

BUTLER COUNTY COMMUNITY COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM Application for Admission, 2015

Please Type or Print
SECTION A – General Information

Legal Name: Last Former Last Name or Maiden Name First MI

Street City State Zip

Social Security Number ()
Telephone Number

High School Attended

Did you graduate? Yes, Year _____ No, GED

College(s) Attended

Name	Dates Attended	Degree or Credits Earned

Do you plan to transfer college credits into a program at BC3? Yes No

County of Residence (check one)

- | | | |
|---------------------|------------------------|---------------------------------|
| _____ 310 Butler | _____ 416 Clarion | _____ 101 Other in PA |
| _____ 302 Allegheny | _____ 437 Lawrence | _____ 500 Out-of-State |
| _____ 403 Armstrong | _____ 443 Mercer | _____ 600 International Student |
| _____ 304 Beaver | _____ 265 Westmoreland | |

SECTION B – Completion of required Biology course (comparable to BIOL 101 or high school Biology I)

Institution _____

Semester and Year _____ Grade _____

SECTION C – Completion of required Preparatory Algebra course (comparable to MATH 091 or high school Algebra)

Institution _____

Semester and Year _____ Grade _____

**BUTLER COUNTY COMMUNITY COLLEGE
PHYSICAL THERAPIST ASSISTANT PROGRAM
APPLICATION GUIDELINES, 2015**

NOTE TO PROSPECTIVE STUDENTS

Thank you for your interest in the Physical Therapist Assistant (PTA) Program at Butler County Community College (BC3). The following will provide information about the profession, the PTA Program at BC3, and the application process.

ABOUT THE PROFESSION

As an important member of the health care team, PTA's work under the supervision of a licensed Physical Therapist (PT). Duties performed by the PTA include implementing treatment programs according to the plan of care, training patients in exercises and activities of daily living, conducting treatments using special equipment, administering modalities (or physical agents) and other treatment procedures, reporting to the PT on the patient's responses, modifying the treatment as necessary, documenting relevant aspects of treatment, and communicating with other healthcare team members.

PTA's are most commonly employed in hospitals, rehabilitation centers, nursing facilities, outpatient clinics, and home health settings. Local, regional, and national trends can affect employment availability, and the PTA Program cannot guarantee employment to graduates.

Licensure is required by all states in order to practice as a PTA. The national licensing examination is the National Physical Therapy Examination (NPTE). The Federation of State Boards of Physical Therapy determines all eligibility requirements and passing scores. Following admission into the PTA Program and throughout the program, information regarding NPTE, costs, eligibility, and all other relevant information will be provided.

ABOUT THE COLLEGE

Butler County Community College, chartered in 1965, was the first community college in Western Pennsylvania. Today, approximately 4,000 students are enrolled in credit programs across our five regional locations. The PTA program is located two miles south of the city of Butler on a spacious, wooded campus. BC3 is accredited by the Middle States Association of Colleges and Schools, Middle States Commission on Higher Education. Information about BC3 may be obtained by contacting the Admissions Office at admissions@bc3.edu or 724-284-8501.

PTA EDUCATIONAL PROGRAM

The PTA Program consists of 70 credits and can be completed in a minimum of five semesters, which includes a summer session. PTA classes begin in the fall semester (typically the fourth week of August), and the Program is completed at the conclusion of the spring semester approximately 21 months later. Upon graduation, students receive an Associate in Applied Science (AAS) degree in Physical Therapist Assistant.

The PTA Program courses include general education, technical education, and clinical education courses. Due to the intensive nature of the program, it is recommended that applicants complete as many of general education courses as possible before beginning the technical PTA courses. **Widely recognized as “gatekeeper” courses, Human Anatomy and Physiology I and II are especially predictive of future performance and are highly considered when selecting applicants for acceptance.** Students who want to take general courses prior to beginning the technical PTA courses should register as a General Studies (100A) Pre-PTA student.

The technical PTA courses are held primarily during the day, with a limited amount of coursework online. There are no evening or weekend PTA courses. Many of the technical PTA courses have a laboratory component in which various skills are learned and practiced. Students with questions about the physical requirements of the program are referred to Randy Kruger, PTA Program Director, at 724-287-8711, Ext. 8372.

