

PSBHO Readiness Form Surgical Technology Program

I have taken the Ivy Tech Assessment and completed all recommended skills advancement courses as indicated on the assessment. It is recommended but not required that I complete the following course with a grade of a "C" or better.

*Attended Mandatory Surgical Technology Information Session: Yes _____ No _____ Date: _____

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|---|--|
| 1. IVYT 1XX Life Skills Elective _____ | 7. SURG 203 Pharmacology _____ |
| 2. ANPY 101 Anatomy and Physiology I _____ | 8. ANPY 102 Anatomy and Physiology II _____ |
| 3. ENGL 111 English Composition _____ | 9. HLHS 105 Medical Law & Ethics _____ |
| 4. HLHS 101 Medical Terminology _____ | 10. COMM 101 Speech (or) #12 _____ |
| 5. MATH 123 Quantitative Reasoning _____ | COMM 102 Intro to Interpersonal Communications _____ |
| 6. PSYC 101 Intro to Psychology (or) #7 _____ | 11. BIOL 211 General Microbiology _____ |
| SOCI 111 Intro to Sociology _____ | |

The PSB test must be taken for admittance to the fall program. The test results are good for **only one year**. *Taking the test does not guarantee admittance into the Surgical Technology Program.*

I plan to take the Surgical Tech PSBHO examination on _____ at _____ in

room _____. I am _____ am not _____ (check one) a current student at Ivy Tech

Community College.

My payment of **\$40.00** is attached.

Printed Name

Banner Student C0 Number

Address

City, State. Zip

Student's Signature

Phone Number

Because of limited seating you will need to reserve your examination date by contacting the **Ivy Tech Testing Services at 429-9852**. Please take this reservation form to the Business Office to pay the \$40.00 examination fee.

* No test will be given unless fees are paid prior to testing.

* You **must** bring **your receipt** and a **PHOTO ID** to the examination.