



Phlebotomy Technician Program Checklist Application Information

1) Application Eligibility:

In order to be eligible to apply for the AWC Phlebotomy Technician Program the student must:

- a. Attend a Phlebotomy Information Session
 - Sessions are held periodically throughout each semester – visit <https://www.azwestern.edu/degrees-and-certificates/phlebotomy-technician> or via the QR code shown below to find dates and times. Information session details will be located in the “Important Phlebotomy Technician Announcements” section. Info session attendance is only good for 6 months. If you attended an information session greater than 6 months ago, you will have to attend another one.
- b. Have completed AHE 101 with a grade of C or higher
- c. Be currently enrolled in or have completed AHE or BIO 160 with a grade of C or higher

2) Application Instructions:

- a. Complete the Phlebotomy Technician Program Application Forms A and B. The application can be found in this packet or at <https://www.azwestern.edu/degrees-and-certificates/phlebotomy-technician>
- b. Include copies of the following supporting documentation:
 - Unofficial Arizona Western College transcript
 - Must be a current copy and can be obtained from Admissions/Registration or printed from your self-service.
 - Official transcripts from other schools (if applicable)
 - If a student has taken any pre-requisites or co-requisites from any other college/university/school, an official must be ordered and sent to the AWC Registrar’s Office to be evaluated. The evaluation must be completed before this application is submitted.



- Copy of your current Arizona Department of Public Safety level one fingerprint clearance card (this takes a while to get so start on this early)
 - Copy of your current American Heart Association CPR card (BLS Healthcare Provider)
 - Copy of your reading score
 - Copies of your negative results from your 2-step TB skin test
 - Copy of your negative drug urine screen (9 or 10 panel)
 - Proof of Varicella (chickenpox) vaccine series or positive IgG titer
 - Proof of MMR (Measles, Mumps, Rubella) vaccine series OR positive IgG MMR titer
 - Proof of completion of Hepatitis B vaccine series OR positive IgG Hepatitis B
 - Proof of influenza vaccine OR signed declination form attached
- c. Track Selection – On Form B there is space to select which track you plan on pursuing. The national certification only track is 3 courses. The AWC occupational & national certification track is 4 courses. Please review the Phlebotomy Technician check sheet located below.

3) Submission Instructions:

- a. Email to alliedhealth@azwestern.edu no later than 4:30pm prior to the due date shown on Form A.
- Email must include 2 separate PDF attachments. The first PDF will include your completed Form A, Form B, Copy of your reading score, unofficial transcripts and/or transcript evaluations (if applicable). The second PDF file will be all your supporting documents for your health and safety. These include your fingerprint clearance card, CPR card, immunization or titer records, urine screen results, and your declination forms (if applicable).

Useful Links

[Info Sessions & General Info](#)



[Phlebotomy Tech Checksheet](#)





Health & Safety Instructions

1. Students need to apply for their AZ DPS level 1 fingerprint clearance early in the application process since it could take up to 8 weeks to receive. Visit <https://psp.azdps.gov/> to apply for fingerprint clearance card.
 - Paper and ink fingerprints (costs roughly \$80, slower processing times)
 - Electronic fingerprints (costs roughly \$100, faster processing time)
2. Provide a current CPR card
 - Students must have a current American Heart Association CPR for Healthcare Provider BLS card
 - This must be from an In-Person course. Online CPR courses will not be accepted by our clinical partners
 - Visit <https://www.azwestern.edu/workforce-ed/industry-certifications/cpr-basic-life-support-bls> OR <https://cpr.heart.org/en/cpr-courses-and-kits/healthcare-professional> to explore upcoming course offerings
3. Purchase and take a rapid 9 or 10 panel Urine Drug Screen test at any local facility (some examples include Agile Occupational Medicine, Sonora Quest, or Labcorp)
4. Obtain a 2-step TB skin test
 - Agile Occupational Medicine (formerly known as Pinnacle Health) has this test for roughly \$25 per test, for a total of \$50.
 - You will pay for 2 separate TB tests. This will require you to go to a facility 4 times. The first time you will pay for a TB test and be given a small injection on your forearm. The second visit (no extra charge) you must return within 48-72 hours to read the results from the injection. Then your 3rd visit must happen within 7-21 days from your first injection. During this visit you will pay for another TB test and get another small injection. Your 4th and final visit (no extra charge) must occur within 48-72 hours after your 3rd visit to read the results. Plan accordingly because if you are late on returning to have your results checked, then you will have to pay for a new TB test.
5. Obtain your vaccination records
 - Obtain a copy of your Varicella (chickenpox) vaccine series (2 dates) – This can be obtained from your childhood physician or from the Yuma County Immunization Clinic. If you are unsuccessful at obtaining your childhood vaccine record students may elect to pay for an IgG Varicella Titer blood test. If student has never received these vaccines, student may contact provider or Immunization clinic to purchase vaccines.



