



BUTLER COUNTY COMMUNITY COLLEGE

PHYSICAL THERAPIST ASSISTANT PROGRAM COVER PAGE

AUGUST 2017

Thank you for applying to the BC3 Physical Therapist Assistant (PTA) Program for the Fall 2017 (August) class! To be considered for admission into the PTA Program, a complete application packet must be submitted by Friday, May 12th, 2017 for **priority** consideration. Applications submitted after this date will be evaluated on a space available basis.

A complete application packet will consist of:

1. BC3 Application for Admission (even if previously completed) and PTA Application
2. \$25.00 one-time, non-refundable application fee (Returning students **do not** pay the application fee.)
3. Personal Recommendation Form from PT/PTA included in this packet.
4. Personal Recommendation Form from Employer/Teacher included in this packet
5. Official High School Transcript (required) & GED/HSE test scores (if applicable)
6. Official College Transcripts from schools attended other than BC3 (if applicable)

If you have additional questions, feel free to call the Admissions Office at 724-287-8711 ext. 8346 or email admissions@bc3.edu.

Only complete application packets will be considered for admission. It is the student's responsibility to submit all required documentation and confirm receipt. Application packets may be dropped off in person to the Admissions Office during business hours or mailed to:

Butler County Community College
Attn: Admissions Office
P. O. Box 1203
Butler, PA 16003-1203

Application for Admission

BC3 USE ONLY

ID _____

TEST SESSION _____

Please complete the following information as accurately as possible. This information is required for admission.

SOCIAL SECURITY NUMBER : _____

Your Social Security number is required for financial aid eligibility, scholarships, veterans benefits, and IRS tax reporting purposes. To protect your privacy, it will not be used as your student identification number. You will be given a BC3 student ID number for identification.

NAME : _____
Last First Middle

PERMANENT LEGAL ADDRESS : _____

CITY : _____ STATE : _____ ZIP CODE : _____ COUNTY OF RESIDENCE : _____

I acknowledge that I have lived in the state of Pennsylvania for the past 12 months

HOME PHONE NUMBER : () _____ CELL PHONE NUMBER : () _____

GENDER : _____ DATE OF BIRTH : _____ / _____ / _____

In order to gather information required by state and federal agencies, we are requesting that you provide the following information. Your answer to these questions will in no way affect your admission status. Further, this information will be held confidential and used only for statistical purposes.

DO YOU CONSIDER YOURSELF TO BE HISPANIC / LATINO? YES / NO
Circle One

IN ADDITION, SELECT ONE OR MORE OF THE FOLLOWING RACIAL CATEGORIES TO DESCRIBE YOURSELF:

- AMERICAN INDIAN / ALASKAN NATIVE
- ASIAN
- BLACK / AFRICAN AMERICAN
- NATIVE AMERICAN / OTHER PACIFIC ISLANDER
- WHITE

PERSONAL E-MAIL ADDRESS _____

Be sure to activate your MyBC3 e-mail account. Once accepted as a BC3 student, the College will communicate with you through your student e-mail address.

APPLICATION YEAR : 2017 TERM : 2-Fall / 3-Spring / 4-Summer
Circle One

PROGRAM CODE FOR WHICH YOU ARE APPLYING: 215 (See codes on page 4) PROGRAM OF STUDY: Physical Therapist Assistant

- IF YOU SELECTED GENERAL STUDIES (100A), DESIGNATE YOUR SPECIFIC AREA OF INTEREST:
- GENERAL
 - UNDECIDED
 - NATURAL SCIENCE AND TECHNOLOGY
 - PRE-MASSAGE THERAPY
 - PRE-MEDICAL ASSISTANT
 - PRE-NURSING
 - PRE-PHYSICAL THERAPIST ASSISTANT

YOUR COLLEGE EXPERIENCE:

- NEW, NEVER ATTENDED COLLEGE BEFORE
- TRANSFER FROM ANOTHER COLLEGE TO BC3
- GUEST STUDENT VISITING FROM ANOTHER COLLEGE
- PREVIOUSLY APPLIED TO BC3
- I HAVE A COLLEGE LEVEL MATH CLASS PASSED WITH A GRADE OF "C" OR HIGHER*
- I HAVE A COLLEGE LEVEL WRITING CLASS PASSED WITH A GRADE OF "C" OR HIGHER*

* Must submit an official transcript

BC3 EDUCATIONAL GOAL: (Select only one)

