

Medical Laboratory Science Program Admission Requirements

Students seeking admission into the Medical Laboratory Science Program must provide all necessary information to the Program Director by **May 15th**. Applications received after May 15th will be considered on a space available basis. Space in the program is limited due to clinical site availability. Admission is competitive and based on grades and references.

THE FOLLOWING MATERIALS MUST BE SUBMITTED:

- 1. A completed application form including signature.
- 2. Three letters of recommendation using the enclosed forms; two must be from college instructors or former employers.
- 3. A current official transcript from each college or university attended. The transcript should have a minimum overall grade point average of 2.0 and a sciences grade point average of 2.0 to be considered for admission.

NOTE:

All pre-professional course work must be completed prior to the start of the professional program. If courses are currently in progress, or planned for the summer, an updated official transcript will be required prior to the first day of classes in the program. This is necessary to document that all prerequisites have been completed.

Application materials will be reviewed with the Admission Committee. A rating system based on the following criteria will be used in the selection process.

- a. Overall grade point average
- b. Science grade point average

Successful completion of a criminal background check is required for full admission into the Medical Laboratory Science program. Students who receive a conditional acceptance will need to complete a criminal background check through AccuSource. The cost of the background check is approximately \$40. Further instructions will be provided once the students are notified of their acceptance into the program. Additional information may be found on the College of Health Professions website.

A student's application will not be considered if the file is incomplete. Applicants are personally responsible for ensuring that **the items requested are delivered or emailed by May 15**th to:

Deliver to:

Email to:

Department of Medical Laboratory Sciences Health Affairs West (EHABW), Room 2.206 College of Health Professions The University of Texas Rio Grande Valley 1201 W. University Drive Edinburg, TX 78539 mlsadmissions@utrgv.edu



Medical Laboratory Science Program

Admissions Application

Deliver or Email Application To: Department of Medical Laboratory Sciences Health Affairs West (EHABW), Room 2.206 College of Health Professions The University of Texas Rio Grande Valley 1201 W. University Drive Edinburg, TX 78539 Email: mIsadmissions@utray.edu

Email: misadmissions@utrgv.edu						
Last Name:	First Name:			Middl	Middle Name:	
Student ID:	UTRGV Email:					
Phone:	Non-UTRGV Email:					
Address:	City: State:		Zip Co	Zip Code:		
Permanent Address: (if different than mailing address)						
Undergraduate Major:			Anticipa	ted Ent	rance Da	ate:
	University or College(s) Attended Major (List Most Recent First)		Degree Awarded		Date	
				Yes	No	
				Yes	No	
				Yes		
Do you hold a bachelor's degree, or will you complete a degree prior to the start of the program?				Yes		Νο
Do you plan to apply for a degree in Medical Laboratory Science?				Yes		Νο
Note: Students already possessing a bachelor's degree who meet the biology, chemistry, and math requirements may elect to receive a certificate verifying program completion and do not necessarily need to apply for another degree. Students who choose to apply for a bachelor's degree in Medical Laboratory Science must meet all requirements for the degree. For further information, see the University Catalog.						

UT Health Rio Grande Valley

Admissions Application

Medical Laboratory Science Program

Courses to be completed before the start of the MLS program, if applicable (Note: all prerequisite and core courses must be completed prior to entering MLS program)

Courses in Progress Semester Hours Courses planned for summer semesters **Semester Hours**

Please indicate any other information regarding your qualifications which you would like for the admissions committee to consider:

Recommendation Forms:

Please sign the top portion of the recommendation form, indicating whether you will or will not waive your right to see any recommendations. Submit a copy of the form to three individuals. Only one should be a personal reference; at least two should be former teachers or employers.

Health Requirements:

Students will be required to submit immunizations or proof of immunity including measles, mumps, tetanus/diphtheria, rubella, hepatitis B, TB test, and Covid vaccine. Clinical affiliation sites may require additional immunizations as part of their admissions requirements. A list of required immunizations is required once the student is accepted into the program.

I have read and understand the requirements for the Medical Laboratory Science program. The information I have provided in this application is true and accurate to the best of my knowledge.

Applicant's Signature

Date

"With few exceptions, you are entitled, on your request, to be informed about the information The University of Texas Rio Grande Valley collects about you. Under Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review the information. Under Section 559.004 of the Texas Government Code, you are entitled to have the University of Texas Rio Grande Valley correct information about you that is held by us and that is incorrect, in accordance with the procedures set forth in the University of Texas System Business Procedures Memorandum 32. The information that The University of Texas Rio Grande Valley collects will be retained and maintained as required by Texas records retention laws (Section 441.180 et seq. of the Texas Government Code) and rules. Different types of information are kept for different periods of time."

IMPORTANT

In compliance with the American with Disability Act, the Medical Laboratory Science program provides the following information to aid the applicant/student to determine whether reasonable modification will be needed. Admission is not based on these standards.

Essential Functions

Visual:

- Visual ability sufficient to differentiate colors, identify structures microscopically and read written materials
 - a. Ability to observe characteristics from biological specimens including but not limited to color, clarity, etc.
 - b. Characterize reagents or chemical products, and the reactions they produce during routine analyses.
 - c. Comprehend text in the form of numbers, graphs letters etc. displayed on an electronic monitor and/or print in the English language.
 - d. Ability to operate a clinical microscope to distinguish various intricate structures such as cells and characteristics to categorize accurately for precise diagnosis of biological disorders/illnesses.

