



Application Fee (\$35)
Pay at the Cashier's Office
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A.S. RADIOGRAPHIC SCIENCE PROGRAM APPLICATION

Applying for:

- **Fall Semester Admission _____(Year) March 1 – March 25, 2026 Application Window**

Incomplete applications will be returned

PERSONAL INFORMATION

Last Name		First Name		Middle Name		Prior Name	
Permanent Address (Street, Apt #)				City, State, Zip			
Local Mailing Address (if different from above)				City, State, Zip			
Primary Phone		Secondary Phone		LC State Student I.D. Number			
WarriorMail E-mail address							
Person to contact in case of emergency			Telephone		Relationship		

EDUCATIONAL RECORD

Beginning with the most recent, list all colleges and universities attended, regardless of length of attendance. Include any educational institutions you are currently attending.

College or University	Location: City and State	Dates of Attendance		Degree or Certificate Earned
		FROM: Mo./Yr.	TO: Mo./Yr.	

Bachelor's degree or higher held? YES NO College/Univ. awarding _____

Are you an Idaho resident? YES NO

PRE-REQUISITE COURSES COMPLETED OR IN PROGRESS

Course	Institution (attach unofficial transcripts for each school other than LCSC)	Prefix & Course #	Credit Hours	Name of Course (Can leave name and prefix blank if taken at LCSC)	Semester/Year Taken	# Times Class was Taken	Grade (Write "IP" if still in progress)
ENGL 101 Writing & Rhet I							
ENGL 102 Writing & Rhet II							
CHEM 105 Organic/Biochem							
MATH Core							
BIOL 227 A/P I or Anatomy							
BIOL 228 A/P II or Physiology							

ENTRANCE TESTING -- Health Professions HESI Admission Assessment (A²)

HESI A ² HP test completed at LCSC? YES Date of exam/Planned completion date:
Location of testing center if not taken at LCSC: PLEASE ATTACH EXAM RESULTS SCORE

NON-NATIVE ENGLISH LANGUAGE APPLICANTS

Do you speak fluent English? YES NO
Proficiency in English is required for both patient safety and student success. International students must meet LC State English language proficiency requirements for college acceptance.

Applicant Signature

Date

Advisors Checklist:

- _____ Evaluate Transfer Summary for acceptable transfer of core courses and required science courses
- _____ Have student attach unofficial transcripts from transfer schools (if applicable)
- _____ Verify all information is correct, completed and legible on the application form
- _____ Complete Course Substitution form(s) if needed for Elect-999 courses
- _____ Ensure all needed documents are attached

LCSC Advisor Name & Signature

Date