



FOR THOSE WITH A PASSION TO GET AHEAD

Date Received: \_\_\_\_\_

Clinical Laboratory Science Program

**APPLICATION FOR CLS PROGRAM FINAL INTERNSHIP YEAR**

Current Mercy CLS Student Application Deadline **March 31<sup>st</sup>**.  
Second Degree CLS student Application Deadline **June 15<sup>th</sup>**.

PLEASE PRINT CLEARLY

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mercy ID: \_\_\_\_\_ PACT Mentor \_\_\_\_\_

Do you have a BS degree:  Yes  No If yes, what was your major: \_\_\_\_\_

Which College(s) did you attend: \_\_\_\_\_

What is your Overall GPA: \_\_\_\_\_

Please indicate pre-requisite courses you are currently taking: \_\_\_\_\_

Are there any pre-requisite courses you are taking this summer semester, if yes, please list them below:

Print the name, organization, address and telephone number of the individual from whom you will be requesting a recommendation. Please make sure the recommender uses the Recommendation form found on the CLS webpage.

Name of recommender: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Acceptance is provisional and based on successful completion of remaining prerequisite courses with a major science GPA of 2.5 or higher and a grade of C or better.