Motor Skills

- Gross and fine motor skills necessary to manipulate laboratory instruments and equipment consistent with standard of medical laboratory practice
 - a. Perform tasks that require the use of various analyzers and instruments to transmit data essential to patient care.
 - b. Dexterity necessary to use essential tools in a laboratory setting such as pipettes, analyzers, keyboards, computers, heat-fixed tools, loops, etc. as well as venipuncture procedures or other medical procedures

Communication Skills

- Skills adequate for transmitting information to and from patients and other health professionals
 - a. Provide instructions to patients
 - b. Communicate effectively in written and verbal forms
 - c. Ability to read, comprehend and follow instructions

Critical Skills

- Intellectual attributes sufficient for clinical decision making including in emergency medical situations
 - a. Identify unacceptable results and take appropriate action as well as locate sources of error

Behavioral

- Behavioral attributes sufficient for working in a health care environment and providing patient care
 - a. Ability to adapt to changes regarding technological advancements in healthcare and make critical decisions in times of emergencies and in high-stress environments.
 - b. Work efficiently to reflect swift turnaround times for specific duties and/or tasks.
 - c. Ability to respond ethically and honestly in all decisions including but not limited to:
 - i. Being honest with errors made in the laboratory or work field.
 - ii. Able to receive constructive criticism and self-evaluate for performance improvement.
 - iii. Ability to recognize potentially harmful outcomes to situations that may arise and work to limit harm to oneself and others through safety procedures and protocols.
 - d. If a student is diagnosed with a psychiatric disorder or mental health disorder, he/she may function as a medical laboratory science student if the condition is under control and/or under the care of a clinician. This will allow for accomplishment of the program's educational, psychomotor, and affective goals with or without reasonable accommodation. The student's functioning must oblige by required acceptable standards. In the case of a deteriorating event, the student must be willing to accept professional help before the event can pose danger to self, staff, colleagues, patients, or patient care.

Medical Laboratory Science Program Recommendation Form

Applicant Instructions: Please complete this section and sign prior to submitting the form to your evaluator.

Name of Applicant:				
I waive any right of access to this recommendation form and grant it to be held confidential.				
I do not waive my right to access this recommendation form.				
Applicant's Signature Date				

Evaluator: After completion of the form, please send directly or email to the address at bottom of the page.

How long have you known this applicant? ______Relationship to applicant: _____

Based on your knowledge of the applicant, please rate the following characteristics:

	Above Average	Average	Below Average	No Chance to Observe
Enthusiasm				
Ability to work independently				
Cooperates with others				
Dependable				
Willingness to accept criticism				
Responsible				
Maintains reasonable composure under pressure				
Maintains high standards of work				
Follows instructions				

Which positive attributes you have observed in the applicant that would help them succeed in the program?

Are there any areas in which you feel the applicant needs improvement?

Additional comments:

Evaluator's Name:		Position	n/Title:
Organization:	Phone:		Email:
Evaluator's Signature:			Date:

Please return to: Department of Medical Laboratory Sciences, EHABW 2.206, College of Health Professions, The University of Texas Rio Grande Valley; 1201 W. University Drive, Edinburg, TX 78539 or electronically to mlsadmissions@utrgv.edu

Medical Laboratory Science Program Recommendation Form

Applicant Instructions: Please complete this section and sign prior to submitting the form to your reference.

Name of Applicant:				
I waive any right of access to this recommendation form and grant it to be held confidential.				
I do not waive my right to access this recommendation form.				
Applicant's Signature Date				

Evaluator: After completion of the form, please send directly or email to the address at bottom of the page.

How long have you known this applicant? ______Relationship to applicant: _____

Based on your knowledge of the applicant, please rate the following characteristics:

	Above Average	Average	Below Average	No Chance to Observe
Enthusiasm				
Ability to work independently				
Cooperates with others				
Dependable				
Willingness to accept criticism				
Responsible				
Maintains reasonable composure under pressure				
Maintains high standards of work				
Follows instructions				

Which positive attributes you have observed in the applicant that would help them succeed in the program?

Are there any areas in which you feel the applicant needs improvement?

Additional comments:

Evaluator's Name:		Position	n/Title:
Organization:	Phone:		Email:
Evaluator's Signature:			Date:

Please return to: Department of Medical Laboratory Sciences, EHABW 2.206, College of Health Professions, The University of Texas Rio Grande Valley; 1201 W. University Drive, Edinburg, TX 78539 or

electronically to mlsadmissions@utrgv.edu

Medical Laboratory Science Program Recommendation Form

Applicant Instructions: Please complete this section and sign prior to submitting the form to your reference.

Name of Applicant:				
I waive any right of access to this recommendation form and grant it to be held confidential.				
I do not waive my right to access this recommendation form.				
Applicant's Signature Date				

Evaluator: After completion of the form, please send directly or email to the address at bottom of the page.

How long have you known this applicant? ______Relationship to applicant: _____

Based on your knowledge of the applicant, please rate the following characteristics:

	Above Average	Average	Below Average	No Chance to Observe
Enthusiasm				
Ability to work independently				
Cooperates with others				
Dependable				
Willingness to accept criticism				
Responsible				
Maintains reasonable composure under pressure				
Maintains high standards of work				
Follows instructions				

Which positive attributes you have observed in the applicant that would help them succeed in the program?

Are there any areas in which you feel the applicant needs improvement?

Additional comments:

Evaluator's Name:		Position	n/Title:
Organization:	Phone:		Email:
Evaluator's Signature:			Date:

Please return to: Department of Medical Laboratory Sciences, EHABW 2.206, College of Health Professions, The University of Texas Rio Grande Valley; 1201 W. University Drive, Edinburg, TX 78539 or

electronically to mlsadmissions@utrgv.edu