



**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM**  
**(FA26-SU27 SURT Class)**  
**APPLICATION # \_\_\_\_\_**

\_\_\_\_\_  
**Last Name**

\_\_\_\_\_  
**First Name**

\_\_\_\_\_  
**Middle Name**

\_\_\_\_\_  
**Student ID**

**GENERAL INFORMATION:** This application is for admission to the Associate of Applied Science in Surgical Technology at LSU Eunice. By completing this form, you are seeking admission to the didactic and clinical portion of this program. All applications must be received no later than **JULY 1<sup>ST</sup>, 2026**. If you have any questions regarding this application, please call 337-550-1357 or email [kguillor@lsue.edu](mailto:kguillor@lsue.edu).

**INSTRUCTIONS:**

1. Fill out this application and return it to the Health Sciences Business and Technology office, T-104 **by close of business on July 1<sup>st</sup>, 2026**. Only mail this application if you are **NOT** currently attending LSUE as a student and are unable to come in person. The application must arrive by **July 1<sup>st</sup>** to be considered for admission for the 2026 – 2027 SURT Cohort.

Our address is:

**LSU Eunice, Health Sciences & Bus. Technology**

**P. O. Box 1129**

**Eunice LA 70535**

Include a copy of **ALL** transcripts from colleges you have attended and have them submitted to LSUE Admissions office before the deadline for applications. If you are currently enrolled in a university other than LSUE send a copy of the transcript to Health Sciences and Business Technology immediately following the posting of those final grades. These final grades must be received before the program selection date. LSUE Admissions will also need an official copy sent from that University as soon as possible. Please complete and return the **Transcripts Release Form** attached to this application.

2. Apply separately for general admission, if **not currently enrolled at LSU Eunice**. Contact the Office of Admissions, LSU Eunice, P. O. Box 1129, Eunice, LA 70535 or register online at [www.lsue.edu](http://www.lsue.edu). The university application must also be complete by **July 1<sup>st</sup>**.
3. Attach all supporting documentation or this application will be considered incomplete and will not be accepted for consideration for admission unless all documents are attached.
4. Please read important information regarding Financial Aid attached.
5. All applicants must take the NLN NEX Assessment. **A composite score of at least 150 is mandatory, with a minimum of 50% required in each individual category.** Please refer to the information in this packet for registering for the Entrance Assessment. The NLN NEX can be taken ONCE per application. The exam must be paid for and scheduled by July 1<sup>st</sup>.



**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM  
(FA26-SU27 SURT Class)**

**TURN IN PROOF OF PAYMENT FOR EXAM FROM NLN AND PROOF OF SCHEDULED EXAM FROM LSUE TESTING CENTER WITH APPLICATION.**

6. Attend a mandatory orientation advising session when scheduled, post selection.
7. Completion of the following pre-requisite courses:
- |                             |   |                       |
|-----------------------------|---|-----------------------|
| English 1001                | English Composition 1                         | 3 credit hours        |
| Math 1015 or Math 1021      | Applied College Algebra or<br>College Algebra | 3 credit hours        |
| Psychology 2000 or 2070     | Developmental Psychology of the Life Span     | 3 credit hours        |
| Biology 1160 & 1161         | Human Anatomy & Human Anatomy Lab             | 4 credit hours        |
| Biology 2160 & 2161         | Human Physiology & Human Phys. Lab            | 4 credit hours        |
| Biology 1011/1012 or 2051   | Microbiology and Lab                          | 4 credit hours        |
| Allied Health 1013          | Medical Terminology                           | 2 credit hours        |
| Pure Humanities Elective*** | History, Philosophy, Higher level English     | <u>3 credit hours</u> |
|                             | Total   | 26 credit hours       |
8. Upon acceptance into the Surgical Technology Program, a mandatory drug screen and background check will be required.
9. It is the right and privilege of all clinical sites to request that a drug test be performed prior to beginning (or at any time during) the clinical rotation in any facility. Failure to participate in any such drug test is grounds for dismissal from the Surgical Technology program.
10. By signing below, I authorize Louisiana State University Eunice to obtain and utilize records of Code of Conduct and policy violations as part of the selection process into the Surgical Technology program.

**\*\*\* Required for ALL applicants**

CERTIFICATION: I certify that I have read this application and instructions and that to the best of my knowledge the information given is correct and complete. I understand that if it is later determined to be otherwise, my application will be invalid. I understand that before an admission decision can be made, completed applications, fee, and all scholastic records must be on file.