- COMPLETE ASSOCIATE DEGREE WITH THE INTENT TO TRANSFER
- COMPLETE ASSOCIATE DEGREE WITH THE INTENT TO SEEK EMPLOYMENT
- COMPLETE WORKPLACE CERTIFICATE
- ATTEND BC3 AS A GUEST STUDENT WHILE ENROLLED CONCURRENTLY AT ANOTHER INSTITUTION
- TAKE COURSES AT BC3 WITH THE INTENT TO TRANSFER TO A 4-YEAR INSTITUTION
- UNCERTAIN

I INTEND TO TAKE THE MAJORITY OF MY CLASSES AT:

- BC3 MAIN CAMPUS (BUTLER)
- BC3 @ ARMSTRONG (FORD CITY)
- BC3 @ BROCKWAY (BROCKWAY)
- BC3 @ CRANBERRY (CRANBERRY TOWNSHIP)
- BC3 @ LAWRENCE CROSSING (NEW CASTLE)
- BC3 @ LINDENPOINTE (HERMITAGE)
- ONLINE

ARE YOU A U.S. CITIZEN? _____ IF NO, PLEASE COMPLETE : I AM A PERMANENT RESIDENT
 PERMANENT RESIDENT CARD #: _____
 OTHER TYPE OF VISA: _____
 COUNTRY OF CITIZENSHIP: _____
 *Must produce documents for photocopy

ARE YOU OR HAVE YOU EVER BEEN A SERVICE MEMBER OF THE UNITED STATES MILITARY? _____ YES / NO
 Circle One

INTENDED STUDENT TYPE: _____ Full-Time / Part-Time
 Circle One

GRADUATED HIGH SCHOOL: _____ YES / NO HIGH SCHOOL GRADUATION YEAR: _____ HIGH SCHOOL EQUIVALENCY DIPLOMA: _____ YES / NO
 Circle One Circle One

NAME OF HIGH SCHOOL: _____ City: _____ State: _____

LIST ALL COLLEGES, BUSINESS OR TECHNICAL SCHOOLS ATTENDED:

Name of School	
1.	3.
2.	4.

WHY DID YOU CHOOSE BC3? _____ Pick One CLOSE TO HOME UNDECIDED MAJOR AFFORDABILITY
 CONVENIENT SCHEDULE PROGRAMMING DAY CARE

DO YOU HAVE AN INTEREST AS AN ACTIVE PARTICIPANT IN THE INTERCOLLEGIATE ATHLETIC PROGRAM? _____ YES / NO
 Circle One

ARE YOU INTERESTED IN LEARNING MORE ABOUT BC3'S SCHOLARS PROGRAM? _____ YES / NO
 Circle One

I understand that BC3 reserves the right to use photographs and video taken in the classroom and/or on campus for educational and promotional purposes of BC3 and its programs.

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.
 YOUR SIGNATURE : _____ DATE : _____ / _____ / _____

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, sex, sexual orientation, gender identity or expression, genetic information, veteran status, marital status, family status, or other classification protected by applicable law.

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, sex, sexual orientation, or gender identity or expression, genetic information, veteran status, marital status, family status, or other classification protected by applicable law; (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, sex, sexual orientation, or gender identity or expression, genetic information, veteran status, marital status, family status, or other classification protected by applicable law; 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, sex, sexual orientation, or gender identity or expression, genetic information, veteran status, marital status, family status, or other classification protected by applicable law 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 student 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 coworkers as a result of such complaint(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 VI, Title VII, Title IX, Section 504 of the Rehabilitation Act, the Pennsylvania Fair Educational opportunities Act, the Pennsylvania Human Relations Act, and all applicable laws and regulations.

For information regarding equal education and employment opportunity including services, activities and facilities that are usable and accessible to disabled persons, contact the Executive Director of Human Resources/Equal opportunity Compliance officer, Butler County Community College by telephone at (724) 287-8711, Ext. 8353, or in writing at 107 College Drive, Butler, PA 16002. If an applicant, employee, or student is physically or mentally disabled, he/she may request accommodations, academic adjustments, or auxiliary aids or services. Information on the College's services for disabled students may be obtained from the Academic Counselor and Disabilities Coordinator at Ext. 8327. Employees or applicants should contact the Executive Director of Human Resources/Equal opportunity Compliance officer at Ext. 8353 for more information.

For information regarding the College's Grievance Procedure, visit our website at www.bc3.edu/humanresources/grievanceprocedure.asp or contact the Executive Director of Human Resources/Equal opportunity Compliance officer, Butler County Community College by telephone at Ext. 8353 or in writing at the above address.

