

# APPLICATION

# For

# Associate of Applied Science Degree in Surgical Technology (Rolla Main)

**Class Beginning August 2026** 

# **Graduating July 2027**

# Deadline to apply April 1, 2026

\*\*<u>NOTE</u>: A new application must be submitted each year.

#### NOTICE OF NON-DISCRIMINATION:

Applicants for admission and employment, students, employees, and sources of referral of applicants for admission and employment are hereby notified that East Central College does not discriminate on the basis of race, color, religion, national origin, ancestry, gender, sexual orientation, genetic information, age, disability, veteran status or any other characteristic protected by law. Inquiries related to employment practices may be directed to Carrie Myers, Human Resources Director, 005 DSSC, telephone number 636-584-6712, or <u>carrie.myers@eastcentral.edu</u>.

Inquiries/concerns regarding civil rights compliance as it relates to student programs and services may be directed to the Vice-President of Student Development, 131 Buescher Hall, 636-584-6565, or <u>stnotice@eastcentral.edu</u>. Both offices are located at the ECC main campus located at 1964 Prairie Dell Road, Union, Missouri 63084.



#### ASSOCIATE OF APPLIED SCIENCE DEGREE IN THE SURGICAL TECHNOLOGY PROGRAM ROLLA

**Thank you for your interest in our Associate of Applied Science Degree in Surgical Technology.** Enclosed is the application packet. This packet includes information you will need to read and forms you will need to complete and return if you would like to begin the application process.

An Associate of Applied Science Degree in Surgical Technology is the first step in the profession. This degree prepares you for entry level practice and to begin further studies (through University Programs) to progress in the profession if you choose to do so.

To be considered for admission into East Central College's Associate of Applied Science in Surgical Technology Program you must have completed high school, or equivalent, and be admitted as an East Central College student (separate application). Applicants desiring admission into the program, must have a "C" or higher in each pre-requisite course. To apply to the Surgical Technology Program, return the attached application to East Central College, Surgical Technology, 1964 Prairie Dell Road, Union, MO 63084-4344 or Rolla Main 500 Forum Drive, Rolla, with a receipt from the Business Office at the Union campus or the ECC office located on the Rolla Main campus () showing payment of the \$30.00 application fee. Applications must be submitted on an annual basis and are only good for one admission cycle.

<u>APPLICATION DEADLINE</u>: The ECC Surgical Technology Program is approved to accept students into the program each Fall semester. *The deadline for application is <u>April 1<sup>st</sup></u> of the year before your desired entrance into the Surgical Technology Program and <u>all transcripts must be on file by April 1, 2026.</u>* 

Class selection is competitive in nature. A point system is used to determine an applicant's rank in the selection process. Your academic advisor is glad to review your standing and provide suggestions on how you may achieve the best candidacy possible.

For consideration, applicants must meet the following minimum criteria:

- **1.** Application Packet is due by April 1<sup>st</sup> deadline.
- 2. Minimum cumulative college GPA of a 2.0 or greater on a minimum of 12 credit hours of college credit.
- 3. **Pre-requisite coursework completed with a "C" or better.** Pre-requisite coursework <u>must be completed by</u> <u>the end of the Summer semester (July) before</u> Fall admission into the program. See curriculum page in this application packet for more detail.
- **4. Mandatory 4 Hours of Career Shadowing** with a Surgical Technologist at a healthcare facility (*There are two* (2) forms that must be completed, Applicant Job Shadow Form and Preceptor Job Shadow Form found in application packet.
- 5. Surgical Technology Entrance Exam TEAS-V Exam. (A minimum score of 50% composite <u>is required</u>). It is your responsibility to provide the office with a copy of your examination results. <u>https://www.eastcentral.edu/testing-center/teas/</u>.
- 6. THREE (3) COMPLETED PROFESSIONAL REFERENCES (see surgical technology application and reference form for criteria); the applicant is responsible for distributing references. It is the applicant's responsibility to check with the Allied Health Office to make sure references have been received by the April 1st deadline.

7. PROVIDE OFFICIAL HIGH SCHOOL, TECHNICAL SCHOOL & COLLEGE TRANSCRIPTS.

Applicant must request that official transcripts from high school or GED (scores required) *and <u>all</u>* colleges attended be sent to **ECC Student Services** for evaluation. Evaluating transcripts can be time consuming so please allow ample time for processing. Failure to request your transcripts in a timely manner may result in an incomplete application file. Students with transfer credit are required to meet with a surgical technology advisor prior to application.

- 8. Must be in a state of physical and mental health compatible with the responsibilities of a Surgical technology career. A physical examination, including selected diagnostic tests and immunizations, is required *after* acceptance into the program (a form is provided in acceptance packet).
- **9.** Admission is contingent upon a successful criminal background check and a satisfactory drug screening. The procedures are completed after the Surgical technology acceptance packet has been received.

# It is the *applicant's responsibility* to verify with the Nursing and Allied Health office that the application file is complete. <u>Incomplete application files will *NOT* be considered for admission.</u>

All college coursework, pertinent to the Surgical technology program, <u>MUST</u> be completed with a grade of "C" or better. All science courses must be no older than 5 years at the time of acceptance.

#### All applicants will be notified, *in writing*, of their admission status within the first two weeks of May.

If you have any questions, please contact the Allied Health Office (Union) at (636) 584-6616. Surgical Technology program information is also\_available on our website at <u>https://www.eastcentral.edu/allied-health/</u>.

Best of luck with your educational endeavors and please let us know if we can be of assistance.

