APPLICATION FORM * PHYSICAL THERAPIST ASSISTANT PROGRAM

PHASE 2 - CLINICAL
Deadline: April 15, 2015

Last Name           First Name      Maiden Name            Middle Name

Telephone Number__________________________ Cell phone Number ___________________________
Student ID # ________________________________ Working Email: ________________________________

Mailing Address _____________________________________________________________________

Street                                    City                  State       Zip Code

Have you applied to this program before?    Yes____    No____    Year: _________________

Are you transferring from another college?  Yes_____   No_____

If yes, have you completed all Allegany College of Maryland (ACM) Admission requirements
including submission of the following where applicable?

  Admission Application to the college.       Yes____   No____
  High School Transcripts/GED.                Yes____   No____
  College Transcripts.                       Yes____   No____
  Allegany College Placement Test.           Yes____   No____

If transferring, please complete the following information:

  Institution(s)                   Address     Dates of Attendance      Hours Completed

  1.
  2.
  3.

***Official transcripts of credits earned at other institutions need to be sent as quickly as
possible.

Are you currently enrolled in classes at Allegany College? Yes____ No____
When did you begin taking courses: Semester ________ Year ________

I certify that all statements given on this application are true and accurate to the best of my
knowledge.

________________________________  _________________
APPLICANT’S SIGNATURE        DATE

Send Completed Form to:  Allegany College of Maryland, PTA Program
12401 Willowbrook Road, SE
Cumberland, Maryland 21502-2596

You must also apply to the College in addition to
this program application. Apply online at
www.allegany.edu
PHYSICAL THERAPIST ASSISTANT PROGRAM

EXPECTATIONS

I, ____________________________, have read the Expectations of a Physical Therapist Assistant Candidate.

___ I believe that I comply with all the Expectations and should be considered for the Physical Therapist Assistant Program at Allegany College of Maryland.

___ I believe that I am unable to comply with all the Expectations; however, I wish to be considered for the Physical Therapist Assistant Program at Allegany College of Maryland. I have provided a written explanation of why I believe I do not meet the Expectations as stated.

___ I believe that I am unable to comply with all of the Expectations. I wish to withdraw my request to be candidate for the Physical Therapist Assistant Program. Explanations verbal or written are not necessary.

I understand that if I cannot comply with these Expectations, that it may be cause for my dismissal from the program at any time during my educational process

__________________________________________________________
Signature                                             Date

__________________________________________________________
Witness                                               Date
1. **CHOOSING A HEALTH CARE PROFESSION**

The decision to work in the health care profession should be based on an understanding of various health care professions. Some health professions require working in intense situations with terminally ill or severely injured people. Physical Therapy requires working with all types of patients and various types of environments including, but not limited to rehabilitation enters, hospitals, schools, patient’s homes, and outpatient clinics.

**EXPECTATIONS:**
A candidate for the Physical Therapist Assistant Program should feel comfortable working with patients with disabilities, and have the desire to help alleviate these disabilities.

A candidate for the Physical Therapist Assistant Program should be able to treat and render assistance to all individuals, of all cultures, across lifespan, without prejudice and repulsion.

*If unable to meet these expectations, please explain:*

2. **THE PROFESSION OF PHYSICAL THERAPY**

Critical to the selection of a profession is the understanding of what the profession is, and what the profession does. Not everyone is suited to a specific profession.

**EXPECTATIONS:**
A candidate for the Physical Therapist Assistant Program knows the basic functions of the profession and agrees with the basic philosophy and practice of Physical Therapy.

A candidate for the Physical Therapist Assistant Program as a basic understanding and agrees with the philosophy of the physical therapist Assistant Program at Allegany College of Maryland.

A candidate has a basic understanding of the differences among other allied health professionals and Physical Therapy (Occupational Therapy, Nursing, Social Work, Speech Therapy, etc).

*If unable to meet these expectations, please explain:*

3. **COMMUNICATIONS WITH OTHER INDIVIDUALS AND GROUPS**

In Physical Therapy, the assistant is required to communicate and build relationships with other individuals of all ages, race, sex, and cultural differences. Therapists are required to communicate in groups. They should have an interest in several subjects in order to converse on a casual and therapeutic basis.

**EXPECTATIONS:**
A candidate for the Physical Therapist Program must be able to communicate both orally and in writing, and be able to hear and see accurately to gather information and assess the patient.

