

Deadline to apply is June 13, 2022



• [4501 Amnicola Highway](http://4501 Amnicola Highway) • [Chattanooga Tennessee 37406](http://Chattanooga Tennessee 37406) • [\(423\) 697- 4400](http://(423) 697- 4400) • [www.chattanoogastate.edu](http://www.chattanoogastate.edu)

## SURGICAL TECHNOLOGY DEPARTMENT

Dear Applicant:

Thank you for your interest in the Surgical Technology Program offered by Chattanooga State Community College, an accredited program through CAAHEP. I have included information, instructions, and forms needed to apply for admission. Please read all the information carefully.

The Surgical Technology Program is a three-semester diploma course offered in the Tennessee College of Applied Technology Division. A new class is scheduled to enroll in the fall semester of each year. Class enrollment is limited to 24 students annually. To Facilitate the processing of your application, be sure all the necessary steps are completed and the needed information is provided.

Upon receipt of the completed application, materials and required test results, applications will be reviewed and the class selected. You will then be notified by email in the weeks following the June 13th deadline.

If you have any questions, please contact Sarah Garner, Surgical Tech Program Director at [sarah.garner@chattanoogastate.edu](mailto:sarah.garner@chattanoogastate.edu) or Nikishia Burson, Administrative Assistant II, TCAT Medical [Programs.atnikishia.burson@chattanoogastate.edu](mailto:Programs.atnikishia.burson@chattanoogastate.edu).

Sincerely,

Sarah Garner  
Director, Surgical Technology

*A drug screen and thorough criminal background check, at student's expense, will be required if accepted into the program. Any student not complying with this requirement will not be eligible to attend the program. Failing either may prevent attendance in the program due to clinical facility requirements.*

Accredited by CAAHEP  
25400 U.S. Hwy., 19N, Suite 158  
Clearwater, Florida 33763  
Phone: (727) 210-2350 Fax: (727) 210-2354

Application Deadline:  
June 13

**SURGICAL TECHNOLOGY PROGRAM  
Admission Process**

**STEP ONE**

Are you a current student at Chattanooga State Community College?  
*IF NOT.....apply or reapply.*

Submit official transcripts:

- High School or GED
- All colleges attended.

Are you "at" college level reading and math?  
Take the EdReady Entrance Exam, if applicable.

**STEP TWO**

Submit the Surgical Technology application packet including all required documents.  
Where: Surgical Technology Office, Health Science Center,  
room 1042 When: Before the deadline – June 13, 2022

**Required Documents to be submitted with application before deadline:**

- Proof of college level reading and math skills
  - College Entrance Exam scores or
  - Learning Support Reading and/or Math course completion with a "C" or
  - College level Math and/or English courses
- Copy of your college transcript, **if** you have college courses or have received transfer credit (*\*Chatt State Transcripts can be printed from your TigerWeb account.*)
- Copy of Health Related Certificate/Diploma (*See the points system sheet enclosed.*)

**ONLY COMPLETE APPLICATIONS WILL BE CONSIDERED FOR ACCEPTANCE**

Mailing Address: Surgical Technology, HSC 1042  
Chattanooga State Community College  
4501 Amnicola Highway  
Chattanooga, Tennessee 37406

***Complete applications do not guarantee acceptance into this program.***

*Our application and acceptance requirements are subject to change without notification.*

Each applicant should possess personal qualifications which will permit the performance of required tasks in the surgical technology program.

Students accepted into the class will then need to submit a complete physical examination as directed by the director of the program. Applicants must be free of any physical or emotional condition that might adversely affect performance in any phase of the program.

- The Surgical Technology program acceptance is based on an objective selection points system.
- There are no pre-requisite classes for the program other than being at college level math and reading.
- Applications are taken year round
- There is only one class per year, beginning in August
- The classes meet Mon-Fri. 7:45am-2:30pm, clinical sites may vary from 5:45am-2:30pm
- Class enrollment is limited to 24 students
- The cost is very affordable and is broken down into three semesters, Fall, Spring and Summer.
- Financial aid is available for the program. You should contact the TCAT Financial Aid Counselor at (423) 697-5501 All prospective students who reside in Tennessee are encouraged to apply for the Wilder-Naifeh Technical Skills grant and the Reconnect grant.
- Surgical Technology is strictly a day program.

