Selective Admission Requirements

Respiratory Therapy 2019

Deadline for all requirements

*NEW* February 1, 2019

The requirements for the Respiratory Therapy program are different than the requirements for other Selective Admissions programs. Please read the entire packet carefully to assure that all requirements are complete before the deadline date.
To be considered for admission to the RESPIRATORY THERAPY program, applicants are required to complete ALL requirements. ALL appropriate documentation must be on file at the Center Campus Records and Registration Office by the February 1, 2019 deadline for the program that begins Fall 2019. Macomb’s Selective Admission programs have assessment and admission requirements that are considerably different than other Macomb programs.

It is encouraged that Selective Admission applicants attend a Selective Admission Seminar prior to taking the HESI exam and submitting an application to the program. This seminar will review the application process, program prerequisites and requirements. Refer to the link below to access the most current dates and times for the Selective Admission Program Seminars: www.macomb.edu/SAseminar-others. Contact the Counseling and Academic Advising Office at 586.445.7999 to reserve a seat for a seminar.

APPLICATION REQUIREMENTS

1. Submit a Respiratory Therapy application (see page 8). If you are not a current or former student at Macomb Community College you must also apply for admission and complete all admission steps.

2. Arrange for OFFICIAL COLLEGE TRANSCRIPT(S), INCLUDING COLLEGE BOARD (CLEP & AP) AND INTERNATIONAL BACCALAUREATE, to be sent directly from EACH institution attended to the Center Campus Records & Registration Office. Macomb Community College transcripts are not required to be sent. In order to meet the deadline of February 1, 2019, it is recommended that applicants request to have their current name, date of birth and Macomb ID number be posted on their transcript. Transcripts that are issued to the student will not be accepted.

Send the Respiratory Therapy application and transcripts to:
Macomb Community College
Center Campus Records & Registration Office G-110
44575 Garfield Rd.
Clinton Twp., MI 48038-1139

Applications can be faxed to: 586.226.4787 or Emailed to: selectiveadmissions@macomb.edu
Official transcripts can be emailed to: transcripts@macomb.edu

3. The following courses must be completed by the end of the Fall term prior to the application deadline of February 1, 2019. Candidates must successfully complete the following courses, or their equivalents at another accredited institution, as defined by Macomb Community College with a punitive grade of C (2.0 GPA) or better prior to the deadline date of February 1, 2019. A punitive grade is one that affects the grade point average. A grade of C- is not acceptable. A GPA will be calculated on the prerequisite courses.

Biol-2400 – General Microbiology OR Biol-2730 – Pathogenic Microbiology
Biol-2710 – Human Physiological Anatomy

4. HESI ADMISSION ASSESSMENT EXAM New for 2019, applicants must complete the HESI Admission Assessment Exam. Early registration is recommended to secure your seat in a preferred session. The HESI Admission Assessment Exam may only be taken once per Selective Admissions cycle, and must be completed at Macomb Community College. Scores for this exam administered at other locations or institutions will not be accepted. The HESI Admission Assessment Exam scores remain active for 5 selective admission cycles, or until departmental requirements change, whichever comes first. You have the option to retake the test in a future selective admissions cycle in an effort to improve your score. This exam will assess the prospective student in the following academic subjects: Anatomy and Physiology, Math, Reading Comprehension, Vocabulary and General Knowledge, and Grammar. A cumulative, or overall exam average score, is provided for these academic tests. This is also referred to as the composite score. The best active composite score prior to the deadline date will be used for ranking purposes. At the direction of the Respiratory Therapy Department Administration, the Learning Style and Personality Profile are included in the assessment package for the purpose of offering students insights about their study habits and learning preferences as they relate to academic achievement. These personal assessments will not be used as part of the selection process. Students who have a documented disability should contact the Macomb Community College Special Services Department at 586.286.2237 (Center Campus) or 586.445.7420 (South Campus) to make advance arrangements for appropriate exam accommodations. This should be done at the time of application.
HESI Admission Assessment registration. The HESI ADMISSION SCHEDULE AND FEES can be found on pages 6 and 7.

RANKING

All applicants whose documentation is complete and on file by the deadline date are ranked according to the following criteria. Available seats are filled in the same rank order. All prerequisite courses must be completed by the deadline date with a grade of C (2.0 GPA) or better to be ranked.

- The GRADE POINT AVERAGE (GPA) of the two prerequisite courses (BIOL-2730 or BIOL-2400 and BIOL-2710) are computed and weighted at 45% each.
- The composite score of the HESI Admissions Assessment Exam is weighted at 10%. The composite score is the average score of the cumulative results of all five components of the HESI Admission Assessment Exam.