A candidate for the Physical Therapist Assistant Program should have some experience working with groups or clubs and would benefit from the role of a leader in a group or club.
4. PERFORMANCE OF DUTIES
Physical Therapy is a medically related profession. Independently being able to perform duties is a must. Personal, physical, or mental problems and other employment, regardless of nature, should not interfere with the performance of assignments and class/clinic attendances.

EXPECTATIONS:
Candidates for the Physical Therapist Assistant Program are responsible for their own transportation to and from all clinical affiliations and didactic courses.

A candidate for the Physical Therapist Assistant Program should be a responsible individual. Those students must meet the requirements set forth in the college Physical Therapist Assistant Department as well as requirements set forth at all clinical affiliation sites.

A candidate for the Physical Therapist Assistant Program will be responsible for the cost of traveling, food, as well as housing, if necessary, when attending didactic courses and clinical rotations.

A candidate for the Physical Therapist Assistant Program must be able to reach, manipulate and operate the equipment necessary to work with patients. A candidate must also be able to move, transfer, manipulate and observe a patient as necessary to perform didactic and clinical assignments.

A candidate for the Physical Therapist Assistant Program must be able to demonstrate emotional and psychological health in day-to-day situations with patients and staff in routine and non-routine situations and in daily didactic and clinical situations.

A candidate for the Physical Therapist Assistant Program must be aware that participation in clinical placement will be denied if there is reasonable, demonstrable information that their actions/conditions would endanger patients, co-workers, or self (including drugs/alcohol, as well as other behaviors such as violence, abusive conduct, a particular medical condition, etc.)

If unable to meet these expectations, please explain:

5. POLICIES AND PROCEDURES
The Physical Therapist Assistant student is responsible for adhering to the policies and procedures of Allegany College and all organizations they attend for their clinical rotations (Level I and Level II).

EXPECTATIONS:
A candidate for the Physical Therapist Assistant Program shall seek knowledge of and abide by all policies and procedures of the college and clinical affiliation sites.

If unable to meet these expectations, please explain:
6. **APPEARANCE**

Physical Therapy is a medically related profession. Often, the medical profession is critical of certain attire for safety and patient care reasons. For example, large and abstract jewelry is a hazard around machinery and patients; heavy perfumes/cologne are obnoxious or even dangerous to patients who are ill, etc.

**EXPECTATIONS:**
A candidate for the Physical Therapist Assistant Program must dress in accordance with the Physical Therapist Assistant Program at Allegany College of Maryland and the policies of the clinical affiliation sites.

*If unable to meet these expectations, please explain:*

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7. **RESPONSE TO EMERGENCY SITUATIONS**

Health care professionals frequently engage in emergency situations. CPR and other emergency/first aid training are required of Physical Therapist Assistants.

**EXPECTATIONS:**
A candidate for the Physical Therapist Assistant Program should be able to respond and demonstrate appropriate judgment in emergency situations.

A candidate for the Physical Therapist Assistant Program must be able to complete a course in Cardiopulmonary Resuscitation and remain current with certification.

*If unable to meet these expectations, please explain:*

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8. **PROFESSIONAL ETHICS**

Professional ethics is the rightness and wrongness in relation to performing duties and responsibilities of a profession. The [Code of Ethics](#) for the Physical Therapy profession is a public statement of the values and principles used in promoting and maintaining high standards of behavior in Physical Therapy. The Code of Ethics is a set of principles that applies to Physical Therapy personnel at all levels.

**EXPECTATIONS:**
A candidate for the Physical Therapist Assistant Program should be able to develop a sense of rightness and wrongness appropriate to employment in a health care setting, and adhere to the Code of Ethics at all times.

A candidate for the Physical Therapist Program should have a set of ethical behaviors that will allow them to be receptive to professional ethics, teaching and enabling them to practice in a health care setting.

