

Core Radiography Petition Form

Name:		Student ID:	Date:
Address:		City:	Zip Code:
Phone:			
	on will be considered to stud to answer YES to all questi	dents who have <u>completed</u> the fe ons below.	ollowing requirements:You
YES/NO	I have attended my program advisory meeting and have been accepted as a pre-core Radiography Program student at MPTC.		
	I have completed Written Communications/English Composition with a grade of C or better.		
	I have completed General Anatomy and Physiology with a grade of B- or better.		
	I have completed College Math with a grade of C or better.		
	I have attached an unofficial MPTC transcript.		
	I have completed the foll <u>Student Acknowledgen</u> 	•	
	<u>Technical Standards/S</u>	Statement of Understanding	
	Employment Verifica	tion/Volunteer Form/s (optional,	but recommended).

- Students will be notified via college email by **March 26, 2025** if they have or have not been selected for Radiography Core status. **Do not call to inquire about your status.**
- Staple all requested documentation in the order listed above to this Petition Form to create your petition packet. Place in a **9x12 envelope** addressed to:

MPTC Radiography Program Attention: Joanna Koenig 2151 N. Main Street West Bend, WI 53090

Petition packets will only be accepted <u>March 3-7, 2025</u>. Packets can be sent via US Mail or hand-delivered to the front desk at one of the three MPTC campuses. All paperwork is due by 4:00 p.m. on March 7, 2025. No exceptions.

Student Signature:

Date: