APPLICATION FOR ADMISSION – Certificate in Medical Physics

*$70 application fee must be received before the application will be considered

Type or print all answers clearly in black ink. If additional space is required, attach a separate sheet and refer to the question by number.

1. Enrollment to begin:  □ Fall  □ Spring  Session of 20___

2. □ Certificate Program (18 credits) □ Non-matriculated (Individual Courses)
   (Courses)
   - Radiological Physics and Dosimetry
   - Radiation Safety and Protection
   - Fundamentals of Medical Imaging
   - Radiobiology
   - Anatomy and Physiology
   - Radiation Therapy Physics

3. Required Documents
   - 2 Letters of Recommendation
   - CV
   - Official transcript(s) showing award to degree date(s)
   - Standardized test scores GRE and TOEFL scores if applicable

4. Name_____________________________________________________________________________________________________
   (Last)      (First)      (Middle)

5. Current address_________________________________________________________telephone (____)_____________________
   (City, State, Zip)
   If NJ resident, how long__________________________________________________________
   county__________________________________________________________

6. Permanent legal address (if different from above)
   ______________________________________________________________telephone (____)_____________________
   ______________________________________________________________(City, State, Zip)
   If NJ resident, how long__________________________________________________________
   county__________________________________________________________
   (Country)

7. Email address:__________________________________     Citizenship ______________________________________________

8. Social Security # _________-_________-_________

9. Citizenship status:  □ U.S. Citizen  □ Permanent Resident Alien  □ Non Resident Alien
   If non-resident alien, identify current visa category:  □ B1/B2 tourist  □ F-1  □ J-1  □ H-1  □ Other ________________
   When did you arrive in the U.S.A._____________________________   __________
   month          year

10. Responses to these questions are voluntary and will be kept confidential. Failure to furnish this information will not adversely affect the status of the application

   Date of birth_______________   Sex:  □ Male  □ Female

   Please complete both Part I and Part II

I) Ethnicity:  (select one)  □ Hispanic or Latino  □ Not Hispanic or Latino

II) Race:  (select one or more)  □ American Indian or Alaskan Native  □ Asian  □ White
              □ Black or African American  □ Native Hawaiian or other Pacific Islander
11. List chronologically all educational institutions attended since high school, including the institution you currently attend.

<table>
<thead>
<tr>
<th>Institution</th>
<th>Location</th>
<th>Attended From</th>
<th>Attended To</th>
<th>Degree Sought</th>
<th>Date Expected or Received</th>
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Do you (or will you) have a doctoral degree in physics, physical science, or engineering?  ___Yes  ___No

Please list institution and dates.__________________________________

Do you have an undergraduate degree in physics?  ___Yes  ___No

If not, have you taken at least 3 upper-division (3rd or 4th year undergraduate) physics courses?  ___Yes  ___No

Please list institution and dates.__________________________________

If you answered "No" to the above questions, please be aware that you will likely not satisfy the entry requirements into a CAMPEP-accredited residency, even with completion of a certificate program.

12. Have you previously applied for admission or taken courses at this graduate school?  □ no  □ yes  If yes, date __________________

13. Indicate scores on the Graduate Record Examination (GRE) if taken.

   Verbal______ (____%)   Quantitative ______ (____%)   Analytical ______ (____%)   Date of Exam ___________

   Subject: name_____________________________  score _______ (____%)  Date of Exam ___________

14. GPA: undergraduate _____  graduate _____

15. List scientific publications, academic awards, prizes, memberships in honorary or professional societies

   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________

16. List current occupation and major employment or activities since college graduation.

   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________

17. Military Service from___________________ to ___________________ Branch__________________________________________

18. How did you learn of the Rutgers-Graduate School of Biomedical Sciences?

   ___________________________________________________________________________________
   ___________________________________________________________________________________

19. Attach a statement expressing your motivation and aims for graduate study in the proposed major field.

   (A one sentence statement will not be accepted)

I have read and understand the attached statement of Essential Functions/Technical Standards, which all students must satisfy, with or without reasonable accommodations, for the course of study for which I am applying. I acknowledge that the Rutgers Graduate School of Biomedical Sciences has established these requirements for successful academic progress toward the degree sought. I understand and agree that any misrepresentation in this application will be sufficient cause for rejection of this application, or dismissal if I have been admitted to the Graduate School of Biomedical Sciences. In compliance with the Student Right to Know and Campus Security Act, Rutgers’s Annual Security Report is available from the Department of Public Safety at Liberty Plaza, Suite 100, 335 George Street, P.O. Box 2688, New Brunswick, NJ 08903-2688.

I certify that all documents and information provided by me are true, accurate and complete. Any false or misleading information may result in actions including, but not limited to, discipline, dismissal or revocation of degree.

   ________________________________  ________________________________
   (Applicant's signature)          (Date)

Rutgers does not discriminate in admissions or access to its programs and activities on the basis of race/color, ethnicity, national origin, religion/creed, disability, age, marital status, sex, sexual orientation or veteran’s status.
REQUEST FOR RECOMMENDATION

THIS SECTION TO BE COMPLETED BY THE APPLICANT (PLEASE PRINT OR TYPE)  Date:

Last Name _________________________ First Name ________________________ Middle Name______________

Proposed Field of Study:  Certificate in Medical Physics

AGREEMENT RESPECTING CONFIDENTIALITY:   I waive ?,    I do not waive ?,   my right of access to this recommendation form under the Family Education Rights and Privacy Act of 1974, 20 U.S.C.A. par 1232g (a) (1).