There are three required full-time clinical experiences provided by the PTA curriculum. Students are placed at affiliating sites and gain clinical exposure and experience. Students are responsible for all transportation and other costs associated with the clinical education affiliations. The PTA Program's Academic Coordinator of Clinical Education will provide the students with all applicable materials and information necessary for the clinical education affiliations. Specific requirements to engage in clinical affiliations are listed in the Special Requirements section.

The PTA Program is not designed to be used as a bridge into a Physical Therapy program. The general education courses required by the PTA Program may transfer into four-year institutions towards a Bachelor's Degree. The technical and clinical PTA courses do not meet requirements for four-year degree programs. Students may meet with a PTA advisor for questions regarding further education options.

PTA PROGRAM ACCREDITATION STATUS

The PTA Program is fully accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE). CAPTE's address is 1111 North Fairfax Street, Alexandria, VA 22314, Telephone: (703) 706-3245.

The graduation rates for the PTA Program for the years 2012, 2013 and 2014 were 88.5%, 82.1%, and 65.4%, for an average graduation rate of 78.7%. Graduates are required to pass a licensing examination in order to practice as a PTA. The licensing examination (National Physical Therapy Examination or NPTE) passing rates from the PTA Program for the years 2011, 2012 and 2013 were 100%, 91.3% and 91.3%, for an average passing rate of 94.2%. Employment rates for the PTA graduates for the years of 2011, 2012 and 2013 were 94.1%, 95.2% and 95%, for an average employment rate of 94.8%.

ADMISSION POLICIES AND PROCEDURES

CRITERIA FOR ADMISSION

Admission into the PTA Program is both selective and competitive. Completion of an application packet is required. The application packet can be obtained from the Admissions Office at the main campus or may be downloaded from the BC3 website (www.bc3.edu/admissions). All applicants are considered equally regardless of race, color, disability, religious creed, ancestry, national origin, age, gender, or sexual orientation. The PTA Admissions Committee assumes the responsibility to review the data of all applicants and to select the best qualified individuals.

ACCEPTANCE REQUIREMENTS

The PTA Program is selective, so only the most qualified applicants will be accepted. The priority application deadline is May 15th and students will be notified of their status as soon as possible. Applicants who do not meet requirements at the time of application will not be considered until all admissions requirements are met. All applicants will be scored and ranked objectively based on a combination of grade point average (GPA) and college level Anatomy and Physiology. Those who receive the highest scores will be offered seats within the PTA Program. No priority is given to applicants who have applied in previous years.

Applicants who have completed many of the general education courses and/or have a high application score may be offered early acceptance, based on seat availability. Applications may be received after May 15th, but seats may or may not be available after that time.

There is a maximum enrollment of 30 students each year. If necessary, a waiting list will be created. There will be no carry over to subsequent years if an applicant is not selected. Applicants who do not receive admission into the PTA Program must re-apply the following year.

Applicants will be selected by the PTA Admissions Committee based on several factors including:

- PTA Application for Admission.
- Quality, quantity, and type of PT-related experience as reflected in the PTA Application for Admission. It is required that the applicant demonstrate at least 20 hours of job shadowing and/or work experience in one or more PT settings (hospital, outpatient clinic, rehabilitation facility, etc.). It is recommended that applicants gain exposure in more than one type of PT setting: for example, in a hospital and an outpatient clinic.
- Submission of two provided Personal Recommendation Forms: one from a PT or PTA where employment or job shadowing was completed and the second from a teacher or employer.
- Pre-requisite of Biology and Algebra
 - High school or college-level Biology comparable to BIOL 101 (with a grade of “C” or better)
 - High school or college-level Algebra comparable to MATH 091 (with a grade of “C” or better)
- Completion, if applicable, of any required developmental or preparatory courses, based on placement test scores (with a grade of “C” or better). All new students will be required to take placement tests, which assess Writing, Reading, and Basic Math.
- Passing grade (“C” or better) in all general education courses required by the PTA Program.
 - The student’s acceptance will be rescinded if a student receives a D or F in a required course prior to the start of the technical PTA courses. For example, if a student was accepted during the

spring semester, but received a D or F in a required course in the spring or summer, his/her acceptance would be rescinded.