MANDATORY ORIENTATION FOR SUCCESSFULLY RANKED CANDIDATES: A mandatory orientation will be held sometime during the month of May 2019. You must attend this orientation to be considered for the program. No other orientation will be offered; if you do not attend it will be understood that you are not interested in entering the program and your name will be removed as a candidate. If you are selected as an alternate candidate, you must also attend the mandatory orientation; no additional orientations will be held.

PROCESSING

Applicants will be ranked in the Respiratory Therapy program ONLY if they have applied and completed all the requirements to the program BEFORE THE FEBRUARY 1, 2019 DEADLINE DATE. The processing of all applicants (including filing, computations, and ranking) takes approximately three months following the deadline date. At that time, all applicants are notified by mail of the admission decision, no later than May 1, 2019. Applicants who are not admitted may apply for the following year but will not be given preference by reason of having applied before.

Only those applicants selected for admission are required to submit a $100.00 non-refundable fee to confirm acceptance into the program. Admission is conditional upon proof of health documentation required at the appropriate time by the Department of Health and Human Services, and upon attendance at the mandatory program orientation.

Note: Some or all of the admission criteria listed above may constitute change from the past policy. Macomb retains the prerogative of changing admission procedures and requirements. Furthermore, students and prospective students bear the responsibility for keeping informed of college procedures and requirements.

CRIMINAL BACKGROUND CHECKS

Macomb Community College’s clinical partners may not accept students who have been convicted of certain crimes into a clinical learning environment. Therefore, students must undergo a Criminal Background Check, at their own expense, through CastleBranch.com in order to be considered for admission to the Respiratory Therapy program.

NOTE: Do not order your criminal background check at this time; students will get more information regarding the Criminal Background Check at the mandatory orientation.
Students are required to disclose any and all federal, state (including states other than Michigan) or local crimes for which the student has been convicted to the Associate Dean for the program the student wishes to enter. Convictions occurring before admission to the program must be reported to the Associate Dean prior to acceptance into the program. Convictions occurring after acceptance into the program must be reported to the Associate Dean immediately.

A student is not eligible for admission to the Respiratory Therapy program for a period of years following completion of all terms and conditions of sentencing for conviction of certain crimes. The precise number of years a student must wait following sentencing depends upon the nature of the offense. Generally speaking, the more serious the offense, the longer the student must wait before eligibility is restored.

Macomb Community College has adopted the waiting periods specified in MCL 330.1134a.

If a student has been convicted of a crime, the student should consult the Respiratory Therapy Program Waiting Periods (table below) BEFORE seeking admission to the Respiratory Therapy program to determine the specific waiting period, if any, applicable to that conviction. Failure to disclose conviction of a crime listed in MCL 330.1134a is grounds for immediate dismissal from the Respiratory Therapy program. If a student is convicted of a crime listed in MCL 330.1134a while in the Respiratory Therapy program, the student will be immediately dismissed from the program.

