



**Northwest Technical Institute**  
rethink education

*“Changing lives through education, training, and skill development.”*

# Surgical Technology Application

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## SURGICAL TECHNOLOGY PROGRAM CHECKLIST

Thank you for inquiring about Northwest Technical Institute's **Surgical Technology Program**. This is an 11-month program that begins in August and ends in June. There are **no prerequisite classes**, although college credited classes in Medical Terminology, Anatomy and Physiology I and II may be applied for course credit.

### FILE COMPLETION

To be considered for this program, you must have a complete file no later than May 1st:

**Surgical Technology Application Packet** and DD-214, if applicable (**\$10.00 fee**) **Application Fee \$10.00 must be paid when application is turned in.**

**Next-Generation Accuplacer test (\$10.00)** you must score a minimum 274 for writing skills and 249 for Arithmetic Math. The **Next-Generation Accuplacer** is a Basic Arithmetic and writing exam which can be taken Monday through Friday from 7:30-11 a.m., in room 130. Photo I.D. is required.

Students must score a 274 or above on Next-Generation Accuplacer Writing to be considered for admissions and will be given credit for NPR 1403 Technical Communications

**High School Transcript or GED** needs to be **OFFICIAL** transcripts. (An "Official Transcript" means it has the embossed school seal imprint and is **sent directly** to the NTI Admissions Office. You will be responsible for any fees involved.

**College Transcripts** needs to be official transcripts (An "Official Transcript" means it has the embossed school seal imprint and sealed in an envelope and sent directly to the NTI Admissions Office. Please see cover page about transfer credit.

**Immunization Records** includes Two (2) Measles & Rubella (MMR) is required, if born on or after January 1, 1957. 2 **Negative TB skin test** or a chest x-ray (allow three working days to complete this test). **Varicella:** You will need to show proof of 2 vaccines, proof of positive titer, or a note from your physician stating that you have a history of varicella (chicken pox). **DTAP:** Must be within the last 10 years and cover the entire program. **3 Hepatitis B vaccine;** first 2 are given 30 days apart, and the 3<sup>rd</sup> is given 6 months later.

**If you have ever tested positive or recently test positive for TB, you must have a chest X-ray showing no active disease after July 1<sup>st</sup> in the year that you are accepted into the program.**

**Two Employment References** are needed from job history. If you do not have 2 job references, we will need 3 personal references. Personal references must be typed and signed by the person. **All references must be mailed directly to NTI.**

**ATTN: All paperwork must be turned in all at once. Except the employment references and transcripts, this must be mailed in no later than May 1st.**

## **Admission into the program is by selection**

Approximately one to two weeks after file completion deadline, each applicant will receive information about interview dates. It is important to notify NTI of any phone or address changes. A selection committee composed of faculty members and the program director conducts the interviews. Members of the committee will score the individual by considering previous academic accomplishments, Next-Generation Accuplacer test score, previous health related experience, employment references, or personal references, hospital observation and a dexterity test.

After the interview process, the top applicants will be notified. They will be required to take a dexterity test and observe in the surgery setting. The dexterity test will be administered at NTI in the Surgical Technology Lab. There will be a \$25.00 fee. The standardized dexterity test will measure your dexterity skills and eye-hand coordination. The ST Program Director will set up your clinical observation and give you the paperwork and information you need to complete this requirement. You **MUST** have a negative TB Test on file at this point.

Financial aid is available; apply at this time as this may also qualify you for future scholarships. The cost of the program is approximately \$6,157. This amount is divided up, per semester. Please see the 2019-2020 anticipated expenses on the last page.

Classes meet Monday through Friday, 8am to 4pm beginning in August. Clinical hours are approximately, 6:00am to 2:30pm. Due to the intensity of this program, full-time employment is not possible. Part-time employment is difficult, but may be manageable. If you have any mental or physical health issues that might be detrimental to your success, please take them into consideration before applying for this program.

\*There are certain prescription drugs and health conditions that will not allow students to participate in clinicals and therefore students may be exited or not selected for the Surgical Technology program. Please contact Director of Student Services Melissa Greenslade for more information.

Please contact Jessica Melara by email regarding any paperwork [jmelara@nwti.edu](mailto:jmelara@nwti.edu).