- Human Anatomy and Physiology I and II are especially recommended. Applicants who achieve minimum passing grades or who required more than one attempt to pass Human Anatomy and Physiology have demonstrated significantly lower graduation rates and licensure passing rates than those who passed on the first attempt and with higher grades.
- Minimum GPA of 2.8.
 - The high school GPA will be accepted if the applicant has not attended college.
 - If not a high school graduate, a GED certificate will be accepted. Student will then need to complete 12+ college credits to establish a GPA.
 - If the applicant has a high school GPA of less than 2.8, the Admissions Committee will review the applicant upon completion of 12+ college credits with a college GPA of 2.8 or above (in non-preparatory or developmental classes).
 - If the applicant has a college GPA of less than 2.8, the applicant must either take courses to raise the GPA to at least 2.8 at their current institution or take 12+ credits at a new institution with a GPA of 2.8 or above.

SPECIAL REQUIREMENTS

The PTA Program Director will meet with all accepted students for an orientation session. Specific information will be given at that session. Among other orientation information, PTA Students will be advised of the following requirements:

1. Be certified in the American Heart Association: Basic Life Support for Health Care Providers or the American Red Cross' Basic Life Support for the Professional Rescuer.
2. Provide proof of personal health insurance coverage.
3. Have a satisfactory annual physical examination, including ability to meet physical requirements and proof of required immunizations.
4. Submit Act 34/151 clearances (Pennsylvania Criminal History Record and Pennsylvania Child Abuse Clearance). Students with criminal and/or child abuse backgrounds may not be permitted to engage in clinical affiliations, and therefore may not be eligible for program completion, licensure or employment. Some clinical sites require additional urine drug screening. Students with positive drug screen findings may not be permitted to engage in clinical affiliations, and therefore may not be eligible for program completion, licensure, or employment.
5. Assume all responsibilities for all transportation to and from the College as well as clinical facilities to which they are assigned.

Specific information about these requirements, including completion time line will be provided following acceptance to the program.

APPLICATION PROCESS

To expedite the admissions process, a **Self-Managed Application** has been developed. **The applicant will be responsible for collecting all credentials.** All parts of the application should be submitted together **with the exception of the official high school transcript and college transcripts (if applicable)** in one large envelope. The envelope you submit must include the information listed on the PTA Application.

STEPS TO COMPLETING YOUR PTA APPLICATION

1. Obtain PTA Application from the Admissions Office (724-284-8501 or 724-287-8711 Ext 8346) or at www.bc3.edu/admissions.
2. Read all materials carefully.
3. Make arrangements to complete job shadowing and/or work experience within a Physical Therapy setting. Contact the PT department at hospitals, nursing or rehabilitation facilities, outpatient clinics, or home care facilities. A minimum of 20 hours of volunteer and/or work experience is required. The hours may be completed at a single facility or combination of facilities.
4. Complete PTA Application for Admission. A \$25.00 one-time, non-refundable application fee is required of all individuals making application to the College for the first time.
5. Request a PT or PTA **and** a teacher or employer to complete Personal Recommendation Forms. These should be professional references, not friends or relatives. Complete the shaded portion of the Personal Recommendation Form. Address the envelopes to you. Please stamp the envelopes.
6. Give the Personal Recommendation Form and corresponding envelope to the Recommender. Notify your recommenders that they should return the completed Personal Recommendation Form to you enclosed in the appropriate envelope, sealed, and signed across the envelope flap. The two recommendations should be included in your application packet.
7. Send your official high school transcripts and/or GED test scores to Butler County Community College, Admissions Office, P.O. Box 1203, Butler, PA, 16003.
8. Send your official college transcripts (if necessary) to Butler County Community College, Office of Records & Registration, P.O. Box 1203, Butler, PA 16003.
9. Submit application materials to the Admissions Office either by dropping them off during business hours or via USPS mail to the address listed above.

BC3 will not consider the application process complete until all required materials, including the application, high school and college transcripts (if necessary), and both letters of recommendation, have been received. Upon receipt and processing of the application materials, BC3 will notify you of your status.