- Obtain a copy of your MMR (Measles, Mumps, Rubella) vaccine series (3 dates) – This can be obtained from your childhood physician or from the Yuma County Immunization Clinic. If you are unsuccessful at obtaining your childhood vaccine record students may elect to pay for an IgG MMR Titer blood test. If student has never received these vaccines, student may contact provider or Immunization clinic to purchase vaccines.
- Obtain a copy of your Hepatitis B vaccine series (3 dates) – This can be obtained from your childhood or current physician or from the Yuma County Immunization Clinic. If you are unsuccessful at obtaining your vaccine record students may elect to pay for an IgG Hep B Titer blood test. If student has never received these vaccines, student may contact provider or Immunization clinic to purchase vaccines.



Phlebotomy Technician Program Application - FORM A

All required documentation must be hand delivered or delivered via email *no later than 4:30pm on or before the due date shown below*. Late or incomplete applications will not be considered for admission during the current application cycle.

<i>Please select the semester you are applying for below:</i>		
<input type="checkbox"/> Fall – due 1 st Thursday of June	<input type="checkbox"/> Spring – due 1 st Thursday of November	<input type="checkbox"/> Summer – due 1 st Thursday of March

<i>Please select your first choice (required) and second choice (optional) campus below:</i>		
Yuma Main Campus: 1 ST <input type="checkbox"/> 2 ND <input type="checkbox"/>	San Luis Learning Center: 1 ST <input type="checkbox"/> 2 ND <input type="checkbox"/>	Parker 1 ST <input type="checkbox"/>

Personal Information			
NAME:	<i>Last:</i>	<i>First:</i>	<i>Middle:</i>
FORMER NAME(S):			
STUDENT ID #:			
PERSONAL EMAIL:			
AWC EMAIL:			
ADDRESS:		CITY:	ZIP:
PHONE:	<i>Cell:</i>	<i>Home:</i>	<i>Work:</i>
<i>Have you ever been convicted of a felony?</i> Yes <input type="checkbox"/> (<i>If yes, please explain</i>) No <input type="checkbox"/>		<i>Provide explanation of yes answer below or on separate page:</i>	

The following information is for institutional research purposes only, **not for admission**. Please place a ✓ mark in the appropriate box.

Male Female Date of Birth: _____

Ethnic Group: Hispanic White, Non-Hispanic
 Asian or Pacific Islander Black, Non-Hispanic
 American Indian/Native Alaskan Other: _____ (Please specify)



Phlebotomy Technician Program Application - FORM B

Student must complete all of the sections below							Staff Verification (Staff Use Only)
Name:			ID#:				
Phlebotomy Technician Information Session Date Attended:					_____		☐
Track Choice: AWC & National Certification <input type="checkbox"/> OR National Certification Only <input type="checkbox"/>							☐
Course	Grade	Sem/Year	Currently Enrolled				
Pre-Requisites							
AHE 101			Yes <input type="checkbox"/>		No <input type="checkbox"/>		☐
Co-Requisites							
AHE 119 or BIO 160			Yes <input type="checkbox"/>		No <input type="checkbox"/>		☐
Health & Safety Requirements							
Level 1 Fingerprint Clearance Card	Date Card Issued		Expiration Date				
							☐
CPR/BLS Card							☐
Rapid Drug Screen (9/10 panel)			Date Completed				
							☐
TB Test #1	Injection Date	Read Date		Results			
				Negative <input type="checkbox"/> Positive <input type="checkbox"/>			☐
TB Test #2				Negative <input type="checkbox"/> Positive <input type="checkbox"/>			☐
Varicella (requires proof of 2 vaccines OR positive IgG)	Date #1	Date #2	Date #3	Positive IgG Result	Booster Date		
				☐			☐
MMR (requires proof of 3 vaccines OR positive IgG)					Measles <input type="checkbox"/>		
					Mumps <input type="checkbox"/>		
					Rubella <input type="checkbox"/>		
Hepatitis B (requires proof of 3 vaccines OR positive IgG OR declination form)	Date #1	Date #2	Date #3	IgG Result	Booster Date	Decline*	
							☐
Influenza							☐

*If student wishes to decline the Influenza vaccine, student must include a signed declination form. Form may be requested by contacting the AWC Allied Health Department at alliedhealth@azwestern.edu.