



ASSOCIATE DEGREE
RADIOLOGIC TECHNOLOGY PROGRAM

In lieu of observation hours, please review the following information regarding the Radiologic Technology profession and complete the attestation form below:

https://www.ahra.org/AHRA/Careers/A_World_of_Career_Opportunities.aspx

<https://explorehealthcareers.org/career/allied-health-professions/radiologic-technologist/>

<https://www.asrt.org/main/career-center/careers-in-radiologic-technology>

Additionally, please list three (3) additional links of credible sources that you researched to provide you information about this career.

I, the undersigned, attest that I have reviewed the following information about radiologic technology in lieu of observation hours and am thoughtfully making the decision to pursue a career as a Radiologic Technologist with a clear understanding of the job opportunities and expectations. I feel pursuing this career path aligns with my professional goals and skill set and I submit this application willingly and purposefully.

Student Name (printed legibly): _____

Student Signature: _____ **Date:** _____

**Please submit this form with your application.