Jennifer Wall, M.Ed., CSTMegan VanBibber, M.ED., CSTProgram DirectorClinical Coordinator

# EAST CENTRAL COLLEGE ASSOCIATE OF APPLIED SCIENCE DEGREE IN THE SURGICAL TECHNOLOGY PROGRAM ROLLA

#### PREREQUISITE COURSES/GENERAL EDUCATION

\*COL 101 Falcon Seminar
\*MTH 110 Intermediate Algebra, MTH 140 Contemporary Math, MTH 150 Statistics, or higher
\*ENG 101 English Composition
\*SOC 101 General Sociology or PSY 101 General Psychology
\*BIO 151 Intro to Human Anatomy & Physiology I Lecture and Lab
\*SRG 100 Fundamentals of Surgical Technology
\*PSC CIVICS WEB Civics Achievement Exam
\*CORE 42 Civics (PSC 102, HST 101, 102, or 103)
\* ELECTIVES Any CORE 42 courses totaling 6 credit hours

\*Surgical Technology Program Pre-requisites

\*\*\*You may apply before pre-requisites are completed. However, coursework must be completed by the end of the Summer semester (July) before Fall admission to the program. Proof of enrollment, a waiver, or proof of completion (official transcript submitted to Registrar's office) must be on file by June 1<sup>st</sup> for the Fall's admission cycle.

## SURGICAL TECHNOLOGY ACADEMIC COURSE SEQUENCE

	COURSE	DESCRIPTION	<b>CREDIT HOURS</b>
SEMESTER I- FALL			
	SRG 200	SURGICAL TECHNIQUES LAB	2
	SRG 210	INTRO TO SURGICAL TECHNOLOGY	4
	SRG 215	SURGICAL PATHOPHYSIOLOGY	2
	SRG 220	SURGICAL PROCEDURES I	6.5
	SRG 225	MEDICAL SURGICAL TERMINOLOGY	3
SEMESTER II- SPRING			
	SRG 250	CLINICAL EXTERNSHIP I	8.5
	SRG 255	CLINICAL PREP I	2
	SRG 260	SURGICAL PROCEDURES II	6.5
	SRG 265	PROFESSIONAL PRCTICES	2
SEMESTER III- SUMMER			
	SRG 275	CLINICAL EXTERNSHIP II	2.5
	SRG 290	SURGICAL TECHNOLOGY CAPSTONE	2
	SRG 295	ADVANCED SURGICAL PROCEDURES	4

#### TOTAL HOURS (including prerequisites): 71 (General Education/Pre-Requisites 26/45 Program)

**NOTE:** In order to achieve success in the Surgical technology program, a student is expected to spend an additional average of 20-30 hours per week studying and preparing. Some examples include practicing skills in the clinical lab, preparing for clinical assignments, studying for exam, preparing for class, developing written assignments, and developing presentations (not an inclusive list). Student can expect to spend 5 contact hours per credit hour for laboratory courses and 10 contact hours per credit hour for clinical courses.

Reviewed/Updated	l:
6/2025	

# EAST CENTRAL COLLEGE ASSOCIATE OF APPLIED SCIENCE DEGREE SURGICAL TECHNOLOGY PROGRAM

#### \*\*Estimated Itemized Expenses

**PREREQUISITES:** 

In-District @ \$142.00/hr. (15 credit hours) = \$2,130.00 Out-of-District @ \$198.00/hr. (15 credit hours) = \$2,970.00

An application fee of \$30.00 is due when applying.	IN-DISTRICT	OUT-OF-
When accepted, an admission packet fee of \$150.00 is due.		DISTRICT
FALL First semester: 17.5 credit hours		
Tuition	\$4,287.50	\$6,440.0
Support Services/Student Activity/Tech/Facilities/Security Fees	\$717.50	\$717.5
Course Fees (Special Lab/Assessment Fee)***	\$745.00	\$745.0
Books and Syllabi (approximate)	\$600.00	\$600.0
TOTAL FALL SEMESTER	\$6,350.00	\$8,502.5
SPRING, Second semester: 19 credit hours		-
Tuition	\$4,655.00	\$6,992.0
Support Services/Student Activity/Tech/Facilities/Security Fees	\$779.00	\$779.0
Special Lab/Assessment Fee	\$815.00	\$815.0
TOTAL SPRING SEMESTER	\$6,249.00	\$8,586.0
SUMMER, Second semester: 8.5 credit hours		
Tuition	\$2,082.50	\$3,128.0
Support Services/Student Activity/Tech/Facilities/Security Fees	\$348.50	\$348.5
Course Fees (Special Lab/Assessment Fee)***	\$210.00	\$210.0
TOTAL FALL SEMESTER	\$2,641.00	\$3,686.5
without *Prerequisites:	\$15,240.00	\$20,775.0
Tuition *Prerequisites only (26 credit hours):	\$3692.00	\$5.148.0

#### **TOTAL Program Cost:**

<u>PLEASE NOTE</u>: Surgical Technology courses have the Tier 3 differential tuition rate. Tier 3 tuition: In-District - \$245.00/ch.; Out-of-District - \$368.00/ch.

\*The cost of prerequisites includes *tuition only*.

**\*\****ALL* costs are estimated and intended only to give a general idea. Amounts are subject to change during the time allotted for the degree. You pay only for credit hours taken in a given semester. **\*\*\***The semester fees include Assessment/Remediation/Exam costs.

Updated: 6/2025

\$25,923.00

\$18,932.00



## ASSOCIATE OF APPLIED SCIENCE DEGREE IN THE SURGICAL TECHNOLOGY PROGRAM

# **Admission Rating System**

The following is the criteria that will be used for rating each applicant

Possible Points	Criteria	Points Received
0-3	3 References	
50 = 0 51-54.9 = 2 55-59.9 = 4 60-64.9 = 6 65-69.9 = 8 70-74.9 = 10 $\geq 75 = 12$	TEAS Exam with a score of 50% or greater composite score.	
4 hours = 0 points 8 hours = 1 point 12 hours = 2 points 16 hours = 3 points	Surgical Technology Job Shadowing <u>NOTE</u> : A minimum of 4 hours of job shadowing is a required. *For any negative feedback, points could be deducted.	
2.0 = 0 2.1 - 2.5 = 2 2.56 - 2.75 = 4 2.76 - 2.9 = 6 3.0 - 3.5 = 8 3.6 - 4.0 = 10	Accumulated college GPA of a minimum of 12 credit hours of college credit	
0-5	Communication Essay *Provided at the mandatory information session	
3 = A 2 = B 1 = C	Grade from Introductory Human Anatomy & Physiology Lecture & Lab completed by June 1 <sup>st</sup> with a "C" or better. ** **No points will be given for courses that have been retaken due to course failure.	
2	Intro Human Anatomy & Physiology taken at ECC completed by April 1 <sup>st</sup>	
	TOTAL POINTS RECEIVED	