## FINANCING YOUR EDUCATION AT NORTHWEST TECHNICAL INSTITUTE

### APPLYING FOR FINANCIAL AID

Step 1: Complete the Free Application for Federal Student Aid (FAFSA). It can be completed online at [www.fafsa.gov](http://www.fafsa.gov). Paper forms are available and must be requested individually on the FAFSA website. The online FAFSA is free, fast, and secure.

Step 2: Make sure you are filling out the FAFSA for the appropriate school year. It may be submitted after October 1 for the school year beginning the next fall. Information from prior year tax returns is needed (school year 2018-2019 will require you to have 2016 tax information). It is best to submit the FAFSA as early as possible.

Step 3: **Northwest Technical Institute's Federal School Code is 014044**. NTI's school code should be listed in the school code section of the FAFSA so that the application data will be sent to NTI and eligibility for assistance can be determined.

Step 4: When applying electronically be sure to submit the application by selecting the "Submit my FAFSA now" button on the last page. It is recommended to print a copy of the Confirmation Page for your files.

Step 5: If any further information or documents are necessary, NTI will notify the student. It is important to respond to requests in a timely manner. Once an application is finalized, NTI will send an award notice indicating types and amounts of assistance for which the student is eligible.

*TIP:* FAFSA4caster is a tool that provides students with an early estimate of their expected family contribution (EFC) and eligibility for federal student aid. A link to FAFSA4caster is also available on the FAFSA on the Web homepage. Remember this is simply an estimate to help students make important decisions as they prepare to further their education.

### GRANTS

#### ***Federal Pell Grant:***

This is a federal program providing funds based upon financial need as demonstrated by the FAFSA. The grant does not need to be repaid. This award is based upon student eligibility, enrollment status, and federal appropriations. The amount can range from \$652 to \$6,095 per year (for the 2018-2019 school years). Students who have a Bachelor's degree are not eligible.

***NOTICE:*** *Students who attend Northwest Technical Institute are not eligible for the Arkansas Academic Challenge Scholarship. In addition, NTI does not participate in any federal student loan programs (e.g. Stafford or Perkins loans).*

### Alternative Loans

#### ***Arkansas Rural Endowment Fund, Inc.***

This private, uninsured student loan program provides up to a maximum of \$2,625.00 per year. This loan accrues interest while the student is in school, but repayment does not begin until six months after school attendance ceases. For information and application forms, contact the Arkansas Rural Endowment Fund, Inc. at 501-375-2358 or visit <http://www.aref.org>.

#### ***Sallie Mae Career Training Smart Option Alternative Student Loan:***

This private, uninsured student loan for professional training and trade certificate courses at a non-degree granting school. This loan accrues interest while the student is in school, but repayment does not begin until six months after school attendance ceases. For information and application forms please visit <https://www.salliemae.com/student-loans/career-training-smart-option-student-loan/?lnkid=SM-HP-loanoptions-careertraining>

#### ***Wells Fargo Private Career Student Loans:***

This private, uninsured student loan program provides up to a maximum of the students cost of attendance. This loan accrues interest while the student is in school, but repayment does not begin until six months after school attendance ceases. For information and application forms, contact Wells Fargo at 877-437-8234 or visit <https://www.wellsfargo.com/student/community-college-loans/>

## OTHER GRANTS AND SCHOLARSHIPS

**Arkansas Futures-** Covers Tuition and Fees for Associate and Certificate Programs in STEM & Regional High Demand Focus. Will be awarded to both Traditional and Non-Traditional Students, allows for part time students too. Combines with other Financial Aid to cover Tuition and Fees. However this grant is “Last Dollar” and will pay only for tuition and fees not already covered by a student’s other scholarships and grants. Must have graduated from an Arkansas High School, Home School or have a GED (or) must have a high school diploma and lived in Arkansas for the last three years.

Must be enrolled in a STEM or Regional High Demand Credential Program. Must Complete the Free Application for Federal Student Aid at <https://fafsa.ed.gov/> .Must not already hold an Associate’s Degree.

Students will Apply through the YOUuniversal System, will be awarded on a first come, first serve basis. Students apply at <http://scholarships.adhe.edu/>

**Arkansas Rehabilitation Services** - This state agency provides funding to students with documented disabilities. For further information, contact the Department of Rehabilitation Services at 479.582.1286.

