

ASSOCIATE IN APPLIED SCIENCE HEALTH INFORMATION MANAGEMENT WEIGHTED ADMISSION FORM 2024

Weighted Admission Period

* ○ February 15 through June 15 for Fall Enrollment (part-time)	
C February 15 through June 15 for Fall Enrollment (full-time)	

Onlir	e Health Information Management Career Talk (Mandatory)
Care	er Talk must be current (valid 2 years) to be eligible to apply. Date Completed:*
Date	* GTC Student ID #: *
Nam	(Last) (First) (Middle) (Other Name Used)
Addı	Apt. No.
City:	State:* Zip Code:*
Hom	e Phone: Cell Phone: *
GTC	Email Address: *
010	Elitali Address.
The	following criteria <i>must</i> be met prior to submitting weighted admission form. Please check all that apply.
* 🗆	Must complete the application process to GTC and have received an acceptance letter from Admissions.
	 Students who have not enrolled in courses at GTC for three consecutive semesters must reapply for admission to GTC.
	Weighted Admission Form is supplemental to application to GTC
	Must have official transcripts from other colleges evaluated by GTC Transcript Evaluation Office.
	Oo not attach official transcripts to this form.
	• GTC does not always recognize courses at another institution as being wholly equivalent to its own. Students can look up Transfer
	Equivalencies on the GTC website or contact Transcript Evaluation Office. • Foreign transcripts must have course-by-course analysis from approved agency evaluated by GTC Transcript Evaluation Office.
	/erify that grade report records are viewable in Student Planning through GTC4me.
	Must have successfully completed or be enrolled in all Phase I courses, within the number of attempts allowed by the College.
==	Attached copy of current certification/licensure or certificates, as required, for previous health-related education. Subject to verification.
	attached documentation on official company letterhead stating dates of employment, as required, for work, or volunteer experience in ealthcare (direct or indirect). Subject to verification.

Weighted Admissions form and attachments will be submitted using the SUBMIT button at the end of this form. Submission serves as the time/date stamp.

Health Information Management 864-250-3031

Notification of acceptance/denial will be mailed approximately 4 weeks following weighted admission period deadline.

ection A: General Education ount ONLY those courses ea rm.		grade of C or nigher. Mu	striave completed pric	or to submitting weigi	nted admission
Courses Taken	Credits	College/University Where Course Was Taken	Semester/Year Course Taken	Letter Grade	Quality Points
*BIO 210 or *BIO 215	4				
*BIO 211 or *BIO 216	4		<u>'</u>		
MAT 103, 109 or MAT 120	3		,		
AHS 102	3				
AHS 147	3		<u>'</u>		
ENG 101	3				
ENG 102	3	,	_		
†CPT 101 or †CPT 170	3				
PSY 201 or SOC 101	3				
SPC 205	3				
Humanities Elective :	3 or 4				
		,			,
Total Credits	sll 35 or 36 ll				-
JST BE 2.50 OR HIGHER TO C	nts ÷ Total C	R ADMISSION (maximum of	7 points)	Total Quality Point (maximum of 144 po I GPA 3.00-3.49=3 3.50-3.99=5 4.00=7 points If YES insert 15 points =>	points points
ompletion of all General Education of all Completion of all Comple	nts ÷ Total C QUALIFY FOI on Courses - BIO and MA BIO and MA	R ADMISSION (maximum of	attempt only) mpt only) attempt only) attempt only) If YES	I GPA 3.00-3.49=3 3.50-3.99=5 4.00=7 points	points points
choose only completion of all	nts ÷ Total C QUALIFY FOI on Courses - BIO and MA BIO and MA	R ADMISSION (maximum of - Grade of C or Higher (1st at T Courses - All A's (1st atter T Courses - A's and B's (1st atter T Courses - All B's (1st atter	attempt only) mpt only) attempt only) attempt only) If YES	(maximum of 144 pc 3.00-3.49=3 3.50-3.99=5 4.00=7 points If YES insert 15 points => insert 15 points => insert 10 points => insert 5 points =>	points points
Completion of all	nts ÷ Total CRUALIFY FOIO on Courses - BIO and MA BIO and MA BIO and MA The state of the state o	T Courses - All A's (1st atter T Courses - All B's (1st atter Total Section 15/216 combination.	attempt only) mpt only) attempt only) attempt only) If YES If YES ion A (maximum of 1) ase II.	(maximum of 144 po 3.00-3.49=3 3.50-3.99=5 4.00=7 points If YES insert 15 points => insert 15 points => insert 10 points => insert 5 points =>	points points s
choose only ne applicable A&P must be either BIO 210/2 CPT 101 or CPT 170 must be See University Transfer list	nts ÷ Total Coulon Courses - BIO and MA BIO and MA BIO and MA BIO and MA on, Woluntan GTC Catalan Con, Voluntan Con, Con, Con, Con, Con, Con, Con, Con	T Courses - All A's (1st atter T Courses - All B's (1st atter	attempt only) If YES attempt only) If YES If YES	(maximum of 144 por GPA 3.00-3.49=3 3.50-3.99=5 4.00=7 points If YES insert 15 points => insert 15 points => insert 10 points => insert 5 points =>	points points s
hoose only applicable A&P must be either BIO 210/2 CPT 101 or CPT 170 must be See University Transfer list is ust be at the 102 level or hig	nts ÷ Total Coulon Courses - BIO and MA BIO and MA BIO and MA BIO and MA on, Woluntan GTC Catalan Con, Voluntan Con, Con, Con, Con, Con, Con, Con, Con	T Courses - All A's (1st atter T Courses - All B's (1st atter Total Section 15/216 combination. Inin 5 years of entering Phalog. If a foreign language eer, Military & Work Exp	attempt only) If YES attempt only) If YES If YES ion A (maximum of 1a ase II. is chosen to satisfy the	(maximum of 144 por GPA 3.00-3.49=3 3.50-3.99=5 4.00=7 points If YES insert 15 points => insert 15 points => insert 10 points => insert 5 points => B1 points Fee Humanities required General Points General Points	points points s

of Weighted Admission form when	n application is submitted. (Hours com	pleted as part of course requiremen	its do	
· • • ·	nan Seminar with grade of C or higher. ighted Admission form.	. Course grade must be posted in co	ollege 4	
	ation may include DD214, Militar ecurity number if visible on docu		documentatio	n.
Military Service recognition for: A	ctive Duty, Reserve, Honorable Discha	arge, or Retired Veteran	10	
Work Experience (choose o	only one) – Documentation must	include dates of employment	t and job des	cription.
Work Experience in Healthcare –	DIRECT Patient Care (6 consecutive r	month minimum within the last 5 yea	ars) 4	
Work Experience in Healthcare –	INDIRECT Patient Care (6 consecutive	e month minimum within the last 5 ye	rears) 4	
		Total Section B (maximu	ım of 23 poin	ts)
	TOTAL POINTS -	- SECTIONS A and B (maximu	m of 204 poir	nts)
			•	
Attach Documents:	Voluntary Europianae Degumentation	Mark Francisco Decumentation	A History Cupp	
revious Education Documentation	Volunteer Experience Documentation	Work Experience Documentation	Additional Supp	orting Documents
Signature	Date			
lent Signature		Date:		