

# Kapi'olani Community College RESPIRATORY CARE PRACTITIONER PROGRAM APPLICATION

**Application Period:** April 1 – May 31

## APPLICATION SUBMISSION PROCEDURES

<u>Directions</u>: Submit this program application and all required documents to the Health Careers Counseling Center via UH File Drop by the posted deadline. We will not be accepting in-person applications.

#### To use file drop follow the directions below:

- 1. Scan application and all supporting documents
  - a. If you do not have access to a scanner, use a free smartphone app like *Scannable* or *Scanner Pro* or *Cam Scanner*. Save your application and all supporting documents in PDF format.
- 2. From any web browser, go to <a href="https://www.hawaii.edu/filedrop">https://www.hawaii.edu/filedrop</a>
- 3. Log in as a UH User or Non-UH user (Non-UH Users will be sent a verification email, click on the link in the email)
  - a. In the recipient field, type: hlthsci@hawaii.edu
  - b. Click in the drop down menu in the expiration timer, change it to 14 days
  - c. In the "Optional Message" field, enter FULL NAME and the PROGRAM you are applying to
  - d. After you've completed the <u>Recipient</u> field, extended the <u>expiration timer</u>, typed in the <u>Optional</u> <u>Message</u>, click Proceed.
  - e. Click the Choose File button to browse for your application and supporting documents.
    - i. If you upload your documents in different files (i.e. application, transcripts, etc), please write a description of the file in the Description box.
  - f. Click the Start Upload button.
  - g. You will be redirected to a confirmation page with the link to your uploaded file. You're finished.

Please contact us at hlthsci@hawaii.edu or 808-734-9224 if you have any questions or need assistance with these application submission procedures.



# Kapi`olani Community College RESPIRATORY CARE PRACTITIONER PROGRAM APPLICATION

**Application Period:** April 1 – May 31

**<u>Directions</u>**: Please complete each item by typing directly into the fields or neatly printing on a hardcopy, and submit this application with all required documents to the Health Careers Counseling Center *via* <u>*UH File Drop by the posted deadline.*</u> If the application deadline falls on a weekend or recognized holiday, applications will be accepted on the following business day.

<u>APPLICA</u>	NT INFORMATION				
Name:				Number/Username	
Mailing	Last Name	First Name	M.I.		
Address:	Street / POB		City	State	Zip Code
	Street / FOD		Gity	State	Zip Code
Phone:	Cell	Hom	e	Work	
UH SYS	TEM Email Address:				
List othe (Notify the	er name(s) used on d he KAPCC Kekaulike I	ocuments: nformation & Service	Center regarding other	names used on college do	ocuments.)
APPLIC	ATION CHECKLIST	• -			
1.	Attend a Mand	latory RESP Progra	m Information Session	within one year of the a	nnlication deadline.
1.	1100000 11711111	autory ItEST 110grt		within one year or the u	pprication deadine.
	Date Attended		(Month)	/ Day / Year)	
	Date Attended	·	(IVIOIIII)	Buy ( 1 cm)	
2.		olete steps to become apply.hawaii.edu)	e a KapCC student if cu	rrently not a student of t	he UH
3.				e University of Hawaiʻi S	
				ourse work <i>WITHIN</i> the Usystem transcripts from S	
	(star.hawaii.ed	•		7	
4.	applicable. If to			the University of Hawai'i he UH System, please list	
	• Institution: _		Transcript	Request Date:	
	• Institution: _		Transcript	Request Date:	
	• Institution: _		Transcript	Request Date:	



My external transcripts <u>have been evaluated</u> by KCC. Submit your transfer course report from STAR (star.hawaii.edu/) and highlight all qualification courses.

My external transcripts <u>have not been evaluated</u> by KCC. Submit unofficial copies with this application, send official copies to the KCC Kekaulike Information & Service Center, and complete the online **Request for Transcript Evaluation form.**(https://go.hawaii.edu/y6x) To complete this form, you must log in with your UH Email account.