**\*\*NOTE:** Admission criteria is subject to change; however, all applicants will be notified of changes.

### EAST CENTRAL COLLEGE ASSOCIATE OF APPLIED SCIENCE DEGREE IN THE SURGICAL TECHNOLOGYPROGRAM ROLLA

#### Summary of ECC Surgical Technology Drug Screening, Immunization and Physical Examination Policies

#### Criminal History

As a requirement of the application process for the East Central College Surgical Technology Program, in response to RSMo 660.317b and 660.315, students accepted into the program will be required to consent to release of their criminal history records (RSMo 43.450) for the sole purpose of determining the applicant's ability to enter patient care areas in order to fulfill the requirements of the Surgical Technology program. Any student who is found to have a criminal history for a felony conviction, as defined by state law, or is found to be on one of the governmental sanction lists, will not be accepted nor allowed to continue enrollment in the ECC Surgical Technology Program. Acceptance into and completion of the program does not guarantee certification. In addition, <u>any conviction may affect a student's ability to be placed in a clinical site and a graduate's ability to sit for National Certifying Examination offered by the National Board of Surgical Technology and Surgical Assisting (NBSTSA). *Students currently serving probation are ineligible for admission and may be ineligible for admission if the criminal offense is recent in nature.*</u>

#### Drug Screening

The purpose of the ECC Surgical Technology Program Drug Testing Policy is to ensure that students entering the Program are drug- and alcohol-free and to comply with the Drug-Free Schools and Communities Act Amendments of 1989. Offers of acceptance to the Surgical Technology Program are made as conditional offers. Applicants may be denied admittance if a positive drug screen is detected. An applicant who refuses to authorize and pay for testing, or who tests positive for drugs, alcohol, or controlled substances, may not receive a final offer of admission. A current Surgical Technology student who refuses to authorize and pay for tests positive for drugs, alcohol, or controlled substances, may not be allowed to continue in the Surgical Technology program. A positive drug screen during the professional years may disqualify a student from participating in required coursework involving client interaction and will affect the student's ability to complete the program.

#### Immunizations and Physical Examination

The purpose of the ECC Surgical Technology Program Immunizations and Physical Examination Policy is to ensure that students entering the Program are in a state of physical and mental health compatible with the responsibilities of a career in Surgical technology and in general, working with individuals in a healthcare or other provider environment. Upon acceptance to the program, all incoming Surgical technology students are required to have a physical examination and certain immunizations (forms will be provided) to comply with ECC and clinical site-specific policies. Record of childhood immunizations are sufficient; however, if not available or insufficient, proof of immunity/re-immunization is required at the student's expense. Applicants may be denied admittance if they are not in a state of physical and mental health compatible with the responsibilities of a career as a surgical technologist and/or if they do not receive the proper immunizations.

#### **Graduate Learning Outcomes**

Upon completion of the ECC Surgical Technology Program, the graduate will be eligible to sit for the National Certifying Examination offered by the National Board of Surgical Technology and Surgical Assisting (NBSTSA). See Technical Standards for more information.

# ASSOCIATE OF APPLIED SCIENCE DEGREE IN THE SURGICAL TECHNOLOGY PROGRAM

#### Surgical Technology Technical Standards

Surgical Technology involves the provision of direct care for individuals and is characterized by the application of verified knowledge in the skillful performance of surgical technology technical functions.

Therefore, all applicants will be able to:

- 1. Stand, bend, and/or sit for long periods of time in one location with minimum/no breaks.
- 2. Lift a minimum of 25 pounds.
- 3. Work for periods up to 6 hours without restroom breaks or dietary needs.
- 4. Demonstrate sufficient visual ability to load a fine (10-0) suture onto needles and needle holders with/without corrective lenses and while wearing eye protection.
- 5. Demonstrate sufficient peripheral vision to anticipate and function while in the sterile surgical environment.
- 6. Hear and understand verbal communication without visualization of the communicator's mouth/lips and within 20 feet.
- 7. Hear activation/warning signals on equipment.
- 8. Detect odors sufficient to maintain environmental safety and patient needs.
- 9. Manipulate instruments, supplies, and equipment with speed, dexterity, and good eye-hand coordination.
- 10. Ambulate/move around without other support.
- 11. Lift, move, position, and manipulate the patient who is unconscious with or without assistive devices, such as a roller board.
- 12. Effectively communicate with others, both verbally and in writing
- 13. Possess short and long-term memory sufficient to perform tasks such as, but not limited to, mentally tracking surgical supplies and performing anticipation skills intraoperatively.
- 14. Make pertinent decisions based on surgical knowledge and skills.
- 15. Demonstrate the use of positive coping skills under stress.
- 16. Demonstrate calm and effective responses, especially in emergency situations.
- 17. Exhibit positive interpersonal skills during patient, staff, and faculty interactions.
- 18. Sufficient intellectual and emotional functions to plan and implement care for individuals.

Educational programs are dedicated to principles of nondiscrimination. This includes a commitment to not discriminate against qualified applicants/students with disabilities.

If a student cannot perform the essential functions in the manner indicated, they will not necessarily be precluded from participating in the program but will need to be able to perform the essential functions with or without reasonable accommodation.

By signing my name below, I certify that I have read the above information. Any questions concerning these standards have been discussed. My signature also certifies my understanding of, and agreement with the above standards.