BC3 USE ONLY
 RE-ADMIT : _____
 NEW : _____ \$25 APP. FEE : _____

2017-2018 PTA PROGRAM APPLICATION

Institutions Attended: Official Transcript Requirement

ALL official transcripts must be turned in with your PTA Application packet (except your BC3 transcript). Please contact the Admissions Office at 724-287-8711 ext. 8346 if other arrangements need to be made.

Name of High School	Dates Attended	Currently Enrolled (yes/no)
1.		
2.		

Name of Colleges Attended (Please list all colleges currently or previously attended including BC3.)	Dates Attended	Currently Enrolled (yes/no)
1.		
2.		
3.		
4.		

Biology/Algebra Requirement

Biology Course Number/Name (Comparable to BIOL 101 or high school Biology)	Institution where course was taken	Date course completed	Grade earned in course

Algebra Course Number/Name (Comparable to MATH 090/MATH 091 or high school Algebra)	Institution where course was taken	Date course completed	Grade earned in course

Anatomy & Physiology

Anatomy & Physiology I and II **are not** required to apply to the PTA Program, but they are *strongly* encouraged and will be considered for early acceptance. Please indicate whether or not you had these courses at a **college-level** below. If not, leave this section blank.

Anatomy & Physiology I (Comparable to BIOL 131 at BC3)	Institution where course was taken	Date course completed	Grade earned in course

Anatomy & Physiology II (Comparable to BIOL 132 at BC3)	Institution where course was taken	Date course completed	Grade earned in course

GPA Requirement

Applicants to the PTA program must have a 2.80 cumulative GPA minimum from high school or college of most recent attendance if 12+ credits were completed there. They must also have a “C” or better in all PTA Associate Degree coursework for acceptance and continuation in the program.

Please check the box below if this statement is true. If not, you will not be considered for admission.

Yes, I have a 2.80 cumulative GPA

Experience in Physical Therapy

Applicants must have 20 hours minimum of exposure in at least one PT setting and have this page signed by your experience supervisor

<i>Name of Facility</i>	
<i>Address of Facility</i>	
<i>Dates: From-To</i>	
<i>Total # of Hours</i>	
<i>Summary of Responsibilities</i>	

Supervisor’s Signature: _____

Date: _____

<i>Name of Facility</i>	
<i>Address of Facility</i>	
<i>Dates: From-To</i>	
<i>Total # of Hours</i>	
<i>Summary of Responsibilities</i>	

Supervisor’s Signature: _____

Date: _____

I understand it is my responsibility to submit all official transcripts from high school as well as previous college/university attendance and will communicate with the BC3 Admissions Office as necessary regarding my application. I also attest that the information provided on this application is accurate and completed to the best of my ability.

Name: _____

Phone Number: _____

Email Address: _____

Student Signature: _____

Date: _____

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
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.

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.

**BUTLER COUNTY COMMUNITY COLLEGE
PHYSICAL THERAPIST ASSISTANT PROGRAM
APPLICATION GUIDELINES FOR FALL 2017**

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 academic program, and the application process.

ABOUT THE PROFESSION

As an important member of the health care team, PTAs 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.

PTAs 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 to students.

ABOUT THE COLLEGE

Butler County Community College, chartered in 1965, was the first community college in Western Pennsylvania. Today, approximately 3,500 students are enrolled in credit programs across our six 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 or visiting our website www.bc3.edu.

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 (A.A.S.) degree in Physical Therapist Assistant.

The PTA Program courses include general, technical, 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 & 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 education courses prior to beginning the technical PTA courses should apply to BC3 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. The PTA Program's Academic Coordinator of Clinical Education will provide the students with all applicable materials and information necessary for the clinical education component. Specific requirements to engage in 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. However, 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 and email address is <http://www.capteonline.org>.

The graduation rates for the Physical Therapist Assistant Program for the previous three years of 2014, 2015, and 2016 were 65.4%, 73.9%, and 68% for an average graduation rate of 69.1%.

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 for the classes of 2013, 2014 and 2015 were 95.7%, 94.1%, and 88.2% for an average passing rate of 92.7%.

Graduates who obtained any form of Physical Therapist Assistant employment within six months of licensure were considered to be employed. Employment rates for the classes of 2013, 2014, and 2015 were 95.2%, 92.3% and 93.3%, for an average employment rate of 93.6%.