- 5. "My Plan Initiative." Complete self-assessments.
- 6. **Letters of Recommendation:** Applicants must submit three (3) letters of recommendation from individuals related to your work, volunteer, and/or educational experiences in the health pathway. Letters must include the recommender signature, contact phone number and/or email. *All letters of recommendation must be received by May 31*. Letters must be mailed/emailed to the RESP Program Director at:

Dr. Jung Eun Kim, RESP Program Director OR Jung Eun Kim <jungeun@hawaii.edu> Kapiolani Community College
Health Sciences Department, Kauila 122
4303 Diamond Head Road
Honolulu, HI 96816

7. **Application Essay:** A typed 400-500 word essay is required as part of the application. Please submit your essay using the template provided in this packet.

#### **APPLICANT CERTIFICATIONS:**

I certify that the answers and responses provided for all of the items on this Admissions Application/Check List are true to the best of my knowledge and belief. I understand that providing incorrect or false information will subject me to the requirements and/or discipline measures as provided under the University's Student Conduct Code. I understand that if I am not accepted into the program of application, I must submit a new application and all required documents for any subsequent semester. I also allow KISC to change my major and home institution if I am accepted into the RESP program. I understand that if I am not accepted into the RESP program, my home institution and major will not change.

"Health care students are required to complete University prescribed academic requirements that involve practice in a University affiliated health care facility setting with no substitution allowable for the completion required clinical practice. Failure of a student to complete the prescribed clinical practices shall be deemed as not satisfying academic program requirements. It is the responsibility of the student to satisfactorily complete any criminal background checks and drug testing that may be required by the affiliated health care facility to which he/she is assigned for clinical practice in accordance with procedures and timelines as prescribed by that affiliated health care facility."

Print Name	Signature	Date
I understand that priority selection is given considered after all qualified residents have		
I have read and understand the notification practice. I also understand that clinical pra	e e	, i



## **EXAMPLE** of how to complete the application:

↓ These are the requirements ↓	↓ Tell us what class you took to meet each requirement ↓				Circle Points A B C ↓ ↓ ↓
RESPIRATORY CARE PRACTITIONER Prerequisite Courses Must be completed by application deadline.	Course Alpha	Term of Completion	Institution	Grade/ Credits	Points
ENG 100 Composition I (3)	WRI 1200	Fall 2017	HPU	B / 3.0	3 (2) 1
MATH 100 OR higher (3) (Recommend MATH 103 OR 115)	MATH 115	Sp 2015	KCC	A/3.0	9 6 3

#### **CRITERION FOR ACCEPTANCE:**

Qualification is based on scores for completed prerequisite course grades and a scheduled personal interview, essay, letters of reference, and proof of college degree (if any). Selection is based on total qualifying scores in rank order from the highest score until admission quota is met for Respiratory Care.

Prerequisite Courses  Must be completed by application deadline.	Course Alpha	Term of Completion	Institution	Grade/ Credits	Points
GENERAL EDUCATION REQUIREMENTS					
ENG 100 Composition I (3)					6 5 4
MATH 100 <b>OR</b> higher (3) (Recommend MATH 103 <b>OR</b> 115)					11 9 7
HLTH 125 Survey of Medical Terminology <b>OR</b> HLTH 110 Medical Terminology					5 4 3
PSY 100 Survey of Psychology (3) <b>OR</b> FAMR 230 Human Growth & Development (3)					3 2 1
CHEM 100 Chemistry & Man <b>OR</b> higher (3)					15 13 7
PHYL 141 Human Anatomy & Physiology I (3) AND					15 13 7
PHYL 141L Human Anatomy & Physiology I Lab (1)					6 5 4
PHYL 142 Human Anatomy & Physiology II (3) AND					15 13 7
PHYL 142L Human Anatomy & Physiology II (1)					6 5 4
MICR 130 General Microbiology (3)					9 6 3
MICR 140 General Microbiology Lab (2)					6 4 2
A. S. Humanities (100 Level or higher) (3) (Recommend HWST 107)					3 2 1
TOTAL POINTS (out of a max of 100)					/100

Application Summary: For office use only	
Date Received:	
Counselor's Initials:	Application Complete:
HI Resident: Y N	
KapCC GPA Verified:	



#### **RESP CARE Application**

## Kapi`olani Community College Personal Essay RESP CARE Program

Name:	UHID:	

Review the essay options below, and identify the question you will answer by checking the box next to the question. In 400-500 words, respond to the question you chose.

What motivated you to pursue a career in respiratory care? Share personal experiences or instances that inspired your interest in this field.

Outline your short-term and long-term professional goals in the field of respiratory care. How does obtaining admission to this program align with your career aspirations?