ALL APPLICANTS MUST MAKE ARRANGEMENTS FOR HAVING OFFICIAL HIGH SCHOOL AND COLLEGE TRANSCRIPTS SENT TO THE ADMISSIONS OFFICE. Note: Your high school or college transcript will be mailed the institution in a sealed envelope. If you did not graduate from high school, a copy of your GED test scores and an official copy of your high school transcript for the years you completed should be included with your application. All materials submitted become the property of BC3. Credentials sent in support of application will not be duplicated or returned to the applicant.

ESTIMATED COSTS AND FEES FOR THE PROGRAM

The following costs for the PTA Program are only estimates. They may be changed at any time without prior notice. Tuition and fee schedules are also available in the BC3 Catalog and BC3 website (www.bc3.edu). Tuition costs are flat rates based on full-time status (12-17 credits per semester). If students are less than full-time, tuition is charged on a per-credit rate based on the county of residence. All fees will apply whether students are full-time or part-time.

Butler County resident tuition	\$96 per credit
All other Pennsylvania residents tuition	\$192 per credit
Non-Pennsylvania or International tuition	\$288 per credit
Comprehensive fee	\$31 per credit
Lab fee	\$25 per lab course
Online course fee	\$15 per credit

Tuition, Fees, and Books (2014-2015)

	First Year	Second Year
Tuition		
Butler County resident	\$1440 x 2 semesters = \$2880	\$1440 x 2 semesters = \$2880
Other PA county resident	\$2880 x 2 semesters = \$5760	\$2880 x 2 semesters = \$5760
Out of state or international	\$4320 x 2 semesters = \$8640	\$4320 x 2 semesters = \$8640
Comprehensive fee	\$31 x 43 credits = \$1333	\$31 x 27 credits = \$837
Lab fee	\$25 x 5 courses = \$125	\$25 x 2 courses = \$50
Online course fee	\$15 x 1 credit = \$15	\$15 x 2 credits = \$30
Books	General courses: \$1060 PTA courses: \$950	General courses: \$0 PTA courses: \$300

Various other mandatory and optional costs are associated with the PTA Program. Detailed information about all associated costs will be given to students following acceptance.

AVAILABILITY OF FINANCIAL ASSISTANCE

All students are encouraged to complete a Free Application for Federal Student Aid (FAFSA) at www.fafsa.gov to determine eligibility for state and federal grant and loan programs. Please contact the Financial Aid Office at 724-284-8509 or financialaid@bc3.edu for further questions or assistance in the process.

CALENDAR FOR ADMISSION PROCESS

As previously noted, only applicants who meet admissions requirements will be considered for acceptance into the PTA Program. It is the applicant’s responsibility to see that the application packet is completed and mailed or delivered to the Admissions Office. It is recommended that all materials (excluding official high school and college transcripts) be sent together. The application process will not be considered to be completed until all materials have arrived and have been processed. Reviewing and ranking of applicants will not begin until after May 15th. Early acceptance may be offered to applicants with high scores. It is highly encouraged that applicants continue to take and complete general education courses, especially Human Anatomy and Physiology, during the application process and prior to the start of the academic year in August. Accepted **applicants are required to meet with a PTA Program advisor to register for PTA courses. Classes typically begin during the fourth week of August.**

YOUR COMPLETED SELF-MANAGED APPLICATION SHOULD INCLUDE:

- PTA Application
- BC3 Application Fee (A \$25.00 non-refundable application fee is required of all individuals making application to the college for the first time)
- Personal Recommendation from PT or PTA
- Personal Recommendation from Employer or Teacher
- Official High School Transcripts and/or GED test scores
- Official College Transcripts (if necessary)

If you have any additional questions, please feel free to call the Admissions Office at 724-284-8501 or 724-287-8711 Ext. 8346.

NONDISCRIMINATION POLICY

Butler County Community College is committed to providing equal opportunity in admissions and treatment of students, in educational programs for students, in employment opportunities and in governance of the College, without regard to race, color, religious creed, ancestry, national origin, handicap or disability, age, or sex.