Signature\_\_\_\_\_ Student ID#\_\_\_\_\_ Date\_\_\_\_\_



**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM  
(FA26-SU27 SURT Class)**

Please number all programs you are applying for in the Health Sciences & Business Technology Division by placing a number for your preference. (example 1, 2, 3, 4) *\*You must complete a separate application for each program. \**

\_\_\_\_ Surgical Tech - Lafayette                      Respiratory                      \_\_\_\_  
\_\_\_\_ Surgical Tech - Alexandria

Legal Full Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

List any other names under which your records may be filed: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Cell Phone \_\_\_\_\_ Alt. Phone \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ Email address \_\_\_\_\_

Are you currently enrolled in a college or university other than LSUE?    Yes \_\_\_\_\_    No \_\_\_\_\_

If so, please specify institution and location \_\_\_\_\_

**ALL COMPLETE TRANSCRIPTS FROM OTHER UNIVERSITIES MUST BE SENT TO HEALTH SCIENCES AS SOON AS THE SEMESTER ENDS.**

List all colleges, universities, or hospital-based programs which you have previously attended in chronological order. All institutions must be listed regardless of whether credit was earned or desired. Failure to indicate attendance at another college or university may result in admission being denied or subsequent dismissal.

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

Have you completed all the prerequisite courses for the Surgical Technology Program?                      Yes \_\_\_\_\_ No \_\_\_\_\_

Will you be complete with prerequisites by the end of the summer semester of application period?    Yes \_\_\_\_\_ No \_\_\_\_\_

List all courses in which you are currently enrolled and if not at LSU Eunice the college/university in which you are enrolled for the course(s). \_\_\_\_\_

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

**DOCUMENTATION OF HEALTHCARE DEGREE (if applicable)**

Please list all applicable (and attach copy of documentation to validate):

Professional Credentials: \_\_\_\_\_

Degree(s): \_\_\_\_\_



**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM  
(FA26-SU27 SURT Class)**

**DIVISION OF HEALTH SCIENCES & BUSINESS TECHNOLOGY  
TRANSCRIPT RELEASE FORM**

THIS IS NOT AN APPLICATION FORM. THIS IS ONLY A REQUEST FOR DOCUMENTS TO BE TRANSFERRED TO THE DIVISION OF HEALTH SCIENCES & BUSINESS TECHNOLOGY.

Name: \_\_\_\_\_ Student ID \_\_\_\_\_

I have completed an application for admission to:

- \_\_\_\_\_ Nursing
- \_\_\_\_\_ Radiology
- \_\_\_\_\_ Respiratory
- \_\_\_\_\_ DMS
- \_\_\_\_\_ Surgical Technology – Lafayette Campus
- \_\_\_\_\_ Surgical Technology – Alexandria Campus

Please forward copies of the following documents to the Division of Health Sciences & Business Technology for each program applied to:

\_\_\_\_\_ College transcripts from: (list colleges)

LSU Eunice \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand it is my responsibility to ensure that all required documents are received by the Division of Health Sciences & Business Technology.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name



**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM  
(FA26-SU27 SURT Class)**

**TECHNICAL PERFORMANCE STANDARDS FOR ADMISSION**

(Please keep this form for your records. Do not return with application.)

Students accepted and progressing in the SURT program must be physically capable of successfully performing the following standards related to the occupation safely, accurately, and expeditiously. Any physical limitations incurred by a student that may restrict or interfere with satisfactory performance of any of the standards listed below may result in inability to comply with course objectives. Surgical Technology is a practice discipline with cognitive, sensory, affective, and psychomotor performance requirements. Based on those requirements a list of "Performance Standards" has been developed. Each standard has an example of an activity or activities that a potential student will be required to perform while enrolled in the program. These standards are a part of each course and of a surgical technologist's professional role expectation.

**1. Visual Acuity**

- Distinguish between small objects within the sterile field and outside of the sterile field.
- Perform necessary procedures involving assembling equipment, instruments, drills, and other necessary items.
- Be able to load needle holders with small sutures and needles.
- Read surgeon's preference cards and instruction manuals.
- Perform data entry tasks using computer terminals.
- Help during insertion of needles or catheters into small anatomical structures.

**2. Hearing Acuity**

- Hearing must be sufficient to communicate with others.
- Hear and retain instruction from surgeon, OR personnel, and instructor.
- Hear and retain information to relay to others.
- Hearing must be sufficient to answer telephones and intercoms in the operating room and department.

**3. Speaking Ability**

- Possess effective verbal, reading, and writing skills to be able to communicate effectively with healthcare members and patients
- Speak clearly and loudly enough to be understood by a person in the operating room or on the phone and intercom.
- Converse with surgeons, operating room personnel, classmates, and instructor using good communication skills.