**Arkansas Single Parent Scholarship Fund** - This privately funded program provides financial support to single parents who live in Arkansas Counties. Applicants must reside in Arkansas to apply. Please apply at <http://spsfbc.com>.

**Nursing Student Loan Program** - The Arkansas State Board of Nursing offers a loan program to Arkansas students who are enrolled full time in an approved nursing education program. The loans may be changed into scholarship grants by working full-time as an LPN or RN in qualified employment in the state of Arkansas. Information and application forms are available at [www.arsbn.org](http://www.arsbn.org) or by contacting the Arkansas State Board of Nursing at 501.686.2701.

### **NTI Tuition Waiver Scholarship**

Students are encouraged to apply for the NTI Tuition Waiver Scholarship online through the NTI Student Services website. The Northwest Technical Institute Tuition Waiver Scholarship is awarded to selected full time diploma seeking students who are currently attending NTI or will be attending NTI for the 2019/2020 school year. Students are selected for the NTI Tuition Waiver by the NTI Scholarship Committee and are awarded for the fall and spring semesters. Students must meet the scholarship requirements listed below and complete this application by the scholarship deadlines. This scholarship is awarded for one semester, but can be extended if the student maintains a 2.5 grade point average and passes all classes in which he or she was enrolled in.

#### Requirements:

Student must be enrolled or will be enrolled full time at NTI in one of the 9 diploma programs.

Student must have completed all admissions paperwork prior to submitting application.

Students must complete all sections of the application.

#### Applications Deadlines:

Fall 2019 (Applications must be completed by July 1, 2019)

Spring 2020 (Applications must be completed by November 1, 2019)

#### Notification of Award:

Students who are selected to receive the NTI Tuition Waiver Scholarship will be notified by letter within three weeks after the application deadline.

**SWH Nursing Scholarship Program** – This scholarship is awarded to students who are enrolled in or have been accepted to a formal nursing program (LPN). Applicants must be full time and have a current cumulative GPA of 2.75 or higher and commit, through a binding contract, to be employed at Washington Regional Medical System (WRMS) approximately 1,041 hours each subsidized semester. For further information please call Washington Regional Foundation at 479.444.9888.

**Veterans Affairs Educational Assistance Program** - Monetary benefits are available to qualifying veterans and their dependents. To start the application process, contact the NTI veterans’ advisor at 479.751.8824, ext. 240.

**Workforce Innovation and Opportunity Act** - This state program assists individuals who meet low income guidelines or who have lost employment due to a plant closing or reduction in workforce. Contact an Arkansas Workforce Center for further information: Fayetteville 479.587.7047 or Rogers 479.636.4755 or Siloam Springs 479.524.5181

NORTHWEST TECHNICAL INSTITUTE  
P.O. BOX 2000 ♦ 709 S. OLD MISSOURI ROAD  
SPRINGDALE, AR 72765-2000  
PHONE: (479) 751-8824 EXT. 116 ♦ FAX: (479) 750-7272

If your contact information  
changes during the  
admission process, please  
let us know.

## SURGICAL TECHNOLOGY APPLICATION FOR ENROLLMENT

NAME \_\_\_\_\_  
Last First M  
MAIDEN NAME: \_\_\_\_\_ E-mail Address \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_  
HOME TELEPHONE \_\_\_\_\_ D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_  
CELL PHONE \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

EMERGENCY CONTACT			
_____	_____	_____	_____
LAST NAME	FIRST NAME	M	RELATIONSHIP
_____	_____	_____	_____
ADDRESS	CITY	STATE	ZIP CODE
_____	_____	_____	_____
TELEPHONE	_____	_____	_____

HIGH SCHOOL ATTENDED \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

DID YOU GRADUATE? \_\_\_\_\_ IF SO, WHAT YEAR \_\_\_\_\_

IF HIGH SCHOOL EQUIVALENCY ACHIEVED, GIVE NAME OF TEST: \_\_\_\_\_

COLLEGE ATTENDED \_\_\_\_\_

HOURS \_\_\_\_\_ DEGREE \_\_\_\_\_

OTHER EDUCATIONAL EXPERIENCE \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**SURGICAL TECHNOLOGY APPLICATION FOR ENROLLMENT  
BACKGROUND CHECK INFORMATION**

All applicants and new students are advised and must sign acknowledgements that successful completion of the surgical technology program at Northwest Technical Institute does not guarantee employment at area healthcare facilities. If you have been convicted of any crime in the last three (3) years, you will not be eligible for employment at most area healthcare facilities. Students are advised to acknowledge all past crimes, including those that have been sealed or expunged as these may appear on their background checks that will be done prior to employment at area healthcare facilities.