Signature\_\_\_\_\_Date\_\_\_\_

## <u>CHECKLIST FOR ADMISSION TO THE ASSOCIATE DEGREE IN</u> <u>SURGICAL TECHNOLOGY</u>

<u>NOTE</u>: Students who have ever been admitted to any Surgical Technology Program previously must follow the *readmission requirements in the student handbook*. A student who has failed to achieve a "C" or better in ANY two core surgical technology courses, in any surgical technology program(s) attended, will not be considered for admission. Students who have had two (2) attempts to <u>ANY</u> surgical technology program are not eligible for admission.

#### To INITIATE the application process, the student MUST complete the following requirements:

- **1. APPLY FOR GENERAL ADMISSION TO THE COLLEGE** (<u>Declare Major:</u> <u>Pre-Surgical Technology</u>). To apply, visit the East Central College website: <u>https://admissions.eastcentral.edu</u>. If you have questions regarding the college application, please contact Admissions at 636-584-6588.
  - 2. COMPLETE THE APPLICATION FOR SURGICAL TECHNOLOGY. Submit the completed application with the paid application fee receipt of \$30.00 to the Allied Health Division Office, Health Science Building Suite 105 or to Rolla Main Building at 500 Forum Drive. The receipt for the application fee (obtained at the ECC Business Office Union or Rolla Main) <u>must</u> accompany your application.
  - 3. PROVIDE OFFICIAL HIGH SCHOOL, TECHNICAL SCHOOL & COLLEGE TRANSCRIPTS. Applicant must request that official transcripts from high school or GED (scores required) and <u>all</u> colleges attended be sent to ECC Student Services for evaluation. Evaluating transcripts can be time consuming so please allow ample time for processing. Failure to request your transcripts in a timely manner may result in an incomplete application file. Students with transfer credit are required to meet with a surgical technology advisor prior to application.
    - **4. SURGICAL TECHNOLOGY ENTRANCE EXAM TEAS-V Exam.** (A minimum score of 50% composite <u>is required</u>). It is your responsibility to provide the office with a copy of your examination results.
    - **5. MANDATORY 4 HOURS OF CAREER SHADOWING** with a Surgical Technologist at a healthcare facility (*There are two* (2) *forms that must be completed, Applicant Job Shadow Form and Preceptor Job Shadow Form found in application packet.*
    - 6. COMPLETION OF <u>ALL</u> REQUIRED PRE-REQUISITE COURSEWORK by end of Summer semester prior to Fall semester of desired entry. ALL coursework must have a "C" or better in each course. Must have a minimum college GPA of 2.0.
  - 7. THREE (3) COMPLETED PROFESSIONAL REFERENCES (see surgical technology application and reference form for criteria); the applicant is responsible for distributing references. It is the applicant's responsibility to check with the Allied Health Office to make sure references have been received by the June 1st deadline.
- 8. SIGNED TECHNOLOGYACKNOWLEDGEMENT FORM.
  - \_\_\_\_ 9. SIGNED TECHNICAL STANDARDS ACKNOWLEDGEMENT FORM.
- **10. MANDATORY ATTENDANCE AT AN INFORMATIONAL SESSIONS/TIMED QUESTIONNAIRE.** An informational Session will be held in mid-April. Applicants will be notified by email of the scheduled date. In addition, a required timed questionnaire will be completed during this session.

# AFTER ACCEPTANCE INTO THE SURGICAL TECHNOLOGY PROGRAM THE FOLLOWING WILL BE REQUIRED:

## 1. DRUG SCREENING (site determined by ECC)

2. **MEDICAL EXAMINATION** - with Satisfactory Results (*Departmental form provided*). **Must be in a state of physical and mental health compatible with the responsibilities of a surgical technology career.** A physical examination including selected diagnostic tests and immunizations, is required after acceptance at your cost (*the form is provided in the acceptance packet*).

## 3. SATISFACTORY FINGERPRINT/CRIMINAL BACKGROUND CHECK.

4. **CURRENT CPR CARD** - From either American Heart Association (BCLS-C) for Healthcare Provider (Basic Cardiac Life Support), or the American Red Cross CP for The Professional Rescuer. This needs to be completed prior to the August start date. (*This course is offered through East Central College*).

**NOTE TO ALL STUDENTS:** It is the **RESPONSIBILITY of the STUDENT** to maintain communication with the Allied Health Science office to ensure that the application folder is complete and up to date with current admission requirements. You may call (636) 584-6616 or e-mail julie.beck@eastcentral.edu. Admission to the program is **competitive in nature** and **is not guaranteed**. A selection committee ranks all applications and admission is granted to the most qualified applicants. *It should be understood that satisfactorily meeting minimum requirements* <u>does not</u> automatically guarantee admission.

During your Surgical Technology education, the program faculty will strive to prepare you to become a professional who is eligible to sit for the National Board of Surgical Technology and Surgical Assisting Certification exam. However, graduation does not guarantee passage of the exam.

Generally, the conviction of a felony, misdemeanor, or any other offense, indicates lack of good moral character for purposes of determining an applicant's fitness for registration or a registrant's right to continue holding a certificate of registration. For this reason, any student convicted of a felony must contact NBSTSA to determine eligibility to sit for the certifying examination.

The Associate Degree Surgical Technology program at East Central College meets the state education requirements for a surgical technology certification in the state of Missouri. East Central College graduates sit for the National Certifying Examination offered by the National Board of Surgical Technology and Surgical Assisting (NBSTSA). East Central College has not determined if the Associate Degree Surgical Technology program at East Central College meets the state education requirements in any other state, any U.S. Territory, or the District of Columbia.

<u>APPLICATION DEADLINES</u>: The surgical technology application is due by April 1<sup>st</sup> prior to the Fall semester for which you are applying. *Transcripts are due April 1<sup>st</sup>*. *Applications will not be reviewed if incomplete on April 1<sup>st</sup>*.

