

Professional Awards:

Other Awards:

American Heart Association/American Academy of Pediatrics Certifications

List the expiration dates for all certifications

Basic Life Support for Healthcare Providers BLS (<i>mandatory</i>)	_____	Advanced Cardiovascular Life Support ACLS (<i>mandatory to graduate</i>)	_____
Pediatric Advanced Life Support PALS (<i>optional</i>)	_____	Neonate Resuscitation Program NRP (<i>optional</i>)	_____

Send a copy of your certification cards to send with your application

ORGANIZATIONS/LEADERSHIP ACTIVITIES

Please list organizations or activities in which you have had significant participation (professional, community, sports, church, etc., indicate offices held and give dates when appropriate)

EMPLOYMENT

Employer (list most recent first)	City / State	Title	Inclusive Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Documentation of Professional Experience

Written Component: The RT Admissions Committee would like for you to reflect upon your professional and practical experiences as a respiratory care practitioner. Specifically, please include various strategies of mechanical ventilation, patient mix, and type of critical care practice you have experienced as a post graduate RRT. Also include non-invasive and invasive monitoring devices/procedures, patient protocols, and any other type of modality that reflects your current level of clinical practice.

In addition, the committee requests you discuss specific management, educational, or research activities, related to the practice of respiratory care, in which you have been involved. Please include publications you may have authored as a result of these activities.

Please submit your word processed response, attached with your application packet or email separately as a MS Word attachment to breathe@health.missouri.edu

Notice of Nondiscrimination

The University of Missouri System is an Equal Opportunity/ Affirmative Action institution and is nondiscriminatory relative to race, religion, color, national origin, sex, sexual orientation, age, disability or status as a Vietnam-era veteran. Any person having inquiries concerning the University of Missouri's compliance with implementing Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans With Disabilities Act of 1990, or other civil rights laws should contact the Assistant Vice Chancellor, [Human Resource Services](#), University of Missouri, 1095 Virginia Avenue, Columbia, Mo. 65211, 573/882-4256, or the Assistant Secretary for Civil Rights, U.S. Department of Education.

Americans with Disabilities Act

If disability related accommodations are necessary (for example, a note taker, extended time on exams, captioning), please register with the Office of Disability Services (<http://disabilityservices.missouri.edu>), S5 Memorial Union, 573- 882-4696, and then notify me of your eligibility for reasonable accommodations. For other MU resources for students with disabilities, click on "Disability Resources" on the MU home page.

Please Read and Sign

By signing below, I attest that the information provided on this application is true and complete to the best of my knowledge. I understand that falsification of any information is grounds for denial or dismissal from the Respiratory Therapy Degree Advancement Program.

Signature

Date

Place the application in an envelope and mail to:

Respiratory Therapy Degree Advancement Applications Committee
University of Missouri
605 Lewis Hall
Columbia, MO 65211-4230

If you have any questions regarding the Respiratory Therapy Degree Advancement Program, the application, or admission procedures, you may contact the program director at breathe@health.missouri.edu.