

CHECKLIST FOR ENTERING DIAGNOSTIC MEDICAL SONOGRAPHY STUDENTS

- _____ Check the school's website, www.jfkmuhlenbergschools.org for orientation date, and plan to attend. Students **MUST** attend orientation.
- _____ Register for DMSM 101 courses, using UCC's Web Services.
- _____ Payment must be made directly to JFK Muhlenberg Snyder Schools and is due, in full, two weeks before the first day of class. Invoices are available on the Campus Portal: <http://www.webcollege.net/MuhlenbergCPortal>. Billing statements are not mailed. Payment, at the school, can be made by certified check or money order. Credit card payments should be paid online on the school website, www.jfkmuhlenbergschools.org and click on the On-line Payment button in right hand margin. We accept VISA, MasterCard & Discover. American Express is **NOT** accepted.
- _____ ID Badges - Student identification badges must be obtained. These photo ID badges are made at JFK Medical Center in Human Resources, at 80 James St., Edison, NJ 08818 **(732) 321-7000, Ext. 68501**. Badges will be made on Tuesdays from 1PM – 3:45 PM and Thursdays from 9AM to 11:45AM, no appointment is necessary. If you already have an ID badge; you do not need a new one.
- _____ Financial Aid – complete the FAFSA online at www.fafsa.ed.gov entering the schools' Financial Aid code **006421**. The student's Student Aid Report (SAR) will be automatically sent to the school and the student will be notified by e-mail with instructions on downloading a copy for themselves. Student Financial Aid Award letters will be mailed to all eligible students when all requested documents are completed by the student, and as government funding permits. Financial aid/loans are deducted at time of billing and students are required to pay balance at time of billing. Students are informed by the Financial Aid Office of their total aid/loans, and are also informed by the Student Accounts Office that they must compare Award Letters to bills and pay any remaining balances by billing due dates.
- _____ **Textbooks:** Booklists are available on the school website, www.jfkmuhlenbergschools.org/. Book Codes are listed by course. To view the required textbooks for each class go to: www.rittenhousebookstore.com and use the Book Codes from the school website, or call **(800) 345-6425**. You may purchase the books directly from this website or print the list and purchase elsewhere.

The following is required before the first clinical course (CLPS 901) which is taken in Summer Session

- _____ Complete the Criminal Background Check form (below). This may be hand-delivered to the school, or mailed to: **Director of Student Services JFK Muhlenberg Snyder Schools, P.O. Box 4649, Metuchen, NJ 08840.**
- _____ Apply for membership to the "Society of Diagnostic Medical Sonography". Forms will be distributed in class.
- _____ Annual physical required. Make an appointment with your personal physician or with JFK Occupational Health (\$50 fee). The physical can be done with your personal physician; however, the drug screening and Respiratory Fit testing **MUST** be done at JFK Occupational Health. The charge for the drug screening was paid with your tuition invoice. Health forms will be

emailed to entering students. Please contact Kate Fredericks, RN at kfredericks@jfkhealth.org, if you have any questions regarding these requirements, or need any guidance, before scheduling your appointment at JFK Occupational Health. To schedule an appointment with JFK Occupational Health call **(732) 321-7610 Option 2**. Health clearance forms may be hand-delivered or mailed to: **Kate Fredericks, RN, JFK Muhlenberg Snyder Schools, P.O. Box 4649, Metuchen, NJ 08840.**

CPR (Cardio-Pulmonary Resuscitation) - All students enrolled in clinical courses must have current Basic Life Support (BLS) certification prior to their first clinical day. Contact the EMS Training Center at **(732) 379-2794** or email EMSTraining@jfkhealth.org and in the subject line, put "CPR". The course title is "Health Care Provider." It a 4-1/2 hour course and the cost is \$65.00. You may take the course at another facility, but it must be a "Health Care Provider", or "Professional Rescuer" course sponsored by the American Heart Association "AHA". A copy of the card should be submitted to Kate Fredericks on the first day of class.

Health insurance is mandatory for all clinical and dormitory students at JFK Muhlenberg Snyder Schools. Proof of health insurance must be submitted prior to the start of the semester or moving into the dormitory. Failure to comply will result in your being unregistered from the course.