<b>APPLICATION FOR ADMISSION</b>
FALL 2026

OF	FICE	USE	ONLY
Receipt #			

Received by:

Date Rec'd:

# <u>RETURN APPLICATION</u> (with receipt for \$30.00 application fee), by April 1, 2026 TO:

#### EAST CENTRAL COLLEGE

Department of Nursing & Allied Health Attn: Surgical Technology Program 500 Forum Drive Rolla, MO 65401 Telephone: (573) 899-8055

\*\*\* Deadline for all Surgical Technology applications: April 1, 2026 \*\*\*Transcripts must be on file by April 1<sup>st</sup>

Completion of this application does not constitute admission to the program of study.

	Last	First	MI Previous	s or Other Names	Student ID Number
ADDRESS:					
	Street	City	State	Zip Code	County
Home Phone:		Work/Cell Phone:			
Person to be noti	fied in case of	emergency:		(Fale	con e-mail address)
Name:			Relationship:		
Address:			Ph	none:	
EDUCATION:					
High School Atter	nded:			Year O	Graduated
OR, Earned GED:	State:			Date Received:	
COLLEGE/PRO	FESSIONAL	SCHOOL(S) ATTENDE	ED:		
NAME:		I	Dates Attended	I	Degree
NAME:		I	Dates Attended		Degree
		I	Datas Attandad	т	Jagraa

If you are currently attending college, list the courses being taken:

 PROFESSIONAL REFERENCE INSTRUCTIONS: Please fill in the following information. Three (3) references are required by April 1<sup>st</sup> for a completed application file. Please note: It is your responsibility to contact references and distribute the enclosed reference form to those individuals, with a stamped envelope addressed with the ECC Nursing and Allied Health Department address above. Your references should be by a professional, other than a relative, who can attest to your character and work ethic, preferably a healthcare professional.

 NAME (First and Last)
 STREET/BOX ADDRESS/CITY/STATE/ZIP (Must have complete addresses. If business addresses.)
 TITLE/
 RELATIONSHIP (No friends or family)

**WORK HISTORY:** List employment beginning with the *most recent* position.

NAME OF EMPLOYER	ADDRESS	POSITION HELD	DATES	
			From	То

		y, in a separate notarized statement, and provide certified copies of court documents (i.e. docket I final disposition).
YES	NO	Have you ever been convicted, adjudged guilty by a court, pled guilty, pled nolo contendere or entered an Alford plea to any crime, whether or not sentence was imposed excluding traffic violations? (This includes any crime where the disposition was a suspended imposition of sentence (SIS), or a suspended execution of sentence (SES), or if you pled guilty but were placed in an alternative or diversion court, including drug or DWI court.)
YES	NO	Have you ever been convicted, adjudged guilty by a court, pled guilty, pled nolo contendere or entered an Alford plea to any traffic offense resulting from or related to the use of drugs or alcohol, whether or not sentence was imposed? (This includes a disposition of a suspended imposition of sentence (SIS), suspended execution of sentence (SES), or placement in a post-plea alternative or diversion court and includes municipal charges of driving while intoxicated, driving under the influence and/or driving with excessive blood alcohol content.)
YES	NO	Do you have any condition or impairment, including a history of alcohol or substance abuse that currently interferes, or if left untreated may interfere, with your ability to practice in a competent and professional manner? If yes, explain fully in a separate notarized statement.
YES	NO	Are you now being treated, or have you been treated within the past five years, through a drug or alcohol rehabilitation program? If yes, explain fully in a separate notarized statement and provide the discharge summary or other official documentation that shows your diagnosis, prognosis, and treatment plan.
YES	NO	Are you listed on any state or federal sexual offender registry? If yes, explain fully on a separate notarized statement.
YES	NO	Have you ever been placed on an employee disqualification list or other related restriction of finding pertaining to employment within a health-related profession issued by any state or federal government or agency? If yes, explain fully on a separate notarized statement.

Any student who is found to have a criminal history for a class A or class B felony, as defined by state law, or is found to be on one of the governmental sanction lists, will not be able to continue enrollment in the East Central College program. During your Surgical technology education, the program faculty will strive to prepare you to become a professional who is eligible to sit for the National Board of Surgical Technology and Surgical Assisting Certification Exam. However, graduation doe does not guarantee passage of the exam. *If criminal history prohibits placement in the clinical setting, you will not be able to complete the program at East Central College.* 

Admission is contingent upon a successful criminal background check and a satisfactory drug screening. The procedures are completed after the initial acceptance letter is sent.

I understand that all information contained in this application, high school, college or university transcripts, together with the information received from references, will be presented to an admissions committee for review. I hereby grant permission to have my records reviewed.

In applying for admission to a Surgical technology program at East Central College, I hereby \_\_\_\_\_waive my right of access or, I hereby \_\_\_\_\_do not waive my right of access, to confidential letters and statements of recommendation submitted by references on my behalf as provided by Federal Law, PL93-380.

List all states in which you have resided in the past 10 years.

By signing this application, I understand that it is my responsibility to check the completion status of my application file <u>no later than April 1<sup>st</sup></u> before the fall semester of desired program entrance. The file must be complete for consideration. I also understand that any falsification of this application will result in ineligibility for admission.

#### Signature



#### Associate of Applied Science Degree in Surgical Technology **Professional Reference Form**

#### **Section A: Applicant Instructions:**

Please complete this section and then present this form to the person providing the reference. The reference form may be returned to you *in a sealed envelope* for you to submit with your application packet. Forms should be completed by a professional reference, other than a friend or relative, who can attest to your character and work ethic, preferably a healthcare professional.

#### PLEASE NOTE: Applicant files close April 1st.

*Applications will not be reviewed unless references are on file by the deadline.* 

Name:			
Last	Maiden (if applicable)	First	Middle Initial
agrees to waive their Ri recommendation submit		al Law, PL93-380 onstituted by thei	ogram at East Central College, this student ), to confidential letters and statements of ir signature below.

Applicant's Signature \_\_\_\_\_ Date

#### Section B: Person Completing Reference Form:

The above individual has applied to the East Central College Associate Degree Surgical Technology Program. Graduates of the Program are expected to pursue careers as a Surgical Technologist. Your assessment of their potential is essential in the process used for selection of final candidates.

