

Application Form

Associate of Science in Physics - Health Physics Emphasis
Form 2003-2

Background:

The following application requests personal information from each applicant for the purpose of evaluating their likely success in the Idaho State University Associate of Science in Physics program with Health Physics Emphasis. The major items considered include: academic preparation, work experience, personal responsibility, personal initiative, motivation, and in some circumstances the ability/likelihood of gaining security access to certain facilities. The resources available to conduct this program are limited; hence, the number of available positions in this program are limited. This application is intended to provide ISU physics faculty, Non-departmental Advisory Committee Members, Admission Committee Members and perhaps most importantly those institutions that will host required internships the necessary information to assess your potential for success in this program. All individuals who may have access to this information participate in a strict non-disclosure policy initiated by the program.

Note: The information requested below is strictly confidential. This information is only available to those individuals with a "need to know" relative to program admissions. We urge you to complete this form neatly and to the best of your ability as admission to this program is competitive.

Please be aware that application to the Idaho State University Associate of Science in Physics program with Health Physics Emphasis is a separate application from normal university enrollment applications. Acceptance of enrollment at Idaho State University is a pre-requisite to consideration in to the Idaho State University Associate of Science in Physics program with Health Physics Emphasis.

Applications to the Idaho State University Associate of Science in Physics program with Health Physics Emphasis are maintained on file for a maximum of two years. This two year period begins when the application form and supporting materials have all been received. Applications are not considered by the Admissions Committee until all supporting documents have been received. Incomplete applications, including applications that do not enclose application fees, are maintained for a period not to exceed one year. The deadline for submitting complete applications for the fall semester of academic year 2004 (i.e. fall 2003) is July 15, 2003.

Please enclose a \$20.00 application fee made payable to Idaho State University, Department of Physics - Health physics Program.

Please be aware that either all or parts of this information may be independently verified by administrative staff at ISU or members of the ISU Physics Admissions Committee(s). Information provided with a clear intent to mislead the Physics Departmental Admissions Committee(s) will be grounds for automatic rejection of this application for admission without reimbursement of the application fee.

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familiar with either your academic preparation and or work ethic.

A. Please provide the name, address, telephone number and if available an e-mail address for each of the three individuals whom you have asked to provide a letter of reference:

(1) Name _____
Address _____

Telephone _____
e-mail _____

(2) Name _____
Address _____

Telephone _____
e-mail _____

(3) Name _____
Address _____

Telephone _____
e-mail _____

10) On a separate page, and starting with your most recent experience please provide the names, telephone number, and points of contact for as many as your last five employers. Please provide a brief description of your responsibilities during this employment and the dates over which you were employed by each organization listed.

Please feel free to include a description of any additional employment history that provided to you experiences that may be relevant to this application.

11) The ISU Associate of Science Degree in Physics with Health Physics Emphasis requires each student to complete a supervised internship as a condition for completion of the degree. Many Health Physics positions require that an individual be able to obtain various levels of security clearance. Although the inability to eventually obtain a security clearance may limit ones employment options, it does not exclude an individual from admission to this program.

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Areas that may restrict an individual's ability to gain security clearances include, but are not limited to: convictions, suspended sentences, or withheld judgements for felonies or other serious crimes; depending on employer requirements, citizenship; membership in subversive or terrorist organizations; history of dishonesty, or job related or academic misconduct. Should your personnel history include any of these or similar circumstances that may preclude your ability to gain future security clearance please briefly disclose the circumstances in question below. Remember this information is confidential.

A. If appropriate please explain the circumstances that may raise questions with respect to a security clearance below. Feel free to include an attached letter of explanation if you feel that such is desirable or appropriate. If this potential issue does not apply to you please indicate that this is NOT APPLICABLE.

B. If you do not anticipate any issues with obtaining a security clearance please affirm this status with your signature on the following blank:

_____ date: _____

Printed Name: _____

C. If you have previously held a security clearance please describe the type of clearance and the dates when it was effective below.

12) Please indicate the type of potential employment facility at which you are most interested in initially being employed (e.g. power reactors, universities, hospitals, national laboratories).

13) The following section applies to potential students who have graduated from high school after 2000. Information from at least one of the three placement examinations (ACT, SAT, COMPASS) must be provided for completion of this application.

ACT Scores

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SAT Scores Writing/English _____
 Mathematics _____

COMPASS Scores Writing/English _____
 Mathematics _____

 Writing/English _____
 Mathematics A _____ B _____ C _____

Should this information be readily available and you graduated prior to 2000 feel free to provide this information if you so choose. Note, regardless of your date of high school graduation you may be required to complete the COMPASS examination or an equivalent to assess your appropriate placement in this academic program.

14) If you have previously completed any college or university courses please provide the following information:

<u>University or College Attended</u>	<u>Dates of Attendance</u>
_____	_____
_____	_____
_____	_____
_____	_____

Note: Please have official transcripts from each college or university listed above forwarded to Idaho State University to the address provided in section 6 above.

15) If you completed any type of professional or technical certification (i.e. NRRPT, CIH, CHP, X-ray Technician Board Certification, etc.) please provide details of this certification, date of certification, and current activity status below.

16) Are you now enlisted in any of the uniformed services of the United States?
 _____ If you answered yes, with what organization are you enlisted.

17) Have you previously been enlisted in any of the uniformed services of the United States?
 _____ If you answered yes, what type of discharge did you receive?
 What military rank did you accomplish? _____
 What was your area of speciality while enlisted? _____

18) Some facilities have policies against nepotism. Are any members of your immediate family employed at a nuclear facility? (Yes or No) _____.

A) If you answered yes, then which facility are they employed at and for which company do they work ? (Please list all such relatives, use additional paper if necessary).

19) Please provide a one-page statement of your career goals. Please provided this in a mechanically printed format attached to this application. This must not exceed one page in length.