

**TURTLE MOUNTAIN COMMUNITY COLLEGE
CLINICAL/MEDICAL LAB TECHNICIAN (CLT/MLT) PROGRAM**

CLT/MLT students are candidates selected for admission into CLT/MLT program of study; after meeting the Standard admission requirements of TMCC.

Please type or print neatly in blue or black ink

Last Name Name(s)	First Name	Middle Initial	Previous Last
Male	Female	Email address _____	

Social Security Number	Date of Birth (mm/dd/yy)
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Current mailing address number and street	City	State	Zip
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Physical address if different from mailing address	City	State	Zip
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Daytime phone	Evening phone	Message Cell phone
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High school diploma or college degree earned: Yes No GED earned: Yes No

Education Information

List all colleges where you have completed CLT/MLT prerequisites and/or a degree

College	State	Dates of Attendance	Degree earned/number of credits

I have read and understand the admission criteria for the CLT/MLT program at Turtle Mountain Community College. I understand that it is my responsibility to meet all program and application criteria. I verify that all statements on this application are complete and true and I understand that **falsification of any information may lead to disqualification or dismissal from the program.**

Signature	Date
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