Relationship to applicant? \_\_\_\_\_\_ How long have you known this applicant? \_\_\_\_\_\_

Please carefully assess the applicant in the following areas, comparing this applicant to others you have known who have similar levels of experience or education.

Criteria	Excellent	Above Average	Average	Below Average	Unable to Judge
<b>Communication Skills:</b> (Command of oral and written language, use of appropriate body language)					
Reliability/Integrity: (Honest; trustworthy; conscientious; attendance)					
<b>Motivation:</b> ( <i>Committed based on mature values; realistic view of profession</i> )					
Maturity: (Self-control, unselfish, realistic self-appraisal)					
<b>Perseverance:</b> (Steadfast in purpose; disciplined work habits; stamina/endurance)					
<b>Interpersonal Relations:</b> ( <i>Effective response/sensitivity to feelings/needs of others</i> )					
<b>Emotional Stability:</b> ( <i>Performance under pressure; absence of tension symptoms; mood stability</i> )					
Intellectual Ability: (Capable of understanding new ideas and concepts)					
<b>Resourcefulness:</b> (Adaptable in new situations; effective use of resources)					
<b>Judgment:</b> (Ability to analyze a situation and make appropriate decisions)					

Please share any *additional strengths, weaknesses or concerns* that the selection committee should consider for this candidate (please use back of page for additional space):

#### □ RECOMMEND WITH ENTHUSIAM

 $\Box$  RECOMMEND

**DO NOT RECOMMEND** 

Reference Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Please Print Name:

Thank you for taking the time to provide a reference for this potential Surgical technology student.



#### Associate of Applied Science Degree in Surgical Technology **Professional Reference Form**

#### **Section A: Applicant Instructions:**

Please complete this section and then present this form to the person providing the reference. The reference form may be returned to you *in a sealed envelope* for you to submit with your application packet. Forms should be completed by a professional reference, other than a friend or relative, who can attest to your character and work ethic, preferably a healthcare professional.

#### PLEASE NOTE: Applicant files close April 1st.

*Applications will not be reviewed unless references are on file by the deadline.* 

Name:			
Last	Maiden (if applicable)	First	Middle Initial
agrees to waive their R recommendation subm		al Law, PL93-380, constituted by their	gram at East Central College, this student to confidential letters and statements of signature below.
Applicant's Signature	e	Date	

#### Section B: Person Completing Reference Form:

The above individual has applied to the East Central College Associate Degree Surgical Technology Program. Graduates of the Program are expected to pursue careers as a Surgical Technologist. Your assessment of their potential is essential in the process used for selection of final candidates.

Relationship to applicant? \_\_\_\_\_\_ How long have you known this applicant? \_\_\_\_\_\_

Please carefully assess the applicant in the following areas, comparing this applicant to others you have known who have similar levels of experience or education.

Criteria	Excellent	Above Average	Average	Below Average	Unable to Judge
<b>Communication Skills:</b> ( <i>Command of oral and written language, use of appropriate body language</i> )					
Reliability/Integrity: (Honest; trustworthy; conscientious; attendance)					
<b>Motivation:</b> ( <i>Committed based on mature values; realistic view of profession</i> )					
Maturity: (Self-control, unselfish, realistic self-appraisal)					
<b>Perseverance:</b> (Steadfast in purpose; disciplined work habits; stamina/endurance)					
<b>Interpersonal Relations:</b> ( <i>Effective response/sensitivity to feelings/needs of others</i> )					
<b>Emotional Stability:</b> ( <i>Performance under pressure; absence of tension symptoms; mood stability</i> )					
Intellectual Ability: (Capable of understanding new ideas and concepts)					
<b>Resourcefulness:</b> (Adaptable in new situations; effective use of resources)					
<b>Judgment:</b> ( <i>Ability to analyze a situation and make appropriate decisions</i> )					

Please share any *additional strengths, weaknesses or concerns* that the selection committee should consider for this candidate (please use back of page for additional space):

#### □ RECOMMEND WITH ENTHUSIAM

 $\Box$  RECOMMEND

**DO NOT RECOMMEND** 

Reference Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Please Print Name:

Thank you for taking the time to provide a reference for this potential Surgical technology student.



#### Associate of Applied Science Degree in Surgical Technology **Professional Reference Form**

#### Section A: Applicant Instructions:

Please complete this section and then present this form to the person providing the reference. The reference form may be returned to you *in a sealed envelope* for you to submit with your application packet. Forms should be completed by a professional reference, other than a friend or relative, who can attest to your character and work ethic, preferably a healthcare professional.

#### PLEASE NOTE: Applicant files close April 1st.

Applications will not be reviewed unless recommendations are on file by the deadline.

Name:					
Last	Maiden (if applicable)	First	Middle Initial		
<b>WAIVER OPTION:</b> In applying for admission to the Surgical technology program at East Central College, this student agrees to waive their Right of Access, as provided by Federal Law, PL93-380, to confidential letters and statements of recommendation submitted by references on their behalf as constituted by their signature below. <i>If no signature is given,</i> the student will have the right to read this reference.					
Applicant's Signatur	e	Date	2		

#### Section B: Person Completing Reference Form:

The above individual has applied to the East Central College Associate Degree Surgical Technology Program. Graduates of the Program are expected to pursue careers as a Surgical Technologist. Your assessment of their potential is essential in the process used for selection of final candidates.

Relationship to applicant? How long have you known this applicant?

Please carefully assess the applicant in the following areas, comparing this applicant to others you have known who have similar levels of experience or education.