**To be considered for the Surgical Technology Program, applicants are required to be at college level in math and reading.**

- Degree holding students are exempt from taking the College Entrance Exam
- ACT score of 19 or higher in all parts, math and reading (**not older than 5 yrs**)
- First time college students 21 years of age or older must take the College Entrance Exam.

If reading and/or math percentage scores are less than required to be "at college level", the student must complete the Learning Support math and/or reading sequence.

**PLEASE RETAIN THIS INFORMATION FOR FUTURE REFERENCE**

**The Surgical Technology Program  
Selection Points System  
CHATTANOOGA STATE COMMUNITY COLLEGE**

**Do not submit calculation sheet...The following information is provided to assist you in calculating your points.**

<p><b>1. Course Selection Points</b></p> <p>Anatomy &amp; Physiology I and II</p> <p>A = 10 B = 5 C = 1</p> <p><small>(BIOL 2010 and 2020 must be completed within 5 years of program entry.)</small></p> <p>Med Term HIMT 1300</p> <p>A = 10 B = 5 C = 1</p>	<p>A&amp;P I (BIOL 2010) =</p> <p>and</p> <p>A&amp;P II (BIOL 2020) =</p> <hr/> <p>Med Term HIMT 1300 =</p>	<p><b>1. Course Selection Total Points =</b> _____</p>												
<p><b>2. Health Related Selection Points:</b></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><b>Level ONE = 30 points (Surgery)</b></td> <td style="width: 33%; text-align: center;"><b>Level TWO = 20 points (General Medical)</b></td> <td style="width: 33%; text-align: center;"><b>Level THREE = 10 Points (General Medical)</b></td> </tr> <tr> <td style="text-align: center;">Anesthesia Tech</td> <td style="text-align: center;">Pharmacy Tech</td> <td style="text-align: center;">Medical Assistant</td> </tr> <tr> <td style="text-align: center;">Central Sterile Tech</td> <td style="text-align: center;">Licensed Practical Nurse</td> <td style="text-align: center;">Veterinary Tech</td> </tr> <tr> <td></td> <td style="text-align: center;">Paramedic</td> <td style="text-align: center;">EMT</td> </tr> </table>	<b>Level ONE = 30 points (Surgery)</b>	<b>Level TWO = 20 points (General Medical)</b>	<b>Level THREE = 10 Points (General Medical)</b>	Anesthesia Tech	Pharmacy Tech	Medical Assistant	Central Sterile Tech	Licensed Practical Nurse	Veterinary Tech		Paramedic	EMT	<p><b>2. Health Related Work Total Points =</b> _____</p>
<b>Level ONE = 30 points (Surgery)</b>	<b>Level TWO = 20 points (General Medical)</b>	<b>Level THREE = 10 Points (General Medical)</b>												
Anesthesia Tech	Pharmacy Tech	Medical Assistant												
Central Sterile Tech	Licensed Practical Nurse	Veterinary Tech												
	Paramedic	EMT												
<p><b>3. Date of application submission points:</b></p>	<p>Proof of your health-related education must be attached. Examples: a copy of your certification, diploma, licensure, or transcripts are accepted.</p> <hr/> <p>June – August = 4 September – December = 2 January – March = 1 April – May = 0</p>	<p><b>3. Date of application Submission Points =</b> _____</p>												
<p><b>TOTAL Calculated Student Points =</b> _____</p>														

**[ST applicant: Do not submit this form to ST Office - This form is provided for your convenience.]**



Tennessee College of Applied Technology  
Department of Surgical Technology

To: Registrar (or Principal)

Date: \_\_\_\_\_

Please send a complete transcript of my academic record to the following:

Chattanooga State Community College  
Attn: **Admissions/Records Office**  
4501 Amnicola Highway  
Chattanooga, TN 37406-1097

And

Surgical Technology Department  
Chattanooga State Community College  
4501 Amnicola Highway  
Chattanooga, TN 37406-1097

Note: Transcripts must include grades for final or last term attended.  
Transcripts can be faxed **with a school cover sheet** to Chattanooga State Records at: (423) 697-4709 and Surgical Tech Office at: (423) 697-2413

I last attended your school in \_\_\_\_\_. For identification purposes, the name under which I attended your school was \_\_\_\_\_. My birth date is \_\_\_\_\_ and my Social Security Number is \_\_\_\_\_.

