



College of Health Sciences
Electrocardiograph Technician

Acknowledgement

I have read and understand the conditions for admission to the EKG program at Parker University. I understand that failure to complete all steps of the application process will cause me to be ineligible for admission into the EKG program.

_____ (initials)

I understand I must first be accepted into the Parker University prior to applying to the EKG program. I understand positions in the EKG program are limited and acceptance into Parker University does not guarantee acceptance into the EKG program.

_____ (initials)

I understand that the EKG core schedule consists of:
2 didactic courses offered online.
A mandatory CPR instruction on Saturday and EKG open labs on Saturday.
These EKG courses will have multiple interactive, discussions, quizzes and tests.

_____ (initials)

Prospective Student Name (print)

Date

Prospective Student Signature

Date

Admissions Counselor Signature