

**SCHOOL OF NUCLEAR MEDICINE TECHNOLOGY APPLICANT PREREQUISITE COURSE & DEGREE CHECKLIST**

**Applicant Name:**       **Date:**

**Prerequisite Course Checklist**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  **Prerequisite Courses**(All courses must be completed or in-progress prior to admission) |  Course Title | CourseNumber |  YearCompleted | Credit Hours | Grade |  College where course taken |
|  Human Anatomy & Physiology Iwith a lab\* |       |       |       |       |       |       |
|  Human Anatomy and Physiology IIwith a lab\* |       |       |       |       |       |       |
| College Algebra or higher Math\* |       |       |       |       |       |       |
| Statistics\* |       |       |       |       |       |       |
| Written Communication |       |       |       |       |       |       |
| General Physics I\* |       |       |       |       |       |       |
| General Physics II\* |       |       |       |       |       |       |
| General Chemistry I with a lab\* |       |       |       |       |       |       |
| General Chemistry II with a lab\* |       |       |       |       |       |       |

A grade of "C" or higher is required in each course.

\*Course work must be completed within the last 7 years.

**Degree Checklist**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  Completion of Bachelor’s Degree | Name of Institution      |  Date Completed      |  Degree earned      | Final GPA\*\*       |

 ***OR***

|  |  |  |
| --- | --- | --- |
| Enrolled in \*\*\*NMT Academic Affiliate 3+1 Bachelor’s Degree program | Name of Institution      | Current GPA\*\*      |

\*\*A Bachelor’s degree of GPA of 2.5 or higher is required.

\*\*\*NMT Academic Affiliate institutions for 3+1 Bachelor’s Degree program are: Benedictine University, Elmhurst College, Lewis University, North Central College, Roosevelt University, University of Saint Francis, and University of Wisconsin-La Crosse.

**OFFICIAL TRANSCRIPTS FROM ALL COLLEGES AND UNIVERSITIES ATTENDED ARE REQUIRED BY FEBRUARY 1.**

**PLEASE REQUEST OFFICIAL E-TRANSCRIPTS SENT TO:** **SCHOOLS@NM.ORG**

**OR REQUEST OFFICIAL TRANSCRIPTS MAILED TO:**

**NM CLINICAL SCHOOLS, 541 N FAIRBANKS COURT, SUITE 950, CHICAGO, IL 60611**

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