If there is a charge for this service, please bill or contact me at the address below. Thank you.

\_\_\_\_\_ Print Name \_\_\_\_\_ Signature

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

**[ST applicant: Do not submit this form to ST Office - This form is provided for your convenience.]**  
You should copy and send this request to your high school and all other colleges attend

**SURGICAL TECHNOLOGY PROGRAM**  
Chattanooga State Community College  
4501 Amnicola Highway  
Chattanooga, TN 37406  
Accredited by CAAHEP

<b>OFFICIAL USE ONLY</b>
Date RECEIVED _____
Applied to college _____
GED ___ HS Diploma ___ GED ___
Transcript _____ Math _____ Reading _____

NAME \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE) (MAIDEN)

MAILING ADDRESS \_\_\_\_\_  
(#) (STREET) (CITY) (STATE) (ZIP)

\_\_\_\_\_  
(SOCIAL SECURITY) (A# if applicable) (DATE OF BIRTH) (HOME PHONE)

\_\_\_\_\_  
(WORK PHONE) (CELL or OTHER PHONE) (E-MAIL ADDRESS)

\*\*\*\*\*

EDUCATION:  HIGH SCHOOL: \_\_\_\_\_  G.E.D \_\_\_\_\_  
(YEAR GRADUATED) (YEAR)

ADDITIONAL EDUCATION: \_\_\_\_\_

HAVE YOU ATTENDED ANY OTHER TENNESSEE COLLEGE OF APPLIED TECHNOLOGY IN THE LAST YEAR?  
Yes  No

If you answered yes to the above question, please list which technology center(s):  
\_\_\_\_\_

HAVE YOU EVER ATTENDED / OR APPLIED TO THIS TCAT SURGICAL TECHNOLOGY PROGRAM BEFORE? Yes  
 No  If yes, when? \_\_\_\_\_

\*\*\*\*\*

EMPLOYMENT:  
Are you presently employed? \_\_\_\_\_ Name of employer \_\_\_\_\_  
Date of employment: \_\_\_\_\_ Type of work: \_\_\_\_\_

MEDICAL INFORMATION:  
Do you have a documented Latex allergy? \_\_\_\_\_ If so, to what grade is your allergy? \_\_\_\_\_  
Can you lift more than 25 lbs.? \_\_\_\_\_ Emergency Contact: \_\_\_\_\_  
Do you have medical insurance coverage? \_\_\_\_\_  
Sex: M  F  Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

\*\*\*\*\*

**ANSWER THE FOLLOWING QUESTIONS:**

**Why do you want to be a Surgical Technologist?**

**What are your long-range career goals?**

**Describe a time when you were faced with a stressful situation that demonstrated your coping skills.**

**Give an example of a time when you set a goal and were able to meet or achieve it.**

**Give an example of a time when you had to make a split second decision.**

**What is a typical way of dealing with conflict: Give me an example.**

**Tell about a difficult decision you've made in the last year.**

**Tell about a recent situation in which you had to deal with a very upset customer or co-worker (or group member).**

\*\*\*\*\*

**I affirm, agree, and/or understand that all statements on this form are true and accurate; any misrepresentation or omission of material facts may result in my expulsion from this program. I hereby authorize Chattanooga State or other appropriate state investigative agencies to make all necessary investigations concerning me, my work habits, character, or my action in any transaction. I further authorize and request each former employer, person given as a reference, educational institution, or organization to provide all information that may be sought in connection with this application.**

**I acknowledge that body jewelry is not permitted at any clinical site at any time during the program training. I am aware that all local hospitals are now smoke-free. This includes students and employees as well as visitors.**

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Applicant)

Chattanooga State Community College supports affirmative action and does not discriminate against any applicant for admission or employment on the basis of race, color, religion, handicap, sex or national origin.