**Please answer the following questions.**

- Do you have prior experience in any branch of the armed forces?  
YES  NO

**If so, please attach a copy of your DD 214.**

- Have you ever been convicted of a misdemeanor or felony or pled guilty or nolo contendere to any charge in any state or jurisdiction?  
YES  NO
- Have you ever had a license, certificate or registration disciplined (revoked, suspended, placed on probation or reprimanded) or voluntarily surrendered in any state or jurisdiction?  
YES  NO
- Do you currently engage in drug-related behavior, including the use of mood-altering drugs/substances and/or alcohol that would affect your functional abilities to perform while working as a surgical technologist?  
YES  NO
- In the last two years, have you been the subject of a chemical or alcohol dependency intervention or participated in chemical or alcohol dependency treatment/rehabilitation?  
YES  NO

**If you answered yes to any of the above questions, please give a detailed explanation to each yes answer.**

Please select one or more of the following, as applicable: \*Additional Information (used for research purposes and federal and state reporting requirements, not for admission consideration.)

American Indian or Alaskan Native    Asian    Black or African American    Native Hawaiian or Other Pacific Islander    White    Are you a veteran  Yes  No

Are you Hispanic or Latino Yes  No    Are you a citizen of the U.S.  Yes  No   If no, country or origin \_\_\_\_\_

Marital Status:  Married  Single  Divorced  Separated  Widowed

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**Your signature indicates that you have been apprised of background requirements for area healthcare facilities.**





# Northwest Technical Institute Surgical Technology Program Surgical Technologist Duties Acknowledgement Form

## Duties and Responsibilities:

A surgical technologist is a healthcare professional whose primary responsibility is to maintain the sterile field, understand the procedure being performed, anticipate the needs of the surgeon, maintain a current knowledge base, maintain quality patient care during the operative procedure and maintain constant vigilance regarding the adherence of aseptic technique by all members of the surgical team. They handle necessary instruments, supplies and equipment necessary before, during and after the surgical procedure. In addition to the technical aspects of the profession, the technician must always be aware of the patient's condition and needs.

## Special Qualifications:

In addition to minimum requirements regarding reading, language and math skills, the student must, unassisted:

1. Demonstrate the ability to comprehend and interpret written material.
2. Able to make appropriate judgment decisions.
3. Follow written and oral/verbal instructions in English.
4. Possess short- and long-term memory sufficient to perform tasks such as, but not limited to, mentally tracking surgical supplies and performing anticipation skills during the operation.
5. Synthesize information from written material and apply the knowledge to various situations.
6. Demonstrate the use of positive coping skills during patient, staff and faculty interactions.

## Psychomotor Qualifications:

1. Vision – Normal, corrected. Demonstrate sufficient ability to load a fine 10-0 suture on a needle holder with or without corrective lenses and while wearing safety glasses. Demonstrate sufficient peripheral vision to anticipate and function while in the sterile surgical environment.
2. Hearing – Normal corrected or aid able. Hear and understand muffled communication without visualization of the communicator's mouth/lips within 20 feet. Hear activation/warning signals on equipment.
3. Smell – Able to detect odors sufficient to maintain environmental safety and patient needs.
4. Touch – Normal tactile sensitivity. Manipulate instruments, supplies and equipment with speed, dexterity and good eye-hand coordination.

## Physical Qualifications:

1. Able to stand, bend, stoop and/or sit for long periods of time in one location with minimum or no breaks.
2. Able to lift from 50-75lbs, carry up to 75lbs., push up to 300lbs. and pull 100-200lbs., 34-67% of the time.
3. Able to refrain from nourishment or restroom breaks for periods of up to 6 hours.
4. Ambulate/move around without assistive devices.
5. Able to assist with and/or lift, move, position and manipulate an unconscious patient.

## Communication Qualifications:

1. The ability to interact and verbally communicate with others.
2. Ability to communicate and understand fluent English, both verbally and in writing.
3. Demonstrate positive interpersonal skills during patient, staff and faculty interactions.
4. Demonstrate calm and effective responses, especially in emergency situations.