ADMISSION POLICIES AND PROCEDURES

CRITERIA FOR ADMISSION

Admission into the PTA Program is selective and competitive. Completion of a special application packet is required and can be obtained from the Admissions Office at the main campus or may be downloaded from the BC3 website (<http://www.bc3.edu/admission/nursing.html>). All applicants are considered equally regardless of regard to race, color, religious creed, ancestry, national origin, handicap or disability, age, sex, sexual orientation, gender identity or expression, genetic information, veteran status, marital status, family status, or other classification protected by applicable law. The PTA Admission 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 **Friday, May 12th**. Applicants who do not meet requirements at the time of application will not be considered until all admission requirements are met. Applicants will be scored and ranked objectively based on a combination of grade point average (GPA) and college-level Anatomy and Physiology grades. 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 Friday, May 12th, 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 Admission 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 a minimum of 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 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 090/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 Sentence Skills, Reading Comprehension, and Arithmetic.
- 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 cumulative GPA of 2.80.
 - The high school GPA will be utilized if the applicant has not attended college.
 - If not a high school graduate, a GED/HSE certificate will be accepted. Student will then need to complete 12+ college-level credits to establish a GPA.
 - If the applicant has a high school GPA of less than 2.80, the Admissions Committee will review the applicant upon completion of 12+ college-level credits with a college GPA of 2.80 or above (in non-developmental or preparatory classes).
 - If the applicant has a college GPA of less than 2.80, the applicant must either take courses to raise the GPA to at least 2.80 at their current institution or take 12+ college-level credits at a new institution.

SPECIAL REQUIREMENTS

The PTA Program Director will meet with all accepted students for an orientation session. Among other information, PTA Students will be advised of the following requirements including timeline in which these documents are required:

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. Note: Some clinical sites require additional fingerprinting.
5. Assume all responsibilities for all transportation to and from the College as well as clinical facilities to which they are assigned.

APPLICATION PROCESS

To expedite the admissions process, this **Self-Managed Application** has been developed. **The applicant will be responsible for collecting credentials.** All parts of the application should be submitted together in one large envelope, if possible.

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 <http://www.bc3.edu/admission/nursing.html>.
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 and must be documented on the PTA application. The hours may be completed at a single facility or combination of facilities (preferred).
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 included in the application packet. These should be professional references, not friends or relatives. Complete the shaded portion of the Personal Recommendation Form. Address the envelopes provided 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. Obtain your official high school transcripts and/or GED/HSE test scores and include copies, in a sealed envelope from the institution along with PTA application materials.
8. Obtain your official college transcripts (if applicable) and include copies, in a sealed envelope from the institution along with PTA application materials.
9. Submit all application materials to the Admissions Office either by dropping them off during business hours or via USPS mail to: BC3 Admissions Office, P.O. Box 1203, Butler, PA 16003.

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

If you are taking courses at another college or university during the application period, a final transcript must be also sent on your behalf once coursework is completed. All materials submitted become the property of BC3. Credentials sent in support of application will not be duplicated or returned to the applicant.

AVAILABILITY OF FINANCIAL ASSISTANCE

All students are encouraged to complete a Free Application for Federal Student Aid (FAFSA) at www.fafsa.ed.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. The application process will not be considered to be complete until all materials have arrived and have been processed. Reviewing and ranking of applicants will not begin until after **Friday, May 12th**, however, early acceptance may be offered to applicants with high application 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 specific courses.

PTA PROGRAM COSTS

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 website (www.bc3.edu). Tuition costs are flat rates based on full-time status (12-17 credits per semester). The table below was constructed assuming that all students are taking all of the general, as well as, technical PTA courses. Costs will be less if general courses have already been completed. 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	\$104 per credit
Other PA county resident tuition	\$208 per credit
Out of state or International tuition	\$312 per credit
Comprehensive fee	\$49 per credit
Lab fee	\$35 per lab course
Online course fee	\$25 per credit

Tuition, Fees, and Books (2016-2017)

	First year (fall, spring)	Summer	Second year (fall, spring)
Tuition			
Butler County resident	\$1,872 x 2 semesters = \$3,774	\$728	\$1,560 x 2 semesters = \$3,120
Other PA county resident	\$3,744 x 2 semesters = \$7,488	\$1,456	\$3,120 x 2 semesters = \$6,240
Out of state or international	\$5,616 x 2 semesters = \$11,232	\$2,184	\$4,680 x 2 semesters = \$9,360
Comprehensive fee	\$49 x 36 credits = \$1,764	\$49 x 7 = \$343	\$49 x 27 credits = \$1,323
Lab fee	\$35 x 5 courses = \$175		\$35 x 2 courses = \$70
Online course fee	\$25 x 1 credit = \$25		\$25 x 2 credits = \$50
Books	General courses: \$870 PTA courses: \$960	General courses: \$75 PTA courses: 0	General courses: \$0 PTA courses: \$415

Additional Costs

Student liability insurance	\$10 (included in tuition cost)
CPR for the Healthcare Providers	up to \$100
Physical Examination	variable
Clearances	\$100 (more if fingerprinting, drug screening)
Identification pin	\$13
Personal equipment (stethoscope, goniometer, etc.)	variable
Clinical attire	variable
APTA student membership	\$85
Graduate fee	\$40
Graduate cap and gown	\$100
NPTE exam application	\$500

NON-DISCRIMINATION 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, sex, sexual orientation, gender identity or expression, genetic information, veteran status, marital status, family status, or other classification protected by applicable law.

