



**Department of Respiratory Care & Health Information
College of Health Sciences
3500 John A. Merritt Boulevard – Campus Box 9527
Nashville, Tennessee 37209-1561
(615) 963-7431 Office**

Dear Prospective Student:

We are pleased that you are interested in the Bachelor of Science with a major in Cardiorespiratory Care Science Degree Program at Tennessee State University. Respiratory Care is an excellent, much needed healthcare profession with a variety of job opportunities.

If you are not currently a student at TSU, please complete the university application at <https://www.tnstate.edu/admissions/apply1.aspx>. After acceptance to TSU, you may complete the enclosed CRCS Program application and send it to the Cardio-Respiratory Care Science Program, Tennessee State University, Campus Box 9527, Nashville, TN 37209 (or scan and email it to crc@tnstate.edu) In addition, please ask two of your faculty members to complete the enclosed recommendation forms and send the form directly to the CRCS Program address. The faculty member may include a letter of recommendation with the form.

The Cardio-Respiratory Care program is fully accredited by the Commission on Accreditation for Respiratory Care (CoARC). Successful graduates of the program receive a B.S. degree with a major in Cardiorespiratory Care Science and are eligible to take the Registered Respiratory Therapist (RRT) credentialing examinations from the National Board for Respiratory Care.

Admission is selective and qualified applicants will be contacted for an interview. The deadline is June 30 for selection for the fall semester. Please review the CRCS application checklist for instructions. If you have any questions or concerns, please contact us at (615) 963-7431 or e-mail: crc@tnstate.edu.

Sincerely,

Christine A. Hamilton, DHSc, RRT
Chair, Department of Respiratory Care & Health Information
Program Director, Cardiorespiratory Care Science Program

APPLICATION FOR ADMISSION

CARDIO RESPIRATORY CARE SCIENCES PROGRAM

Department of Respiratory Care and Health Information
College of Health Sciences
Tennessee State University

Application for Admission
Cardio Respiratory Care Sciences Program
Department of Respiratory Care and Health Information
College of Health Science
Tennessee State University

INSTRUCTIONS: Please submit the following application materials for consideration for admission to the Cardio Respiratory Care Sciences Program.

- **Application for admission to the Cardio Respiratory Care Sciences Program (application should be received January 1st through June 30th (for the Fall Semester) of the same year.**

NOTE: Admission to Tennessee State University is separate application; this process must be completed before being considered for admission to the Cardio Respiratory Care Sciences Program. The Office of Admission and Records will notify you of your acceptance into the University.

- **One official copy of transcripts for all post-secondary education institutions attended.**

NOTE: You will need to request a total of two official copies of your transcripts from each institution attended – one copy must be submitted to the Office of Admissions/Records and one copy must be submitted to the Cardio Respiratory Sciences Care Program.

- **Program of Study Form – Fill in Grade, Semester, Year and Institution where course was taken.**
- **Two (2) recommendation from completed by 2 individuals (non-family members, such as faculty or supervisor) who know the applicant's character and suitability for working in a healthcare profession (forms must be sent directly by evaluator; recommendations sent by the applicant will not be accepted).**

Call the Cardio Respiratory Care Department at 615-963-7431 for more information about the program, or go to www.tnstate.edu/cardio. You may contact the following departments for specific information regarding:

TSU Admissions	Office of Admissions	615-963-5101
Scholarships, Grants, & Loans	Office of Financial Aid	615-963-5701

RESPIRATORY CARE LICENSE AND /OR CREDENTIALS HELD:

NAME OF ORGANIZATION	CREDENTIAL EARNED	YEAR EARNED

Write and Attach a Personal Essay

Provide an autobiographical sketch and include a discussion of your interests; relate what led you to choose a career as a Respiratory Care Practitioner; and state your future intentions once you have completed the program. **Please type your response and attach to application.**

APPLICANT'S SIGNATURE

DATE

For Office Use Only:

Approved by:	Reason:
Rejected by:	Date of Decision:

FACULTY EVALUATION OF STUDENT

OVERALL ACADEMIC STRENGTH	1 Poor	2	3 Average	4	5 Superior	0 Unknown
GOOD ATTENDANCE	1 Poor	2	3 Average	4	5 Superior	0 Unknown
COMMUNICATIONS SKILLS	1 Poor	2	3 Average	4	5 Superior	0 Unknown

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FACULTY EVALUATION OF STUDENT

Continued

SELF-ESTEEM	1 Poor	2	3 Average	4	5 Superior	0 Unknown
RELIABILITY & HONESTY	1 Poor	2	3 Average	4	5 Superior	0 Unknown
PERSEVERANCE	1 Poor	2	3 Average	4	5 Superior	0 Unknown
EMOTIONAL INTELLIGENCE	1 Poor	2	3 Average	4	5 Superior	0 Unknown

What is your attitude toward having this applicant in a position of responsibility?

☐ Strongly Recommended

☐ Recommended

☐ Not recommended

Your additional observations are welcome on a separate letter. We especially appreciate comments regarding the applicant's ability and motivation for the study of respiratory therapy, including decision-making and caring for patients.

Signature and Title

Date