<table>
<thead>
<tr>
<th>Waiting Period</th>
<th>Type of Crime</th>
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</table>
| **Lifetime Ban** |Feloniess related to neglect or abuse of a patient in connection with the delivery of health care  
Feloniess relating to health care fraud  
Feloniess related to the unlawful manufacture, distribution, prescription, or dispensing of a controlled substance if the conviction was entered on or after August 21, 1996 
Adulteration of drugs or medicine injurious to health  
Selling, distributing, delivering or furnishing product containing ephedrine or pseudoephedrine |
| **15 years following completion of all terms and conditions of sentencing** | A felony involving intent to cause death or serious impairment of a body function  
A felony resulting in death or serious impairment of a body function  
A felony involving the use of force or violence  
A felony involving the threat of the use of force or violence  
A felony involving cruelty or torture  
A felony involving intentional or reckless harm to a vulnerable adult by a caregiver or person with authority over a vulnerable adult  
A felony involving criminal sexual conduct  
A felony involving abuse or neglect  
A felony involving the use of a firearm or dangerous weapon |
<p>| <strong>10 years following completion of all terms and conditions of sentencing</strong> | Any other felony, or attempt or conspiracy to commit a felony |</p>
<table>
<thead>
<tr>
<th>Duration</th>
<th>Misdemeanors</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 years</td>
<td>A misdemeanor involving the use of a firearm or dangerous weapon with the intent to injure</td>
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<tr>
<td></td>
<td>A misdemeanor involving the use of a firearm or dangerous weapon that results in a personal injury</td>
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<tr>
<td></td>
<td>A misdemeanor involving the use of force or violence or the threat of the use of force or violence</td>
</tr>
<tr>
<td></td>
<td>A misdemeanor involving intentional or reckless harm to a vulnerable adult by a caregiver or person with authority over a vulnerable adult</td>
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<tr>
<td></td>
<td>A misdemeanor involving criminal sexual conduct</td>
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<tr>
<td></td>
<td>A misdemeanor involving cruelty or torture</td>
</tr>
<tr>
<td></td>
<td>A misdemeanor involving abuse or neglect</td>
</tr>
<tr>
<td>5 years</td>
<td>A misdemeanor involving cruelty if committed by someone who is less than 16 years of age</td>
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<tr>
<td></td>
<td>A misdemeanor involving home invasion</td>
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<td></td>
<td>A misdemeanor involving embezzlement</td>
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<td></td>
<td>A misdemeanor involving negligent homicide</td>
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<td></td>
<td>A misdemeanor involving larceny</td>
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<td>A misdemeanor of retail fraud in the second degree</td>
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<tr>
<td></td>
<td>Any other misdemeanor involving assault, fraud, theft, or the possession or delivery of a controlled substance</td>
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<tr>
<td>3 years</td>
<td>A misdemeanor for assault if there was no use of a firearm or dangerous weapon and no intent to commit murder or inflict great bodily injury</td>
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<tr>
<td></td>
<td>A misdemeanor of retail fraud in the third degree</td>
</tr>
<tr>
<td></td>
<td>A misdemeanor involving the creation, delivery or possession with intent to manufacture a controlled substance</td>
</tr>
<tr>
<td>1 year</td>
<td>A misdemeanor involving the creation, delivery or possession with intent to manufacture a controlled substance if the individual was under 18 at the time of conviction</td>
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<tr>
<td></td>
<td>A misdemeanor for larceny or retail fraud in the second or third degree if the individual, at the time of conviction, is under the age of 16</td>
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</tbody>
</table>
Completion of the HESI Admission Assessment™ (A²) is one of the requirements for consideration for admission to Macomb Community College’s Respiratory Therapy Program. This exam may only be taken once per Selective Admission cycle. Test results from other institutions are not accepted at MCC. All HESI tests are administered at Macomb’s Center Campus, located on Garfield south of Hall Road. Registration for the current selective admission cycle begins on Wednesday, July 25, 2018. To register for the exam, please adhere to the following procedures:

REGISTRATION & ADMISSION INFORMATION

Complete the HESI Admission Assessment™ (A²) Registration form provided on the next page. Select your preferred test date from the list of dates below, and indicate your preference on the registration form. Seats for each session are limited; please plan accordingly. If the session you request is full, you will have an opportunity to select another test date from available sessions. You must be present at the exam time assigned to you or you waive your opportunity to take the test. There is no rescheduling and fees are non-refundable and non-transferable.

STEP 1: Submit payment for the HESI Admission Assessment to the Cashier’s Office in G Building at either campus.

STEP 2: Proceed to the Learning Center at Center Campus in C Building, Room 116 with your paid receipt and registration form, provided on the next page. A confirmation letter will be mailed to the address provided on the registration form approximately one (1) week prior to your exam. It is the applicant’s responsibility to provide the Learning Center with current address information. Arriving via US Mail, this letter will confirm the specific date, time, and location where you are to report for your test. If you do not receive a test confirmation letter five (5) days prior to your requested test date, call Ann Chirco at 586-286-2201.

UPCOMING TEST DATES AND TIMES

<table>
<thead>
<tr>
<th>2018 Test Dates</th>
<th>Test Start Times</th>
<th>2019 Test Dates</th>
<th>Test Start Times</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thursday, November 15, 2018</td>
<td>4:15pm</td>
<td>Wednesday, January 2, 2019</td>
<td>8:30am</td>
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<tr>
<td>Wednesday, November 21, 2018</td>
<td>8:30am</td>
<td>Thursday, January 3, 2019</td>
<td>8:30am</td>
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<tr>
<td>Thursday, December 6, 2018</td>
<td>4:15pm</td>
<td>Friday, January 4, 2019</td>
<td>8:30am</td>
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<tr>
<td>Monday, December 17, 2018</td>
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<tr>
<td>Tuesday, December 18, 2018</td>
<td>8:30am</td>
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<tr>
<td>Wednesday, December 19, 2018</td>
<td>8:30am</td>
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NOTE: THERE ARE TWO STEPS TO THE REGISTRATION PROCESS.
YOUR SEAT IS NOT SECURED UNTIL YOU HAVE COMPLETED BOTH STEPS.
THERE IS NO RESCHEDULING NOR ANY REFUNDS ALLOWED. FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

IMPORTANT PREPARATION REMINDERS

1) You must bring the following with you on the date of your test:
   - Government issued photo identification (driver's license, passport, etc.)
   - Confirmation letter indicating your testing appointment
   - Registration card and EVOLVE account log-in information

2) The maximum time allowed to complete the examination and personal profiles is four (4) hours.

