instruments, bench tops, and equipment to perform duties adequately.
- Be able to carry objects weighing up to 20 pounds and have the stamina to perform academic program functions over an 8-hour day including standing or sitting.
- Be able to maneuver freely in the clinical laboratory setting and in a patient care setting.

2. Vision

Students must:

- Be able to distinguish colors, hue, shading or intensity and clarity.
- Be able to use a microscope to read biological material and identify fine structural differences and color.
- Be able to read and interpret charts, graphs, and labels in print and video monitors.

3. Communication Skills

Students must:

 Be able to communicate in English, both verbally and in writing to all staff, employees, students, patients, and other healthcare workers.

4. Intellectual and Critical Thinking Skills

Students must:

- Be able to judge, comprehend, make calculations, analyze, and perform complex interpretative testing.
- Be able to solve problems and apply critical thinking under normal and stressful situations.

5. Ethical Standards

Students must:

Exercise ethical judgment, integrity, honesty, dependability, patient confidentiality and adhere to the academic
and professional code of ethics.

6. Safety

Students must:

- Be able to recognize and respond to safety issues, including recognizing emergency situations and taking appropriate actions.
- Be able to adhere to the regulations of accrediting agencies, comply with safety regulations of the laboratory, and maintain a safe environment for themselves and others.

Please read the above-listed essential functions carefully. Complete the statement below and return it with the application.



DISCLAIMER AND SIGNATURE							
attest that I have read and understood the Essential Functions for Admission to Inova Fairfax Hospital School of ledical Laboratory Science. Further, I believe that I am able and prepared to meet these requirements.							
□ YES □ NO							
In signing this application, I certify that my answers are true and complete to the best of my knowledge. I hereby permit the Inova Fairfax Hospital Medical Laboratory Science Program to investigate all pertinent information concerning my application to determine my qualifications for admission. If this application leads to an appointment to the Medical Laboratory Science Program, I understand that false or misleading information in my application or interview may be subject to immediate dismissal from the program.							
I understand that Inova Fairfax Hospital School of Medical Laboratory Science is an equal opportunity employer, and all applicants are considered for admission without regard to race, gender, age, color, creed, religion, pregnancy, or related medical conditions, marital status, national origin, mental or physical disability or any other characteristic protected by applicable federal, state, or local law.							
Applicant Signature:	Date:						
The Inova Fairfax Hospital School of Medical Laboratory Science Program Immigration and Naturalization Service to accept non-immigrant foreign stupermitted. If foreign-born, but not a non-immigrant, please submit evidence	udents. Issuance of Form I-20 is not						

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