Obtain Malpractice (Liability) Insurance in the following amount: \$2 million per claim and \$4 million aggregate. All clinical students are required to submit a copy of the malpractice statement by the first day of class to Kate Fredericks, RN. Please use the attached letter as proof of the limits required by the School. The school does not endorse any particular company, however, many students obtain this insurance through www.Proliability.com, or you may "Google" *student liability insurance* for a list of insurance providers.

Uniforms – Uniform guidelines and purchase information is available on the school's website, <http://jfkmuhenbergschools.org/school-uniforms>.

Obtain a radiation monitoring badge from school faculty.

To Whom It May Concern:

Based on contractual agreements with our affiliates, students attending JFK Medical Center Muhlenberg Harold B. and Dorothy A. Snyder Schools are required to have a minimum of Two Million Dollars per claim and Four Million Dollars in the aggregate of professional Liability and Malpractice insurance.

Nicole Boscia MBA, RT(R)(CT)(MR)

Nicole Boscia, MBA, RT(R)(CT)(MR)
Director
Schools of Medical Imaging

I understand that this is a requirement for JFK Muhlenberg Harold B. and Dorothy A. Snyder Schools of Medical Imaging.

_____ Student's Signature

_____ Date

Dear Student,

Please be advised that health insurance is mandatory for all clinical and dormitory students at JFK Muhlenberg Snyder Schools. Proof of health insurance must be submitted prior to beginning clinical or moving into the dormitory.

If you are not currently insured below are several websites to assist you in obtaining health insurance. Also listed are websites with information regarding eligibility for Medicaid and/or charity care.

http://www.state.nj.us/dobi/division_insurance/ihcseh/index.html

<https://www.healthcare.gov/>

<http://www.njfamilycare.org/default.aspx>

<http://www.njfamilycare.org/income.aspx>

<http://www.lsnjlaw.org/Publications/Pages/Manuals/CharityCare.pdf>

<http://www.lsnjlaw.org/Health-Care/Affordable-Care-Act/Pages/ACA-Impact-You.aspx>

<http://www.lsnjlaw.org/Health-Care/Affordable-Care-Act/Pages/Health-Insurance-Sign-Up.aspx>

Student Authorization for Criminal Background Check

Account # 15
Investigationsbytabb.net

In order to complete your educational program at JFK Muhlenberg Snyder Schools, the performance of a completed criminal background check is required prior to a student's first clinical course, and annually thereafter, and/or before moving into the School Residence. The School engages the services of a consumer-reporting agency to conduct this background check. Authorization to conduct this background check and results deemed favorable by JFK Muhlenberg Snyder Schools and/or clinical facilities are conditions for admission and continued enrollment. Please complete the following authorization:

I hereby authorize JFK Muhlenberg Snyder Schools to obtain consumer reports (criminal background check) in order to satisfy the requirements of my educational program. I will be informed if my offer of admission is denied or rescinded or if my enrollment is terminated because of information obtained from the consumer report agency; in that event, upon my written request, the consumer reporting agency will provide me with a copy of the report and a "Summary of Your Rights Under the Fair Credit Reporting Act. (FCRA 15 U.S.C. 1681 et seq.)" By providing this authorization, I hereby release JFK Muhlenberg Snyder Schools, its affiliated entities, employees and agents from all liability for requesting and/or acting based on such reports.

I hereby hold JFK Muhlenberg Snyder Schools and TABB INC. harmless and agree to indemnify them from and against all third party claims, losses, lawsuits, settlements, demands, causes, judgments, expenses and costs including reasonable attorney fees arising under or in connection with this agreement to the extent that such costs and liabilities are proximately caused by the negligence, gross negligence or willful misconduct of the school or TABB Inc.

Name: _____
(First Name) (Middle Name) (Last Name) (Other name(s) used)

Social Security Number: _____ Date of Birth: _____

Current addresses and last two addresses (include address, town, state and zip code)

Current: _____
(Street, city, state, zip)

Previous: _____
(Street, city, state, zip)

Signature: _____ Date: _____

REPORT REQUESTED: Criminal Record Search at all addresses provided, database search and federal search

RESULTS: On-line **REPORT REQUESTED BY:** Director of Student Services
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