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, sex, sexual orientation, or gender identity or expression, genetic information, veteran status, marital status, family status, or other classification protected by applicable law; (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, sex, sexual orientation, or gender identity or expression, genetic information, veteran status, marital status, family status, or other classification protected by applicable law; 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, sex, sexual orientation, or gender identity or expression, genetic information, veteran status, marital status, family status, or other classification protected by applicable law 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 student 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 complaint(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 VI, Title VII, Title IX, Section 504 of the Rehabilitation Act, the Pennsylvania Fair Educational Opportunities Act, the Pennsylvania Human Relations Act, and all applicable laws and regulations.

For information regarding equal education and employment opportunity including services, activities and facilities that are usable and accessible to disabled persons, contact the Executive Director of Human Resources/Equal Opportunity Compliance Officer, 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 an applicant, employee, or student is physically or mentally disabled, he/she may request accommodations, academic adjustments, or auxiliary aids or services. Information on the College's services for disabled students may be obtained from the Academic Counselor and Disabilities Coordinator at Ext. 8327. Employees or applicants should contact the Executive Director of Human Resources/Equal Opportunity Compliance Officer at Ext. 8353 for more information.

For information regarding the College's Grievance Procedure, visit our website at www.bc3.edu/humanresources/grievance-procedure.asp or contact the Executive Director of Human Resources/Equal Opportunity Compliance Officer, Butler County Community College.

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, 12/15, 1/16, 12/16

Butler County Community College
Curriculum Planner
PHYSICAL THERAPIST ASSISTANT, PTA, No. 215
Associate in Applied Science Degree

The Physical Therapist Assistant Program prepares graduates for employment in the role of a Physical Therapist Assistant (PTA) and as a member of the health care team. The Program focuses on two concepts: patient care and the physical therapy delivery system. **See description in College catalog for detailed information.**

Minimum 70 Credits

First Semester (Fall Session)

	PTA Seminar I	PTAP 101	3
	PTA Procedures I	PTAP 121	4
	PTA Fundamentals of Therapeutic Exercise	PTAP 135	2
+a	Human Anatomy and Physiology I	BIOL 131	4
+*b	Intermediate Algebra	MATH 100	3
+	Health/Physical Wellness/PHED____	HLTH 120/PHED 125/PHED____	<u>2/3</u>
			18/19

Second Semester (Spring Session)

*	PTA Functional Anatomy	PTAP 140	3
*	PTA Procedures II	PTAP 122	5
+*	Human Anatomy and Physiology II	BIOL 132	4
+	College Writing	ENGL 101	3
+	General Psychology	PSYC 201	<u>3</u>
			18

Third Semester (Summer Session)

*	PTA Clinical Education I (200 hrs)	PTAP 201	4
+*	Research Writing <u>or</u> Speech	ENGL 102 or COMM 201	<u>3</u>
			7

Fourth Semester (Fall Session, First 11 Weeks)

*	PTA Patient Practitioner Interaction	PTAP 109	1
*	PTA Procedures III	PTAP 123	5
*	Pathophysiology	PTAP 230	4

Fourth Semester (Fall Session, Last 5 Weeks)

*	PTA Clinical Education II (200 hrs)	PTAP 202	<u>4</u>
			14

Fifth Semester (Spring Session, First 8 Weeks)

*	PTA Seminar II	PTAP 105	2
*	PTA Procedures IV	PTAP 124	5

Fifth Semester – (Spring Session, Last 8 Weeks)

*	PTA Clinical Education III (300 hrs)	PTAP 203	<u>6</u>
			13

The student is encouraged to use the curriculum planner to keep track of courses taken and those still needed. In some cases one or more courses may be taken in a different order than indicated on the planner, but prerequisites must be observed.

- * - Indicates course has a prerequisite.
- a - Must be taken before or with PTA Procedures I and PTA Seminar I.
- b - College Mathematics I or II, Statistics, or Calculus, may be substituted.
- + - Courses that can be taken in advance of acceptance into the PTA Program, as a General Studies Student.