Reflect on any relevant experiences or knowledge you have acquired that you believe will be valuable in the respiratory care profession. Provide specific examples.



## RESP CARE Application

## Kapi`olani Community College Personal Essay RESP CARE Program



### Kapi`olani Community College MY PLAN Self – Assessment

The My Plan Self-Assessment is a counseling tool for prospective healthcare majors to help you identify and better understand your career pathway, strengths, and areas of focus. Working in healthcare requires a combination of academic and professional knowledge and skills and a commitment to public service. As you plan, find ways to make your strengths shine and to improve your weaker areas. Please complete this self-assessment by marking the appropriate boxes. All response are voluntary. This assessment does not affect your eligibility for admission. This assessment and is used for all ten Health Academic programs, therefore there may be some statements that do not apply to your specific program.

Knowledge of the Profession	Below Expectations	Meets Expectations	Exceeds Expectations
Identified career goals in my health pathway	0	0	0
Identified career alternatives in my health pathway	0	0	0
Relevant experience – by volunteer experiences	0	0	0
Relevant experience – by servicing learning experience	es O	0	0
Relevant public service – by paid work experiences	0	0	0
Understand "professional qualities" of health pathway(s	s) O	0	0
Understanding of current healthcare issues	0	0	0
Comfort with bodily fluids or personal patient care	0	0	0
Comfort with illness	0	0	0
Comfort with injury	0	0	0
Comfort with death	0	0	0
Comfort with physical contact with people	0	0	0
Ability to multitask and adapt to change	0	0	0
Ability to accept constructive feedback	0	0	0
Ability to handle occupational crises, challenges or pro	blems O	0	0
Ability to move forward to achieve the goals and outcome	mes O	0	0
Ability to follow safety guidelines and standards of practices	ctice O	0	0

Personal Characteristics	Below Expectations	Meets Expectations	Exceeds Expectations
Demonstrate commitment to public service	$\circ$	0	0
Demonstrate empathy/altruism	0	0	0
Demonstrate moral/ethical integrity	Ö	Ö	Ö
Demonstrate emotional maturity	0	0	0
Demonstrate good interpersonal relationships	0	0	0
Accept responsibility	0	0	0
Ability to work independently to achieve the goal/task	0	0	0
Collaborate and teamwork to achieve the goal/task	0	0	0
Accept and demonstrate leadership	0	0	0
Be dedicated/hard-working healthcare practitioner	0	0	0
Committed to life-long learning	0	0	0



### Kapi`olani Community College MY PLAN Self-Assessment

Academic Strength	Below Expectations	Meets Expectations	Exceeds Expectations
+Completed prerequisites of health program of study	0	0	0
+Completed support courses of health program of stu-	dy O	0	0
Achieved minimum cumulative GPA for program entry	0	0	0
Achieved prerequisite course GPA for your program e	ntry O	0	0
Effective verbal and nonverbal communication skills	0	0	0
Ability to utilize technology effectively for learning	0	0	0

	Below pectations	Meets Expectations	Exceeds Expectations
Established support for transportation to externships	0	0	0
Established support for financial assistance prior to entry	0	0	0
Established support for nonacademic responsibilities	0	0	0
Established support for personal and time management sk	ills O	0	0
Established support for continuous professional learning	0	0	0
Established opportunities to balance personal, family, & so	chool O	0	0
Established support for campus and community resources	0	0	0

<sup>+</sup>As required for program entry and graduation or meet other requirements as directed for program admissions.

The University of Hawai'i does not discriminate on the basis of race, sex, age, color, national origin, or disability. For inquiries regarding our nondiscrimination policies, please contact the Kapiolani Community College designees:

Deneen Kawamoto, ADA Coordinator for Students Office: 'Ilima 107 (808) 734-9522; deneenk@hawaii.edu

UHCC offers Career and Technical Education (CTE) Programs of Study leading to Associate of Science (AS) and Associate of Applied Science (AAS) degrees, as well as postsecondary certificates, in career fields such as arts and communications, business, health careers, industrial and engineering technology, natural resources, and public and human services.

For more information, visit our website at uhcc.hawaii.edu

<u>UHCC applies an open access policy, with program admission based upon the completion of applicable course/</u> testing prerequisites. The lack of English skills will not be a barrier to admission and participation in CTE programs.