Criteria	Excellent	Above Average	Average	Below Average	Unable to Judge
<b>Communication Skills:</b> ( <i>Command of oral and written language, use of appropriate body language</i> )					
Reliability/Integrity: (Honest; trustworthy; conscientious; attendance)					
<b>Motivation:</b> ( <i>Committed based on mature values; realistic view of profession</i> )					
Maturity: (Self-control, unselfish, realistic self-appraisal)					
<b>Perseverance:</b> ( <i>Steadfast in purpose; disciplined work habits; stamina/endurance</i> )					
<b>Interpersonal Relations:</b> ( <i>Effective response/sensitivity to feelings/needs of others</i> )					
<b>Emotional Stability:</b> ( <i>Performance under pressure; absence of tension symptoms; mood stability</i> )					
Intellectual Ability: (Capable of understanding new ideas and concepts)					
<b>Resourcefulness:</b> (Adaptable in new situations; effective use of resources)					
<b>Judgment:</b> (Ability to analyze a situation and make appropriate decisions)					

Please share any *additional strengths, weaknesses or concerns* that the selection committee should consider for this candidate (please use back of page for additional space):

#### □ RECOMMEND WITH ENTHUSIAM

 $\Box$  RECOMMEND

**DO NOT RECOMMEND** 

Reference Signature: Date:

Please Print Name:

Thank you for taking the time to provide a reference for this potential Surgical technology student.

# EAST CENTRAL COLLEGE Associate of Applied Science Degree in Surgical Technology

#### Surgical Technology Career Shadowing Guidelines

Mandatory completion of 4 hours observation with a Surgical Technologist at a healthcare facility. It is recommended but not required to complete additional hours. Review and complete both the enclosed Shadow Coordinator Evaluation and the Applicant Report Form (copy as needed). A separate form should be used for each facility, and the Surgical Technologist must complete and sign the evaluation form for verification.

Students considering a career in a health science field generally, and Surgical technology specifically, can make a more informed educational decision choice based on personal experience or shadowing. While at any clinical site, *students must maintain the highest level of professional decorum to include appropriate dress, limited jewelry, and a professional appearance. Specifically, no jeans, t-shirts or sweatshirts, no tennis shoes or open-toed shoes are to be worn, tattoos should not be visible, and jewelry is limited to one earring per ear lobe. Overall appearance must be neat and clean and inspire confidence in the patient-provider interaction.* 

Types of facilities that employ Surgical technologists include hospital surgery units, surgical centers, labor and delivery, dentists/oral surgeons offices, veterinary offices, travel companies, and central sterile supply units. These requests are made frequently, and you will find most facilities accommodating. Be prepared to discuss your reason for the request and your availability. *Students should begin this process at least 3-4 months before the application is due as some facilities will not be able to accommodate your request on a short timeframe.* If the student is employed at a facility where observation took place, a maximum of 8 hours observation at that site may be counted.

# Preceptor: APPLICANT MAY NOT PARTICIPATE IN ANY **PROCEDURES AND MAY ONLY OBSERVE!**

Please return the completed evaluation to East Central College by faxing to 636-583-4487. Your evaluation is a critical part of the application process for students applying to the Surgical Technology program! Thank you!!!

# Surgical Technology Shadowing Site Coordinator Evaluation

Thank you for providing the applicants with a career shadowing opportunity. Your cooperation is very much valued and appreciated. The applicant has signed a waiver of confidentiality. All information you supply will be confidential. The following is a list of characteristics which we feel are required for a student to successfully complete training in the Surgical Technology Program. Please complete the following evaluation by giving us your honest opinion of this experience and return to Rolla Technical Center. Please return this evaluation as soon as possible to allow the applicant time to complete the enrollment requirements.

Applicant Name: \_\_\_\_\_ Date of Shadowing Experience: \_\_\_\_\_

Number of hours completed: Preceptor's Name:

4 – Outstanding	3 – More than Satisfactory	2 – Needs Improvement
1 – Unsatisfactory	N/A – Not Observed	

Description	4	3	2	1	N/A
Interest – motivated and eager to learn					
Participation – participated in activities					
Punctuality – arrived on time and prepared					
Attitude – positive approach to staff and others					
Appearance – clean, neat, and professional attire					
Professional Behavior – positive towards others					
Stress Response – maintains composure and able to function					
Maturity – demonstrates common sense, tact, and empathy appropriate for patient care					

Would you like to see this applicant in your facility as a student for clinical rotation? Yes No

Additional Comments: In lieu of an interview, this comment section weighs heavily on our determination regarding applicant fitness for this profession. **Please comment on this applicant**:

Signature of Preceptor: \_\_\_\_\_ Date: \_\_\_\_\_ Signature of Department Supervisor: Date:

Please return this shadowing report to: ECC Surgical Technology, 500 Forum Drive, Rolla, MO 65401. This is a VERY important part of your application process!

# East Central College Shadowing Report (Applicant)

Applicant Name:						
Name of Location	Name of Location of Hospital:					
Date and Time of	Shadowi	ng Exp	erience	:		
1. After shadowin	ng, what	are you	r thougl	nts (posi	itive and	d negative) about this career?
2. After this shad	owing ex	perienc	e do yo	u think	this car	eer is the right fit for you? Why/Why Not?
3. What did you l	ike or dis	slike ab	out the	experie	nce?	
4. My preceptor g	gave me v	aluable	e insigh	t into hi	s/her pr	ofession (circle one):
POOR	1	2	3	4	5	GREAT
5 Overall I would	5. Overall, I would rate my experience (please circle one):					
		-	-			
POOR	I	2	3	4	5	GREAT
6. I would recommend this shadowing program to others (circle one):						
YE	ES		NO			MAYBE
Additional Comm	ents:					

## East Central College Associate of Applied Science Degree in Surgical Technology

#### Technical Standards for Associate of Applied Science Degree in Surgical Technology Students

<u>To the applicant</u>: Review and sign this page to indicate you understand the technical standards listed on the next page. Return the signed page with your application materials by the **April 1**<sup>st</sup> deadline.

#### **Student Responsibilities:**

Surgical technologists are allied health professionals, who are an integral part of the team of medical practitioners providing surgical care to patients. Surgical technologists work under the supervision of a surgeon to facilitate the safe and effective conduct of invasive surgical procedures, ensuring that the operating room environment is safe, that equipment functions properly, and that the operative procedure is conducted under conditions that maximize patient safety. Surgical technologists possess expertise in the theory and application of sterile and aseptic technique and combine the knowledge of human anatomy, surgical procedures, and implementation tools and technologies to facilitate a physician's performance of invasive therapeutic and diagnostic procedures.

