

**Springfield Technical Community College
Respiratory Care Program
Program Coursework Requirement Form 2025**

This **PRINTABLE form** must be **MAILED or EMAILED** to the Admissions Office

Instructions-Please read carefully.

- Complete all items on both sides. If not applicable, enter N/A in the appropriate box, do not leave anything blank. All **requirements** must be completed, or in progress in order to apply.
- This is a checklist, please refer to the program website for **detailed** information. You must also complete the **STCC COLLEGE APPLICATION**.
- After you have completed each section, sign and **MAIL or EMAIL this form** to the Admissions Office. Review will begin after March 31st, applications will be accepted until the program is full.

Admissions Office
Springfield Technical Community College
One Armory Square-PO Box 9000
Springfield, MA 01102-9000
Admissions@stcc.edu

For additional information regarding applying to the college, please visit www.stcc.edu/apply

Name (print legibly)_____

If you are a current or former STCC student, please list ID#_____

Address_____

City/State_____ Zip code_____ Country_____

Telephone number_____ Email_____

If there are any extenuating or unusual circumstances related to your application, please note below

My signature below indicates that ALL admission requirements for the Respiratory Care program have been completed or are in progress as indicated on the reverse page. The information I have provided is accurate, I understand it will be verified by the admission office.

Student applicant signature_____ Date_____

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Admission Requirement	Check appropriate response
1. Complete STCC College Application, with a request for Respiratory Care	_____ Application for Admission submitted online
2. Official High School Transcript, HiSet or GED	_____ Official document provided
3. Math -HS Algebra 2 with C or better or completion of MAT-097 or MAT-063 or college level (100 or higher) math with a C or better, or placement exam score as published on the program website.	Course name/number: Where/when taken: Grade:
4. Biology -A & P 1 (BIO 231)with a C or better	Course name/number: Where/when taken: Grade:
5. English -4 years of HS English with a C or better or completion of ENG-095(DWT-099) or College level English with C or better or Placement exam score of ENG101 or higher	Course name/number: Where/when taken: Grade:
6. Medical Terminology -Completion of a 3 credit, college level Med Term, grade of C OR passing score on challenge exam**	Course name/number: Where/when taken: Grade:

*Course work with designated time frames **must be current relative to the start** of the program.

**Challenge exams can only be taken by enrolled STCC students

Additional Information-Applicants who complete the following will strengthen their application.

Course	Grade	Semester/ Year taken	Taken At STCC	Where was this completed if not STCC? (list college)	Document been submitted?
College ENG 1					
College ENG 2					
A & P 2 with lab					
Microbiology					
Psychology					

Have you earned a previous degree? Y/N If Yes, list here _____

Do you have work experience in the healthcare industry? Y / N (If Y, submit **official health care experience verification form** found on the program website)