http://www.parker.edu/uploadedImages/00_Home/Images/parker-university-logo.png

**PARKER UNIVERSITY**

**DIAGNOSTIC SONOGRAPHY PROGRAM**

**Accreditation**

Dear Prospective Students,

Here is some information regarding our accreditation. Parker University is institutionally accredited by Southern Association of Colleges and Schools (SACS). Accreditation is a sign that an institution has met an external set of criteria for its institution. If you attend a regional accredited school with institutional accreditation you can qualify for The American Registry of Radiologic Technologists (ARRT) Sonography certification immediately upon graduation. Registration with American Registry for Diagnostic Medical Sonography (ARDMS) requires passing the Sonography Principles & Instrumentation (SPI) Examination in addition to passing a specialty such as Abdomen or Obstetrics and Gynecology. Upon successful completion of the Basic as well as Intermediate Ultrasound Physics courses at Parker University, students will be eligible to sit for the SPI examination. There are several pathways for students to become eligible for the ARDMS specialty examination. Below you will find examples; however, the best way to view prerequisite and requirement eligibility is by visiting the ARDMS website at ardms.org/prep/prerequisite.asp.

* If a student holds a Bachelor’s Degree within the US or Canada he/she will be eligible under prerequisite 3A to sit for the ARDMS specialty examination immediately after graduating a sonography program provided he/she can produce the documents required on the ARDMS website.
  + Students with a Bachelor’s Degree from a foreign country must have their transcript evaluated by a Foreign Education Transcript Evolution Organization.
* If a student does not hold a Bachelor’s Degree typically he/she is eligible to sit for the ARDMS examination after one year of full time paid work in the field along with required documents.
* Successful completion of the ARRT (S) permits the graduate to sit for the ARDMS specialty examination provided he/she can produce required documents.

I have read and understand Parker University is SACS accreditation and how it will impact my ability to sit for the national registry. In addition any and all questions regarding the above disclosure have been answered. I hereby acknowledge the consequence of the above disclosure.

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Prospective Student Name (print)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Prospective Student Signature Date

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**ASSOCIATE OF APPLIED SCIENCE**

**DIAGNOSTIC SONOGRAPHY PROGRAM**

I have read and understand the conditions for admission to the Diagnostic Sonography 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 DS Program. \_\_\_\_\_\_\_\_\_ (initials)

I understand I must first be accepted into Parker University prior to submitting an application to the DS program. I understand positions in the DS program are limited and acceptance into Parker University does not guarantee acceptance into the DS program. \_\_\_\_\_\_\_\_\_ (initials)

I understand that the presence of an offense on my criminal background record may interfere or negate progression in the DS program, and that I may not be eligible for DS licensure. \_\_\_\_\_\_\_\_\_ (initials)

The program for which you are applying may require extended travel for clinical fieldwork assignments in the early morning, late evening, and/or Saturdays. I understand that assigned fieldwork sites may be located out of the DFW area. Are you prepared to meet this requirement? \_\_\_\_\_\_\_\_\_ (initials)

I certify that the statements made by me on the application are true, complete, and correct. I also understand that I am responsible for submitting all requested transcripts and/or other documents for the completion of the application process. \_\_\_\_\_\_\_\_\_ (initials)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prospective Student Name (print)

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Prospective Student Signature Date