#### Technical Standards for Successful Completion of the Surgical Technology Program:

These Technical Standards should be used to assist each applicant and student to determine if they are otherwise qualified to be a Surgical Technologist. It is the policy of East Central College to provide reasonable accommodations for individuals with disabilities. If you need an accommodation due to a disability under the Americans with Disabilities Act, please contact the Access Office at (636) 584-6581, prior to applying to the ECC Surgical technology program.

#### **Progression Policy:**

Students in the final semester of the program are required to take a standardized Surgical Technology Exit Exam. Achievement of an acceptable score is required for successful completion of the program. Details are published in the Student Surgical Technology Handbook (obtained after acceptance and available on the Surgical Technology website).

Upon completion of the Associate of Applied Science degree in Surgical Technology, the graduate will be able to meet the standards outlined in this application.

I acknowledge receiving, reading, understanding, and meet the Surgical Technology Technical Standards. I realize that these Technical Standards must be met for successful completion of the ECC Surgical Technology Program. I further understand that completion of the ECC Surgical Technology Program does not guarantee certification from the National Board of Surgical Technology and Surgical Assisting.

Student Name (printed legibly):	
Student Signature:	Date:

**NOTE:** Students who do not meet Technical Standards or NBSTSA requirements may not be eligible for the ECC Surgical Technology Program. Any applicant who is concerned about being eligible for certification may discuss this matter with the Dean of Health Science by contacting the Health Science office at (636) 584-6616 for an appointment.

Updated: June 2025

## East Central College Associate of Applied Science Degree in Surgical Technology

#### Acknowledgement of Technology Requirements Form

<u>To the applicant</u>: Review this form to indicate you understand the Technology requirements of the Surgical Technology Program. Sign and return the form with your Surgical technology application by the April 1<sup>st</sup> deadline.

The East Central College Surgical Technology Program utilizes e-technologies to deliver a portion of course content and as a means of communication with program students, faculty and staff. Through a combination of didactic coursework, classroom/laboratory practice, and clinical experiences, students will learn the profession of Surgical Technologist. Aspects of all of these learning environments will require familiarity with internet-based technologies. In addition to internet-based technologies, interactive television will also be utilized to convey course content. Specialty topics may have a significant portion delivered with this technology. This allows students to experience the highest level of expertise for instructional purposes.

Offers of acceptance to the ECC Surgical Technology Program are made as conditional offers. In addition, to the satisfactory completion of pre-requisite courses, a satisfactory background check, and a negative alcohol, drug, and/or controlled substance test, applicants are required to acknowledge the integral use of Technology in the delivery of this program. Technologies include, but are not limited to; internet, e-mail, Canvas, interactive television (ITV), online database searching, web-based lecture capture, internet streaming video review, and other e-technologies as assigned as integral components of the Surgical Technology Program. While many of these technologies are accessible through any computer with access to the internet, students may be required to travel to the Union campus or Rolla location to attain consistent, high-speed access compatible with viewing of content-specific materials. Students are also required to attend classes on campus delivered through the ITV or live stream format.

Students are NOT required to have a personally owned computer or home-based high-speed internet access as these materials and services are made readily available at either the Union or Rolla location. However, current students report that personally owned laptop computers and access to high speed internet connections in their homes leads to increased satisfaction and a more convenient and accessible learning environment.

I have read and understand the above Technology requirements related to the ECC Surgical Technology Program and hereby acknowledge that in order to successfully complete the program I will need to utilize said technologies for communication with program faculty and staff, access to course content, assignment submission, and dialogue with fellow classmates and colleagues in these virtual environments.

Name (Please Print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date:

June 2025



# Allied Health Program Policy Medical Marijuana Policy

As of December 2018, Article XIV of the Missouri Constitution now allows for the possession and cultivation of marijuana for medical use, after voters approved a statewide ballot measure. Under the program developed by the Missouri Department of Health and Senior Services, Missouri physicians may certify that their patients are eligible for medical marijuana use. Patients who receive certification must then apply for an identification card authorizing their use of medical marijuana.

Please note, *marijuana is still illegal at the federal level*. Regardless of whether medical marijuana is legal in Missouri, federal law requires that colleges and universities adopt and enforce drug-free workplace policies, as well as programs to prevent the unlawful possession, use, or distribution of illicit drugs by students and employees. Accordingly, because marijuana is still considered illegal under federal law as a "Schedule I" drug, *East Central College must prohibit its distribution, possession, and consumption on property owned and operated by the College or its affiliates (clinical partner affiliations)*.

Students and employees who are found in possession or under the influence of marijuana will be subject to disciplinary action in keeping with the College's policies and procedures. Please be advised that disability accommodations are not available for medical marijuana use. Students are encouraged to seek assistance with ACCESS services for options related to alternative accommodations. In the event that the authorized use of marijuana for medical purposes while off-campus impairs a student or results to student conduct violations, it may result in disciplinary consequences from the program and/or College.

CBD oils, supplements, and products derived from hemp are legal under both federal and Missouri law, but may not be sold on campus. Individuals are cautioned to use these products at their own risk. *These types of supplements may still be detected in small amounts or types and can result in a positive drug screen (AJN, 2/2021)* 

Student Name (printed legibly): \_\_\_\_\_

Student Signature: \_\_\_\_\_\_Date: \_\_\_\_\_Date: \_\_\_\_\_Date: \_\_\_\_\_Date: \_\_\_\_\_Date: \_\_\_\_\_\_Date: \_\_\_\_\_\_\_Date: \_\_\_\_\_\_Date: \_\_\_\_\_Date: \_\_\_\_\_\_Date: \_\_\_\_\_\_Date: \_\_\_\_\_\_Date: \_\_\_\_\_\_\_Date: \_\_\_\_\_\_Date: \_\_

\*\*Please submit this form with your application.