**4. Manual Dexterity**

- Must be able to grasp and manipulate small objects required to perform job function.



**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM  
(FA26-SU27 SURT Class)**

- Must be able to hold and maintain instrumentation in one position for long periods of time.
- Must be able to turn hands palm-up and palm-down.

**5. Physical Stamina**

- Work standing 80-100% of the time.
- Lift 20 to 25 lbs.
- Push, pull, bend, and stoop routinely.
- Help transport and transfer patients to the OR table.
- Help with positioning patients for surgical procedures.
- Maintain balance while performing job functions.
- Must be able to move freely and feel comfortable in confined areas.
- Must not have any open wounds conditions on hands and/or arms.
- Must be able to function without eating for periods of 6-7 hours.

**6. Adaptive Ability**

- Complete required tasks/function under stressful conditions.
- Must be flexible to changes in assignments or tasks.
- Perform independently and safely with minimal supervision
- Interact appropriately with diverse personalities.
- Be able to multi-task and remain focused.
- Must be able to remain calm under stressful conditions



**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM  
(FA26-SU27 SURT Class)**

**SURGICAL TECHNOLOGY SELECTION PROCESS  
SUMMARY**

I have been informed that:

1. Failure to follow instructions on the Surgical Technology program application will result in a cancelled application.
2. In order to be considered by the Selection Committee, I must have applied to and been accepted by LSUE.
3. I must have academic records from the current semester in the LSUE Office of Health Sciences and Business Technology in the Health Technology Building prior to the meeting of the Selection Committee or my application will be considered incomplete.
4. Selection to the Surgical Technology Program is competitive and I have read the selection criteria.
5. I am responsible for travel associated with clinical practice.
6. I may be assigned to any clinical education setting with the program. I understand that placement of my clinical assignment is based on availability of clinical sites and required types of surgical cases each facility offers. I understand that attending orientation at my assigned clinical education setting may be required. I also understand that the furthest distance of travel between the campus and a clinical site is varied dependent upon my home base.
7. I am responsible for submitting specific immunization and health records. I am subject to a drug test and submitting a criminal background check form at my own expense.
8. I must have CPR – certification by the date provided at orientation following the selection process. The responsibility for obtaining this certification is mine.
9. I may obtain financial assistance from the Office of Financial Aid.
10. I understand the health risks associated with exposure to bloodborne pathogens, ionizing radiation, and bone cement that are found in many of the surgical facilities I will be in.
11. I understand the importance of attending professional meetings once selected into the program.

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Please print your name clearly

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Primary phone number

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Applicant's Signature

---

Secondary phone number

---

Date

---

E-mail address



**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM  
(FA26-SU27 SURT Class)**

**IMPORTANT PLEASE READ**

**ATTENTION APPLICANTS FOR CLINICAL PROGRAMS**

- You must complete the correct FAFSA for the year you wish to apply. (Example: You must file the 2026-2027 FAFSA form if you are applying for aid for the Fall of 2026).
- If you are relying on financial aid to pay your fees, you are **STRONGLY** urged to complete your FAFSA and submit all requested documents by February 1<sup>st</sup>. Failure to meet this deadline may require you to be responsible for ALL required fees (tuition, books, supplies, etc.)
- You must submit a Financial Aid Appeal Form (<https://www.lsu.edu/financialaid/finaidforms.php>) if you have attempted over 123 hours, which include any withdrawals (W's), failed courses (F's), or academic bankruptcy on your official transcript. For more information, go to <https://www.lsu.edu/studentaffairs/finaidappeals.php>.
- You must be fully admitted to the University. You must submit to the LSU Eunice Office of Admissions official transcripts from every college or university at which you were previously enrolled.





**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM  
(FA26-SU27 SURT Class)**

## **NLN NEX EXAM INSTRUCTIONS**

ALL applicants are required to take the NLN NEX test. Please follow the instructions in this packet. If you have questions about purchasing the exam or creating an account with NLN, please contact NLN Assessment Services. Customer Service is available Monday through Friday from 8:00 a.m. to 5:00 p.m. Eastern Time. Call 800-732-8656, ext. 2, or text 202-934-0801 to reach Customer Experience.

**A composite score of at least 150 is mandatory, with a minimum of 50% required in each individual category.**

### **HOW IS THE TEST GIVEN?**

The test is a computerized examination purchased through NLN and administered in the LSUE Testing Center, in the library (100-C) on the LSUE campus. No proctored testing will be allowed from outside the LSUE Testing Center. Students must purchase the exam through NLN and pay to reserve a test date with the LSUE Testing Center. The exam has three sections (Verbal, Math, and Science). You will have 60 minutes to complete each section.