The College shall take affirmative action to ensure (1) that it does not discriminate against an employee or applicant for employment or another person because of race, color, religious creed, ancestry, national origin, handicap or disability, age or sex; (2) that it does not subject students to unlawful discrimination in the admission process, take any action, direct or indirect, to segregate students in a classroom or course, or subject students to different or separate treatment in, nor restrict the enjoyment by a student of, a service, facility, activity or program at the College on the basis of race, color, religious creed, ancestry, national origin, handicap or disability, age or sex; and (3) that it does not discriminate in the employment of administrators on the basis of race, color, religious creed, ancestry, national origin, handicap or disability, age or sex and that its governance structure includes diverse membership broadly representative of the public interest as may be required by law or regulation.

There shall be no retaliation against any applicant, employee, or students for filing a harassment or discrimination complaint, or assisting, testifying, or participating in the investigation of such a complaint. Any applicant, employee, or student reporting sexual or other harassment or discrimination will also be protected from reprisals or retaliation by the College, any supervisors, and/or co-workers as a result of such complaints(s).

The College is committed to be in compliance with the Pennsylvania Human Relations Act (43 P. S. §§ 951—962.2) and the Pennsylvania Fair Educational Opportunities Act (24 P.S. § § 5001—5009). Employment and educational opportunities at Butler County Community College are available to all as required by Title VII, Title IX, Section 504 of the Rehabilitation Act, and Pennsylvania’s Fair Educational Opportunities Act, and all applicable regulations.

For information regarding equal education and employment opportunity including services, activities and facilities that are usable and accessible to disabled persons, contact the Director of Human Resources, Butler County Community College by telephone at 724 287-8711, Ext. 8353, or in writing at P. O. Box 1203, Butler, PA 16003-1203. If a student, employee, or applicant is physically or mentally disabled, he/she may request special services and accommodations. Information on the College’s services for disabled students may be obtained from the Academic Center for Enrichment at extension 8327. Employees or applicants should contact the Human Resources Office at extension 8353 for more information.

Revised 7/98, 6/99, 5/00, 10/02, 09/03,9/04,9/05,9/06,10/07,9/08,9/09,11/11,10/12,9/13, 11/14

Note to Applicant: Complete shaded area; provide PT/PTA recommender with Personal Recommendation Form and Envelope

BUTLER COUNTY COMMUNITY COLLEGE PO BOX 1203 BUTLER PA 16003-1203	PT or PTA PERSONAL RECOMMENDATION FORM PHYSICAL THERAPIST ASSISTANT PROGRAM APPLICANT'S NAME _____ <div style="display: flex; justify-content: space-around; width: 100%;"> LAST FIRST MI </div> SS # _____
To the applicant, under the Federal law entitled the Family Educational Rights and Privacy Act of 1974, students are given the right to inspect their records, including letters of recommendation. While we consider all letters of recommendation carefully, we believe that in many instances letters written in confidence are of greater value in the assessment of a student's qualifications, abilities, and promise.	
A signature is required for either statement A or B below, indicating waiver of right to inspect this letter of reference.	
A. I have waived my right to inspect this letter of reference and hereby inform recommender that this letter will be kept strictly confidential.	
_____ APPLICANT'S SIGNATURE DATE	
B. Referent is advised that I have retained my right to inspect this letter of recommendation after enrollment and that I may have access to it.	
_____ APPLICANT'S SIGNATURE DATE	

Note to Recommender: You have been requested to complete this reference form. Your frank appraisal will assist the Admissions Committee in evaluating the applicant's qualifications.

	PT PTA _____ (Circle one)		
NAME OF RECOMMENDER			
BUSINESS OR PROFESSIONAL ADDRESS	How long have you known the applicant?		
NUMBER AND STREET	CITY	STATE	ZIP

Please evaluate the applicant as fairly as you can in each of the categories listed below by marking the appropriate box.

"Exceptional" indicated the applicant is superior.

"Average" indicates the applicant is normal, typical or satisfactory.

"Good" indicates the applicant is able, competent or qualified

"Poor" indicates the applicant is below average.

