Springfield Technical Community College
Physical Therapist Assistant 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. Review will begin after March 31st, applications are accepted until 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 student ID# here_____

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 Physical Therapist Assistant 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	Provide appropriate response
1. Complete STCC College Application, with a request for Physical Therapist Assistant	_____Application for Admission submitted online
2. Official High School Transcript, HiSet or GED	_____Official document provided
3. **Math**- HS Algebra 2, grade of B or better, or placement exam score according to the website or completion of MAT-097 or MAT-063 or college level(100 or higher) with a B or better	Course name/number: Where/when taken: Grade:
4. **Medical Terminology**-Completion of a 3 credit, college level Med Term, grade of C or better within 7 years) OR passing score on challenge exam*	Course name/number: Where/when taken: Grade: Waiver granted by department chair
5. **Biology**-HS Biology with B or better OR college level Biology with a lab with a B or better	Course name/number: Where/when taken: Grade:
6. **A & P 1**-Completion of BIO 231/231L with C or better within 5 years	Course name/number: Where/when taken: Grade:
7. **English**-4 years HS English grade of C or better OR placement at ENG-101 or completion of ENG-101, C or better	Course name/number: Where/when taken: Grade:
8. **Computer skills**-Successful completion of CMP 106 OR passing score on the computer skills challenge exam in Testing Center**	Course name/number: Where/when taken: Grade:_____ Waiver granted by department chair
9. **SAT** scores 450 on each Verbal and Math **OR** Documented 3.0 or higher GPA in 15 college credits including English Comp 1 (all grades C or better)	____SAT Scores, Verbal _____ Math _____OR ____3.0 GPA (in 15 college credits including English Comp)
10. **Research Skills**-successful completion of RCH-100 OR passing score on the library skills challenge exam in Testing center**	Course name/number: Where/when taken: Grade: Waiver granted by department chair
11. Document a total of 5 hours of observation in one Physical Therapy setting OR interview a PT or PTA clinician. (see website)	Submit required **Verification form** found on the program website under Applying to this Program.

*waiving of this requirement by department chair with evidence of licensed health care or associate degree or higher
**waiving of this requirement by department chair with evidence of bachelor's degree or higher
***please note challenge exams can only be taken by enrolled STCC students
See program webpage for further examples of how to strengthen your application.

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Additional Information-Applicants who complete the following will be given priority consideration

Course	Grade	Semester/ Year taken or completed	Taken At STCC (yes or no)	Completed other than STCC (list college)	Has appropriate document been submitted? (yes/no)
BIO 232/232L A & P 2*					
ENG 101 Eng. Comp 1					
ENG 102 Eng. Comp 2					
SOC 101 Intro to Soc.					
PSY 101 General Psychology					
PSY 210 Lifespan Human Growth and Development					

*Course work with designated time frames **must be current within 5 years from the start** of the program. Course work over 5 years will need to be repeated.

Do you have work experience in the healthcare industry? Y / N
(If Y, submit official verification document, found on program webpage, under Applying to this Program)