3) Dictionaries, notes, earbuds, calculators, cell phones, wearable technology, or any other electronic devices are not permitted. Your scores will be voided for using these or other inappropriate items during the exam.

4) Students who have a documented disability should contact Macomb’s Special Services Department 586.286.2237 (Center Campus) or 586.445.7420 (South Campus) to arrange for appropriate accommodations at the time of registration. These accommodations must be confirmed by the student at least two (2) weeks prior to the scheduled exam date.

5) For test preparation – the HESI Corporation has published Admission Assessment Exam Review (4th edition), which is on reserve at the Center (C-116) and South Campus (J-325) Learning Centers. Personal copies may be purchased at the bookstore on either campus. The Bookstore is located in P Building at Center Campus and K Building at South Campus. ISBN: 9780323353786. To learn about additional resources that may be helpful in preparing for the HESI Admission Assessment™ (A²) or to order a copy of the book online, visit my.macomb.edu [SEARCH: HESI Resources].
HESI ADMISSION ASSESSMENT™ (A²) REGISTRATION

CONTACT INFORMATION

Please Print Clearly

Last Name ____________________________  First Name ____________________________  Macomb Student ID # ____________

Indicate Preferred Test Date ____________________________  Contact Phone # ____________________________

Address

City ____________________________  State ____________________________  Zip Code ____________________________

Email Address ____________________________

REGISTRATION & ADMISSION INFORMATION

STEP 2 of HESI REGISTRATION BEGINS JULY 25, 2018 at 9:00 AM

REGISTRATION CLOSES
TWO WEEKS PRIOR TO THE EXAM DATE OR
WHEN ALL SEATS FOR THAT SESSION HAVE BEEN ASSIGNED, WHICHERVER COMES FIRST.
EARLY REGISTRATION IS RECOMMENDED AS SEATS FOR SOME SESSIONS FILL QUICKLY AND EARLY.
THE JANUARY TEST DATES FILL AND CLOSE MONTHS IN ADVANCE.

Registration is final only after completing both Step 1 & Step 2

☐ STEP 1:  To take the HESI Admission Assessment™ (A²), Macomb College’s Respiratory Therapy entrance examination, an $80 processing and test fee is required (fee subject to change if exam costs increase). Registrants or their designee must pay in person at the Cashier’s Office (Bldg. G at either South or Center Campus). Payment may be made by cash, check, money order, Discover, MasterCard or Visa. Payment may be made prior to July 25, 2018 but registration is not final until both step 1 and step 2 are completed.

☐ STEP 2:  After obtaining a paid receipt, registrants must proceed in person to the Center Campus Learning Center, at the location indicated below, to submit proof of payment and this registration form.

Macomb Community College
Center Campus Learning Center ■ Bldg. C-116
44575 Garfield Rd. ■ Clinton Township, MI 48038-1139

PLEASE COMPLETE BOTH STEPS PROMPTLY TO SECURE YOUR TEST DATE.
THERE IS NO RESCHEDULING NOR ANY REFUNDS ALLOWED.
FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

For Office Use Only: On The Spot: AR CREN NEE
2019 Selective Admissions
Respiratory Therapy Application

*NEW* Submission Deadline: February 1, 2019

Student I.D. Number: __________________________ OR Social Security Number: __________________________

1. __________________________

2. __________________________

3. __________________________

4. __________________________

5. __________________________

6. __________________________

7. __________________________

8. __________________________

9. __________________________

10. A. High School Graduation Date: __________________________

11. List below all colleges, universities, and any other source of transfer credit (i.e. College Board or International Baccalaureate) attended other than Macomb Community College. List most recent first.

   Failure to list all colleges/universities previously attended will result in immediate disqualification.

<table>
<thead>
<tr>
<th>Name</th>
<th>City &amp; State</th>
<th>Dates of Attendance</th>
<th>FOR OFFICE USE ONLY</th>
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I certify that all my responses are true to the best of my knowledge. I understand the policies and procedures published in the College Catalog and on the website (www.macomb.edu) are the official source of information for Macomb Community College.

Signature __________________________

Today’s Date __________________________

*FOR OFFICE USE ONLY*

<table>
<thead>
<tr>
<th>Date</th>
<th>Taken at</th>
<th>Term</th>
<th>Grade</th>
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<tbody>
<tr>
<td>HESI COMP2:</td>
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<tr>
<td>Incomplete Letter Sent:</td>
<td>BIOL-2710</td>
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<tr>
<td>Complete Letter Sent:</td>
<td>BIOL-2400 or BIOL-2730</td>
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<td>PERC Restrictions:</td>
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Email Official Transcripts to: transcripts@macomb.edu.