

201 W. Main St. Suite 2C Medford, OR 97501 (541) 622-8053

ASCP or NHA Exam Prep Course Applicant Information:

First Name		Middle Initial		Last Name			
Street Address							
City				C1~1			
City Zip				Stat	е		
1							
Have you ever applied to this school before? Circle One		Yes	No	When?			
Have you ever attended this school before? Circle One		Yes	No	Did you graduate?		Yes	No
If you did not gradua you left?	te, what was the reasor	۱					
How did you hear ab	out RSP?						
	r						
Primary Phone							
Number							
Secondary Phone Number							

Date of BirthAre you a U.S. Citizen? Circle
OneYesNo

Email Address

Have you served in the U.S. military/armed services? Circle One	Yes	No	Honorably Discharged?	Yes	No
Are you currently affiliated with WorkSource Oregon for funding of the program you are applying for?	Yes	No	If yes, please state your caseworker's name:		
Are you currently eligible for or are receiving assistance from TANF, Oregon Trail or other similar programs? (If so, you may qualify for tuition assistance opportunities.)	Yes	No	Would you be interested to learn more about these resources?	Yes	No
Are you currently employed in a healthcare facility?		No	If yes, please state your current job title and facility.		

<u>Eme</u>	rgency Contact Information:				
Idress					
Jmber					
lucation:	EDUCATION:				
chool Graduation Year:	High school name and city:				
ompletion Year:	GED Program name and city:				
mpleted the following postse	condary education: (Check all that apply)				
e not attended college	Associate degree				
e college	Bachelor degree				
ificate program at commun	ity 🔲 Master degree				
•					
	Doctorate or professional degree				
renticeship training	Other (Describe below)				
	Employment:				
urrently employed? (Choose	e one)				
35+ hours / week not at this time	Yes, less than 35 hours/weekRetired				
	Idress e, Zip Jmber Jmber Jucation: Iucation: Iucation: Incol Graduation Year: 				

will be charged an additional fee of (\$5.00). Applications are not processed without payment of the application fee. Application fees can be paid by credit/debit card, check or cash.

I certify that all statements on this application and accompanying documents are complete and true. I also understand that if I am admitted and do not enroll before the scheduled start date, I may need to reapply for admission. I understand that submitted materials will not be returned or duplicated.

Signature: _____

ASCP Exam Prep Course and NHA Exam Prep Course applicants must provide the following documents for complete application submission:

- Completed RSP Application for Admission
- Colored copy of current state issued driver's license or identification cared.

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