

Please include a Formal Resume

Please attach a 250-word or (1) page, typed response to the following essay question:

Discuss why you want to become a Surgical Technician and how this relates to your short-term and/or long-term goals.

APPLICATION CHECKLIST:

Prior to sending your application, make sure these documents are included in the packet

- Completed Application
- Application Fee
- Official Transcript
- Professional Resume
- 3 professional references

Mail documentation to the following address:

**Surgical Technology Program
Huntsville Hospital
Corporate University
P.O. Box 1167
Huntsville, Alabama 35807**

**Huntsville Hospital
Surgical Technology
Professional Recommendation Form**

Applicant's Name: _____

The person whose name appears above has applied for admission to Huntsville Hospital Surgical Technology Program. He/she has given your name as a person to be contacted for information regarding his/her character and ability to work in patient care. Please answer the following question and provide any additional comments that could be helpful. **All information provided is considered confidential and private.**

Please complete the form and return it to Corporate University in a sealed envelope.

How long have you known the applicant? _____

Relationship to the applicant? _____

Do you have any reasons to doubt this person's integrity? Yes No

If yes, please explain _____

General Academic Ability

Please rate the applicant on the following traits.

	Excellent	Above Average	Average	Below Average	Not Observed
General Academic Ability					
Attendance					
Perseverance					
Ability to communicate – Writing					
Ability to communicate – Speaking					
Maturity					
Motivation/Initiative					
Ability to work with Others					
Ability to work Independently					
Personal Appearance					

Do you think the applicant is prepared to undertake the course of study? Yes No

If no, please explain.

Applicant's Strongest Characteristic(s)

Applicant's Weakest Characteristic(s)

Are there any additional comments which you feel would aid in the evaluation of this applicant?

Recommend with highest confidence Recommend Do not recommend

Name _____

Address _____

Phone _____

Title and Department _____

Signature _____ Date _____

(Completing and signing this form acknowledges that I am not a relative or family friend of the applicant)

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