



LOMA LINDA UNIVERSITY
School of Allied Health Professions
Radiation Technology

Radiography Applicant Observation Form | AS in Medical Radiography & Entry-Level BS in Radiation Sciences

To the Supervisory Technologist or Clinical Preceptor:

The following applicant, _____, has applied to a radiography-based program at Loma Linda University (LLU). As part of the application process, this prospective student is being asked to spend a minimum of **8 hours** in a Radiology department or clinic within LLUH or at another medical facility near the area where the applicant lives. This will hopefully enable the prospective student to better understand the profession they seek to study at LLU.

We would appreciate you taking the time to briefly talk to this individual about the profession to include what a radiographer does, what type of working conditions and hours might be expected, what the pay scale is in your area, etc. It would also be helpful if the applicant could observe a variety of radiographic areas and exams within your department. Some of the items we would like the applicant to observe are: **contrast exams, portable exams, trauma, surgery, general outpatient exams, and any other diagnostic procedures specific to your facility**. If possible, the 8 hours can be split up to allow the applicant to observe days, nights, weekends, trauma, etc. **After the applicant has completed their 8 hours of observation, please fill out the information below and return this form to the applicant.**

Print Name: _____ Position: _____

Signature: _____ Date: _____

Facility Name: _____ Facility Phone: _____

Thank you so much for facilitating the observation time for this applicant. This is an important part of their journey toward attending a program here at LLU and becoming better acquainted with this profession.

Sincerely,

Brenda Boyd

Brenda L. Boyd, PhD, R.T.(R)(M)(ARRT)(CRT)
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***Applicant:** Please bring this completed form with you to your interview and email a copy to bboyd@llu.edu.

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