

Application for Admission

Name: _					
		(Last)	(First)		(MI/Maiden)
Address:	: <u></u>				
		(Street)	(City)		(State/Zip)
Cell Pho	ne:				
Email ad	dress:				
US Citize	en? Yes	[] No [] If no, are you	a legal US resident?	Yes[] No[]
Are you	at least 1	8 years old? Yes [] No []			
Are you	able to s	peak, read and understand E	nglish? Yes [] No []		
Educatio	n:				
Dates		Name of Cahaal	Location	Graduate?	
From	То	Name of School	Location	(Y/N)	
<u>Do you l</u>	nave acce	ess to laptop computer? Yes	[] ON []	nternet? Yes	[] No []
Work Ex	perience:				
Dates		Name of Employer		Your Role	
From/To					
		1		1	

LifeShare Phlebotomy Program Application for Admission

In the space below describe your long-term career goals and how obtaining a phlebotomist certificate may help you achieve those goals.
What qualities do you have that will help you succeed in this program?
Phlebotomy is extremely important process to the Healthcare Profession. You understand that applicants accepted into the program must maintain the highest standards. By submitting this application, you understand that you must adhere to the academic standards as well as our zero tolerance of use of drugs and/or illegal prescription usage and maybe subject to periodic drug screens. LifeShare Phlebotomy students will successfully complete clinical, technical, and professional tasks assigned and will maintain at least a 75% average for chapter and final exams. As part of the course requirements, each student is required to bring in volunteers on whom they can perform capillary and venipuncture procedures. Additionally, students are expected to perform these procedures on each other.
Applicant Signature
Completed application forms may be sent as a hardcopy to the address below or submitted

by email to PhlebotomySchool@lifeshare.org.

LifeShare Phlebotomy School Attn: Margaret Plunkett 8910 Linwood Avenue Shreveport, LA 71106