

The Tseng College

RADIOLOGIC TECHNOLOGY: CT/MRI CERTIFICATE PROGRAM

STUDENT CONTRACT REGARDING CLINICAL PLACEMENT

Please read and initial your understanding of each of the following items and return this completed form with your Statement of Intent to Register/Policy Acknowledgement (SIRPAF) Form by the specified deadline:

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1.	I understand that if I chose to opt-out of clinical placement in my application, I may request clinical placement assistance from CSUN, but I am not guaranteed placement assistance. It is ultimately my responsibility to secure an approved clinical placement, and my failure to do so may result in my withdrawal from the program. See Tseng College's policies on withdrawals and refunds.	Initial:	
2.	I understand that if I have agreed to find my own clinical placement that the site must contract with CSUN as a clinical affiliate. I must provide CSUN with a manager or director contact at the site in order for CSUN to begin the affiliation contract process. I understand that if I do not find a clinical placement, if my clinical placement is not approved, or if my clinical placement is not successfully contracted, CSUN will not provide assistance with clinical placement.	Initial: _	
3.	I understand that if I chose CSUN clinical placement in my application, I am not guaranteed clinical placement at any requested affiliate site. If I am unwilling or unable to travel to the site at which I am placed for any reason, I become fully responsible to secure my own clinical placement. The clinical placement that I secure must contract with CSUN as a clinical affiliate and I must provide CSUN with a manager or director contact at the site in order for CSUN to begin the affiliation contract process. I understand that if I do not find a clinical placement, if my clinical placement is not successfully contracted, CSUN will not provide assistance with clinical placement.	Initial:	
4.	I understand that I may be subject to withdrawal from the program should my clinical placement, whether it be my own or one provided through CSUN, terminate the clinical placement agreement before or during my clinical placement. See Tseng College's policies on withdrawals and refunds.	_	
5.	I understand that if I have requested CSUN clinical placement, there may be rare occasions where CSUN is unable to secure a clinical placement site for me due to unforeseen mitigating circumstances. In the unusual event that this occurs, I would have to defer my clinical placement to a future term of attendance.	Initial: _	
6.	Nuclear Medicine Technologists who are only certified by the Nuclear Medicine Technology Certification Board (NMTCB), and are interested in the CT program, must get pre-approval from the Radiologic Health Branch in addition to a signed permission from the clinical site prior to acceptance to the CT program.	Initial:	
7.	I understand that in order to be considered for clinical placement I am required to meet all criteria specified by CSUN's affiliate site/self-chosen site at my sole financial expense, and that satisfying criteria at a self-chosen site is not overseen by CSUN. These criteria will include but may not be limited to:		
	 Submission of a recent background check through certifiedbackground.com which meets the requirements of the institution Initial and random drug screening Submission of a passing physical examination Documentation of vaccination history TB testing: Negative results are required within 12 months of beginning clinical CPR certification through American Heart Association for the Healthcare Provider Proof of liability insurance: CSUN will provide information regarding this Proof of health insurance 		
	I also understand that I am responsible for any and all costs associated with travel to and from the clinical placement site and any parking or other fees that may be required by the site.	Initial:	
8.	I understand that I will be enrolled in an online orientation course two weeks prior to the first day of the program. Participation in this orientation is <i>mandatory</i> in order to prepare me to successfully participate in the online Learning Management System (LMS) known as Moodle. I must complete this orientation prior to the first day of the program and will be provided with my log in and other access information by the Tseng College before the start date of the online	-	
	orientation.	Initial:	
By signing below, I agree to abide by the rules and policies of the Radiologic Technology CT/MRI Certificate Program outlined above, the Radiologic Sciences Student Handbook, and by the laws and regulations pertaining to the practice of radiologic technology in the United States. Further, I certify that I have provided accurate and complete information to CSUN, and that I understand any misrepresentation of information may be reason for termination of clinical privileges and immediate dismissal from the program.			
C±	dont Drinted Name	Date	
Stu	dent Printed Name Student Signature	Date	