*If unable to meet these expectations, please explain:*
9. CRIMINAL BACKGROUND CHECK

PTA Program clinical sites require receipt of the results of a criminal; background check before accepting a student for clinical rotations and will not accept a student with a criminal record. The PTA Program contracts with an independent agency to perform criminal background checks and the cost of the service is included as a course fee in the first semester of Phase II of the program. The results of the criminal background check are reported to the PTA program director and will be shared only with the clinical coordinator within the PTA program. If a student has any criminal history, he or she will not be able to complete clinical rotations. As clinical rotations are an integral part of the PTA curriculum, the student will also not be able to complete the program. In addition, a criminal history may prevent the student from becoming certified and licensed to practice physical therapy. Graduates of the program are eligible to sit for the certification examination administered by Federation of State Boards of Physical Therapy (FSBPT), 124 West Street South, Third Floor, Alexandria, VA 22314, www.fsbpt.org, Phone: 703-299-3100.

EXPECTATIONS:

A candidate for the Physical Therapist Assistant Program should have a clean criminal record.

A candidate for the Physical Therapist Assistant Program should understand that during enrollment in the program, any official change, or the initiation of any governmental proceeding affecting the information revealed by the initial criminal background check must be reported immediately to the director of the program.

*If unable to meet these expectations, please explain:*
Allegany College of Maryland PTA Program
Observation Evaluation Form

Name__________________________ I.D#________________ Date_________

Facility_____________________________ Total Hours Observed_________

Type of Setting: _______ Inpatient (i.e. Hospital/Long Term Care) _______ Outpatient

Observation Dates/ Number of hours: (example 04/15/14 8 hrs)
___/___/___ ______hrs. ___/___/___ ______hrs. ___/___/___ ______hrs. ___/___/___ ______hrs.
___/___/___ ______hrs. ___/___/___ ______hrs. ___/___/___ ______hrs. ___/___/___ ______hrs.

Student
Please check those patient treatments that you observed.

- Gait training
- Functional mobility
- Electrical Stimulation
- Neurologic patients predominately
- Orthopedic patients predominately
- Ultrasound
- Exercises
- Pediatric patients predominately
- Compression
- Balance activities
- Amputee
- Laser
- Wound care
- Cancer
- Other(specify): ________

Supervising Clinician
Please rate the student’s performance by circling the corresponding number.

Listening Skills

0 0.5 1.0 1.5 2.0 2.5 3.0 3.5 4.0 4.5 5.0
ignores patient or PT/PTA attentive, responds appropriately

Verbalization

0 0.5 1.0 1.5 2.0 2.5 3.0 3.5 4.0 4.5 5.0
painfully shy, over/under speaks verbalizes appropriately, comfortable conversing

Interest

0 0.5 1.0 1.5 2.0 2.5 3.0 3.5 4.0 4.5 5.0
over/under participates, appears bored enthusiastic, asks questions appropriately

Behavior

0 0.5 1.0 1.5 2.0 2.5 3.0 3.5 4.0 4.5 5.0
nuisance, over/under socializes polite, helpful

Professionalism

0 0.5 1.0 1.5 2.0 2.5 3.0 3.5 4.0 4.5 5.0
late, inappropriate dress appropriate dress, punctual
no call, no show, cell phone

PLEASE MAKE ANY ADDITIONAL COMMENTS ON THE BACK OF THIS FORM.
Thank you for your time and efforts in PTA education!

Printed Clinicians Name, Credentials  ______________  Clinician's Signature with Credentials  __________________  Clinician’s Phone #

It is the student’s responsibility to provide you with a college-addressed, stamped envelope.

This form must be submitted confidentially or it will be ineligible.
Please sign over the seal and return this form by April 15 deadline to:
Allegany College of Maryland, PTA Program,
12401 Willowbrook Road, SE, Cumberland, MD 21502-2596, 301-784-5535
This form is to accompany the Observation Evaluation Form that has been given to you by the student who is applying for the PTA Program in the upcoming year. It is important that you fill out the form to the best of your ability and honestly. The rubric below is being sent in order to aid with consistency across the various clinicians. We strongly encourage communication and constructive feedback from the clinician to the student. If you (as the clinician) feel that the student has performed poorly, we suggest that you recommend to the student that he/she obtain more hours at a different facility. This form should be mailed in a confidential manner using a college-addressed stamped envelope that the student has provided to you. Please sign your name over the seal. This envelope should be addressed to: Allegany College of Maryland, Physical Therapist Assistant Program, 12401 Willowbrook Road, SE, Cumberland, MD 21502-2596

This form will be averaged with at least one other observation site and will count for 25 points toward their total admission points.

Please reference the rubric below to assist you in filling out the performance scale as it relates to Listen Skills, Verbalization, Interest, Behavior, and Professionalism.

0= Never
1= Rarely
2= Occasionally
3= Frequently
4= Always
5= With Distinction

If you have any questions, feel free to call Karin Savage, Program Director (301) 784-5535 or Jamie Andres, Program Secretary (301) 784-5538.

Thank you for your time and assistance in this process.
Sincerely,

Karin E. Savage, PT, DPT
Allegany College of Maryland PTA Program
Observation Evaluation Form

Name_________________________ I.D#_________________ Date__________

Facility_________________________ Total Hours Observed____________

Type of Setting: _______ Inpatient (i.e. Hospital/Long Term Care) _______ Outpatient

Observation Dates/ Number of hours: (example 04/15/14 8 hrs)
___/___/___ ______hrs. ___/___/___ ______hrs. ___/___/___ ______hrs. ___/___/___ ______hrs.
___/___/___ ______hrs. ___/___/___ ______hrs. ___/___/___ ______hrs. ___/___/___ ______hrs.

Student
Please check those patient treatments that you observed.

__ Gait training  __ Functional mobility  __ Electrical Stimulation
__ Functional mobility  __ Neurologic patients predominately  __ Ultrasound
__ Exercises  __ Orthopedic patients predominately  __ Ultrasound
__ Balance activities  __ Pediatric patients predominately  __ Ultrasound
__ Wound care  __ Amputee  __ Compression
__ Other(specify): __________  __ Cancer  __ Laser

Supervising Clinician
Please rate the student’s performance by circling the corresponding number.

Listening Skills

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ignores patient or PT/PTA
attentive, responds appropriately

Verbalization

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painfully shy, over/under speaks
verbalizes appropriately, comfortable conversing

Interest

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over/under participates, appears bored
enthusiastic, asks questions appropriately

Behavior

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nuisance, over/under socializes
polite, helpful

Professionalism

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late, inappropriate dress
appropriate dress, punctual
no call, no show, cell phone

PLEASE MAKE ANY ADDITIONAL COMMENTS ON THE BACK OF THIS FORM.
Thank you for your time and efforts in PTA education!

____________________________________________  ____________________________________  ___________________
Printed Clinicians Name, Credentials  Clinician’s Signature with Credentials  Clinician’s Phone #

It is the student’s responsibility to provide you with a college-addressed, stamped envelope.  
This form must be submitted confidentially or it will be ineligible.
Please sign over the seal and return this form by April 15 deadline to: Allegany College of Maryland, PTA Program, 12401 Willowbrook Road, SE, Cumberland, MD 21502-2596, 301-784-5535
I highly recommend
I recommend
I recommend with reservations
I do not recommend

Additional Comments:

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If you have any questions, feel free to call Karin Savage, Program Director (301) 784-5535 or Jamie Andres, Program Secretary (301) 784-5538.

Thank you for your time and assistance in this process.
Sincerely,

Karin E. Savage, PT, DPT
Use this form as your checklist for completing the process of application to the Physical Therapist Assistant Program. It is your responsibility to make sure the following areas are completed by the April 15th deadline:

___ 1. Application to College  (you can do this online at www.allegany.edu)

___ 2. Application to the Program  
    (Notice: It is to your advantage to submit the application form early. The observation forms can follow at any time but prior to the May 1 deadline.)

___ 3. Submission of all Transcripts  
    a. Must have completed all prerequisite courses  
    b. Must hold a “C” or better  
    c. Cumulative GPA of a minimum of 2.5

___ 4. Submission of all Volunteer Observation Evaluations  
    a. Completed at least 20 hours in two different settings for a total of 40 hours. (one of these facilities must be in a hospital or long term care facility, the other in an outpatient setting.)  
    b. Hours must be performed within the year of application (between May 1, 2014, to April 15, 2015). However, we recommend that all material be submitted by April 1st, 2015.  
    c. Evaluations delivered to the college in the described confidential manner

___ 5. Submission of Essay (written on day of interview)

___ 6. Applicant must meet with their PTA faculty advisor to confirm that all forms have been completed and on file within 6 months prior to the application deadline.

___ 7. Understand the Expectations as outlined in the application packet.

If all of the above are met by the April 15th deadline, you will be notified by mail of an interview time and date. Interviews are usually conducted in May and applicants are notified by June 15th whether or not they are accepted into the program.