Signature _________________________

The person above is applying for admission to the Rutgers Graduate School of Biomedical Sciences. Please complete the form below and provide your estimate of the applicant’s aptitude for graduate study.

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<tr>
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<th>Upper 10 %</th>
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<th>Upper 25-30%</th>
<th>Lower Half</th>
<th>No basis for judgment</th>
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Comments:

Print or Type Name ____________________________________________________________

Signature ________________________________  Title ____________________________  Date ____________

Address __________________________________________________________________________
REQUEST FOR RECOMMENDATION

THIS SECTION TO BE COMPLETED BY THE APPLICANT (PLEASE PRINT OR TYPE) Date:__________

Last Name _________________________ First Name ________________________ Middle Name______________

Proposed Field of Study: **Certificate in Medical Physics**

AGREEMENT RESPECTING CONFIDENTIALITY: I waive ?, I do not waive ?, my right of access to this recommendation form under the Family Education Rights and Privacy Act of 1974, 20 U.S.C.A. par 1232g (a) (1).

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Comments:

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Signature ________________________________ Title ____________________________ Date_______________

Address ______________________________________________________________________________________
REQUEST FOR RECOMMENDATION

THIS SECTION TO BE COMPLETED BY THE APPLICANT (PLEASE PRINT OR TYPE)  Date:

Last Name __________________________________ First Name ____________________________ Middle Name

Proposed Field of Study:  **Certificate in Medical Physics**

AGREEMENT RESPECTING CONFIDENTIALITY:  I waive ☐,  I do not waive ☐,  my right of access to this

Signature _______________________

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Comments:

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Signature ____________________________  Title ____________________________  Date _____________
Address ______________________________________________________
INSTRUCTIONS TO APPLICANTS

The GSBS is committed to complying with the requirements of the Americans with Disabilities Act

1. Answer all questions completely. Return the completed application to the School of Graduate Studies 675 Hoes Lane, Piscataway, New Jersey 08854-5635. A $70.00 non-refundable application fee is required of ALL applicants; make check payable to Rutgers, The State University of New Jersey.

   Deadline for receipt of Fall Term completed applications: July 25 Spring Term Dec 15

2. Complete the upper portion of the recommendation forms and send them to the individuals from whom you are requesting letters of recommendation.

3. Request that official transcripts of all your prior academic records be forwarded to this school as soon as possible.

NOTE: NO APPLICATIONS WILL BE CONSIDERED UNTIL THIS SCHOOL HAS RECEIVED:

   A. Completely executed application form and $70.00 application fee
   B. All academic transcripts
   C. Recommendations from two references, preferably from academic instructors, who have direct knowledge of the applicant’s academic performance in science-related fields.
Technical Standards refer to non-academic requirements that are essential for meeting the academic requirements of the program. Within any area of specialization, students must demonstrate competence in those intellectual and physical tasks that together represent the fundamentals of biomedical research in their chosen discipline. Enrollment is contingent on the result of certain medical laboratory test (e.g., TB) and fulfillment of immunization requirements. For details see the Rutgers policy website: http://policies.rutgers.edu/view-policies/table-contents

The Ph.D. and M.S. degree programs at the Rutgers Graduate School of Biomedical Sciences require a laboratory-based research dissertation. Granting of these degrees implies that the recipient has demonstrated a base of knowledge in the field and the ability to independently apply that knowledge to solve a particular problem by forming hypotheses, designing and conducting experiments, interpreting the experimental results, and communicating the results and their interpretation to the scientific community. Thus, a candidate for the M.S. or Ph.D. degree in the biomedical sciences must possess abilities and skills that allow for observation, intellectual and conceptual reasoning, motor coordination, and communication. The use of a trained intermediary is not acceptable in many situations in that a candidate's judgment will be based on someone else's power of selection and observation.

A student whose behavior or performance raises questions concerning his or her ability to fulfill the essential functions may be required to obtain evaluation and/or testing by a health care provider designated by the School, and to provide the results to the Campus Student Health Service for the purpose of determining whether the student is fit to pursue the educational program. If the student is deemed fit to pursue the program, the School reserves the right to require actions recommended by the health care provider, including further testing, counseling, monitoring, leave of absence, etc.

Observation
The candidate must be able to acquire knowledge by direct observation of demonstrations, experiments, and experiences within the laboratory and instructional setting. Examples are physiological or pharmacological responses in animals, studies of microbiological cultures and organisms, identification of normal and abnormal cells or tissues through a microscope, and interpretation of results obtained on various instrumentation.

Intellectual/Conceptual Abilities
The candidate must be able to measure, calculate, analyze, reason, integrate and synthesize information to solve problems.

Motor Skills
The candidate must possess motor skills necessary to perform procedures required for experimentation within the chosen discipline. These skills may include, but are not limited to, surgery in animals, handling of animals, transfer of microorganisms to various mediums, preparing chemical and often toxic materials and solutions, preparation of anatomical specimens for microscopic examination, manipulating electronic and other complex equipment. Such actions require coordination of muscular movements and functional use of the senses of touch and vision.

Communication
The candidate must be able to communicate and discuss his or her experimental hypotheses and results to the scientific community, both in scientific journals or directly at scientific meetings, seminars, or in the laboratory to the research team.

Behavioral and Social Attributes
The candidate must possess the emotional and mental health required for full utilization of his or her intellectual abilities, the exercise of good judgment, the prompt completion of responsibilities inherent in managing a scientific laboratory, the ability to function under the stress inherent in biomedical research, and the ability to understand and comply with ethical standards for the conduct of research.