I have read the above and feel that it is within my ability to carry out the duties, responsibilities and qualifications of a surgical technologist. I **do** \_\_\_\_\_ **do not** \_\_\_\_\_ (check one) have any problems meeting the above technical requirements. In the event that I am selected for the ST program, I understand that it will be necessary for me to demonstrate the technical requirements during my clinical training. I understand that any misrepresentation or falsification of information is cause for denial of admission. Upon discovery of falsification of stated ability, a student that has been admitted to the program may not be able to continue.

---

Signature of Applicant

---

Date

## SURGICAL TECHNOLOGY APPLICATION FOR ENROLLMENT

**EMPLOYMENT HISTORY:** List most recent first. If you do not have an employment history, please indicate in the space provided below.

EMPLOYER	MAILING ADDRESS	JOB	DATES FROM                      TO

**PERSONAL REFERENCES:** Other than relatives

NAME/RELATIONSHIP	PHONE

**Employment Reference Letters:** You will need two (2). Complete the top portion of each form and sign it. Leave the signed forms with your current or previous employers. They are to be completed by and mailed by the employer directly to NTI. ***Employment reference letters submitted to NTI directly from the applicant will not be accepted.*** Three personal references should be submitted if you do not have professional references.

In keeping with the guidelines on Title VI, Sections 602, Civil Rights Act of 1964; Title IX, Section 901, Education Amendments of 1972; and Section 504 of the Rehabilitation Act of 1973, this school assures that no person in the United States shall, on the basis of race, color, national origin, sex, or handicap be excluded from the participation in, be denied benefit of, or be subjected to discrimination under any person or activity administered by the school.

**I hereby affirm that all information supplied for this application is complete and accurate. It is my understanding that I shall not be considered for admission until I have submitted all credentials specified. I understand that withholding information requested or giving false information may make me ineligible for admission and enrollment. I also understand that upon discovery of any falsified information on this application I will be subject to immediate dismissal from the program.**

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

NORTHWEST TECHNICAL INSTITUTE  
 SURGICAL TECHNOLOGY  
 P.O. BOX 2000  
 SPRINGDALE, AR 72765-2000  
 Phone: (479) 751-8824 Ext. 116

**EMPLOYMENT REFERENCE LETTER**

**Employment reference letters submitted to NTI directly from the applicant will not be accepted.**

Employment Reference Letters should be completed and mailed by the employer and sent directly to NTI no later than November 1st. *Employment reference letters submitted to NTI directly **from the applicant will not be accepted!***

**PART I – TO BE COMPLETED BY PN APPLICANT. ONCE COMPLETED, SEND TO EMPLOYER.**

Employer Name and Address, \_\_\_\_\_

& Phone Number: \_\_\_\_\_  
 \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

I authorize the above named employer to release to Northwest Technical Institute any information in my personnel file for the purpose of entry into the Surgical Technology Program.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

**PART II-FOR EMPLOYER. PLEASE COMPLETE AND MAIL TO NTI.**

The above person has applied for admission to our Surgical Technology Program and has given your name as a reference. Will you kindly give us your candid opinion of this applicant's suitability for the duties of a surgical technologist? All information will be kept confidential. Thank you for your assistance.

Employment Dates: \_\_\_\_\_ Would you rehire this applicant? \_\_\_\_\_

Job Responsibilities: \_\_\_\_\_  
 \_\_\_\_\_

Evaluate the applicant on the following 1 – 5 scale:

	1=Unacceptable		2=Poor		3=Fair		4=Good		5=Excellent		
Ability to get along with others	1	2	3	4	5	Initiative	1	2	3	4	5
Reaction under stress	1	2	3	4	5	Responsibility	1	2	3	4	5
Character	1	2	3	4	5	Dependability	1	2	3	4	5
Honesty	1	2	3	4	5	Efficiency	1	2	3	4	5

**Please give us any further information that you might have about this individual that will help us to decide upon his/her suitability for the surgical technology program.** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature/Title \_\_\_\_\_

Date \_\_\_\_\_

NORTHWEST TECHNICAL INSTITUTE  
 SURGICAL TECHNOLOGY  
 P.O. BOX 2000  
 SPRINGDALE, AR 72765-2000  
 Phone: (479) 751-8824 Ext. 116

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\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature/Title \_\_\_\_\_

Date \_\_\_\_\_