CATEGORY	EXCEPTIONAL	GOOD	AVERAGE	POOR	NO BASIS TO JUDGE
INITIATIVE & MOTIVATION					
EFFECTIVE INTERPERSONAL SKILLS					
MATURITY AND EMOTIONAL STABILITY					
ABILITY TO EXPRESS SELF VERBALLY					
ABILITY TO EXPRESS SELF IN WRITING					
RESPONSIBILITY DEMONSTRATED					
ABILITY TO HANDLE SENSITIVE SITUATIONS					
EMPATHY FOR OTHERS					
ABILITY TO SUCCESSFULLY COMPLETE PROGRAM					
ACADEMIC ACHIEVEMENT					

(OVER)

How long have you known the applicant?

In what capacity?

In a brief statement, describe the applicant's major strengths.

In a brief statement, describe any areas that may require improvement.

In consideration of the total perspective, please give a final evaluation. If you have any reservations or comments, please explain.

Highly Recommend Recommend Some Reservations Serious Reservations

May we call you if we have additional questions? Yes No

If yes, daytime phone number: _____

Instructions: Please return this form in envelope provided. Seal and sign the envelope flap, and return to student.

SIGNATURE _____
DATE _____

Thank you for completing the Personal Recommendation Form. We appreciate your input! Thank you.

Note to Applicant: Complete shaded area, provide PT/PTA recommender with Personal Recommendation Form and Envelope

BUTLER COUNTY COMMUNITY COLLEGE PO BOX 1203 BUTLER PA 16003-1203	TEACHER or EMPLOYER PERSONAL RECOMMENDATION FORM PHYSICAL THERAPIST ASSISTANT PROGRAM APPLICANT'S NAME _____ <div style="display: flex; justify-content: space-around; width: 100%;"> LAST FIRST MI </div> SS # _____
To the applicant, under the Federal law entitled the Family Educational Rights and Privacy Act of 1974, students are given the right to inspect their records, including letters of recommendation. While we consider all letters of recommendation carefully, we believe that in many instances letters written in confidence are of greater value in the assessment of a student's qualifications, abilities, and promise.	
A signature is required for either statement A or B below, indicating waiver of right to inspect this letter of reference.	
A. I have waived my right to inspect this letter of reference and hereby inform recommender that this letter will be kept strictly confidential.	
_____ APPLICANT'S SIGNATURE DATE	
B. Referent is advised that I have retained my right to inspect this letter of recommendation after enrollment and that I may have access to it.	
_____ APPLICANT'S SIGNATURE DATE	

Note to Recommender: You have been requested to complete this reference form. Your frank appraisal will assist the Admissions Committee in evaluating the applicant's qualifications.

	TEACHER	EMPLOYER
NAME OF RECOMMENDER	(Circle one)	
BUSINESS OR PROFESSIONAL ADDRESS	How long have you known the applicant?	
NUMBER AND STREET	CITY	STATE
		ZIP

Please evaluate the applicant as fairly as you can in each of the categories listed below by marking the appropriate box.

"Exceptional" indicated the applicant is superior.

"Average" indicates the applicant is normal, typical or satisfactory.

"Good" indicates the applicant is able, competent or qualified

"Poor" indicates the applicant is below average.

CATEGORY	EXCEPTIONAL	GOOD	AVERAGE	POOR	NO BASIS TO JUDGE
INITIATIVE & MOTIVATION					
EFFECTIVE INTERPERSONAL SKILLS					
MATURITY AND EMOTIONAL STABILITY					
ABILITY TO EXPRESS SELF VERBALLY					
ABILITY TO EXPRESS SELF IN WRITING					
RESPONSIBILITY DEMONSTRATED					
ABILITY TO HANDLE SENSITIVE SITUATIONS					
EMPATHY FOR OTHERS					
ABILITY TO SUCCESSFULLY COMPLETE PROGRAM					
ACADEMIC ACHIEVEMENT					

(OVER)

How long have you known the applicant?

In what capacity?

In a brief statement, describe the applicant's major strengths.

In a brief statement, describe any areas that may require improvement.

In consideration of the total perspective, please give a final evaluation. If you have any reservations or comments, please explain.

Highly Recommend Recommend Some Reservations Serious Reservations

May we call you if we have additional questions? Yes No

If yes, daytime phone number: _____

Instructions: Please return this form in envelope provided. Seal and sign the envelope flap, and return to student.

SIGNATURE _____
DATE _____

Thank you for completing the Personal Recommendation Form. We appreciate your input! Thank you.