### **HOW DO I STUDY FOR THE TEST?**

The NEX study materials are available from NLN. Follow the link below for more information.

<https://www.nln.org/education/assessment-services/student-resources>

### **HOW MUCH DOES THE TEST COST? (Prices are subject to change.)**

- \$52.50 with NLN
- \$15.00 with Testing Center

### **TESTING CENTER ADMISSION & REQUIREMENTS**

Please report to the LSUE Library, Room 100-C, at least 15 minutes prior to your scheduled testing time. To maintain the integrity of the testing environment, please adhere to the following policies:

- **Punctuality:** **Late arrivals will not be permitted to test.** Students who miss their scheduled testing window will not be admitted to the Testing Center.
- **Rescheduling:** If you miss your test, you must contact and schedule an appointment with the Program Director(s) for each specific program to which you are applying for selection.
- **Required Materials:**
  - Identification: You must present a valid, physical photo ID. Digital IDs on phones are not acceptable.
  - Please bring two standard, sharpened, wooden (#2) pencils.
- **Prohibited Items:**
  - Cell phones and electronic devices, including flash drives and smart devices
  - Mechanical pencils, pens, notes, books
  - Calculators
  - Watches
  - Food, beverages, gum, water bottles
  - Hats, caps, and other headgear
  - Carried-in clothing



**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM  
(FA26-SU27 SURT Class)**

- Bags, backpacks, purses

**NOTE:** NLN Assessment Services has changed testing platform providers and is in the process of moving scores to [the new site](#). Students with previous NLN accounts will need to create a NEW account using the same email address as the old account in order to access scores.

**HOW TO CREATE AN ACCOUNT WITH NLN:**

1. Navigate to the Assessment Services landing page:  
<https://www.nln.org/education/assessment-services>
2. Click on the link entitled **LOG IN TO THE STUDENT TESTING WEBSITE**.
3. Click the **Sign-Up** button in the upper right corner.
4. Enter your name, email address, password, and institution.
5. Click **Sign-Up**.

**HOW TO PURCHASE THE NLN NEX EXAM:**

1. Log in to your student account at <https://nln.assess.com>
2. Click **STORE**:
3. Check to be sure you selected the correct exam and ensure it says **Onsite**.
4. Click **Learn More**.
5. Click **Add to Cart**.
6. Click **View Cart**.
7. The NLN has a strict NO REFUND policy. Please make sure you have chosen the correct exam before completing your checkout. Once a purchase is made, it is final. **NO REFUNDS**.
8. Click **Proceed to Checkout**.
9. Click **Confirm Purchase**.
10. Enter your **credit card information**.
11. Click **Proceed to Checkout**.
12. You will receive a "**Payment successful**" message indicating that you've made your purchase. You will also receive an email confirmation and a printable receipt.
13. Click "**Go to Purchases**" to view your exam. You will also receive an **email confirmation** along with a printable receipt.
14. Print one copy of your receipt to include with your application.
15. The exam must be paid for **AND** scheduled by **MARCH 1<sup>ST</sup>** for the Spring administration, **SEPTEMBER 14<sup>TH</sup>** for the Fall administration, and **JULY 1<sup>ST</sup>** for the Summer administration (Respiratory Care).
16. Continue with instructions to reserve your seat in the LSUE Testing Center.

**Proof of purchase of the NLN NEX exam and an email confirmation from the LSUE Testing Center of the scheduled test are required at the time of application submission.**



**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM  
(FA26-SU27 SURT Class)**

**HOW TO SCHEDULE WITH THE LSUE TESTING CENTER  
(SEATING IS LIMITED SO SCHEDULE EARLY FOR MORE OPTIONS.)**

Go to the LSUE Testing Center Website at <https://www.lsue.edu/testing-center/> to schedule and pay for the proctoring of the NLN NEX Exam.

Under **“TESTING”** choose **“SCHEDULE AN EXAM”**

1. Choose a group: select **“LSUE Student”**
2. Choose a group: select **“NEX (Nursing Entrance Exam)”**
3. Choose an exam: select **“NEX (\$15.00)”**
4. Choose a date: Choose the same date that you purchased (**check NEX receipt**)
5. Choose a time: Choose the same time that you purchased (**check NEX receipt**)
6. Name, Email, LSUE Student ID Number, Phone Number
7. Agree to the Exam Guideline Acknowledgement
- 8. ADD TO CART**
9. **CHECK OUT** to complete the registration process. Make sure you receive an email confirmation of your appointment.
10. **Print one copy of your receipt to include with your application.**

\*You must create an account with NLN and purchase the exam **BEFORE** scheduling with the Testing Center.

***If you do not schedule your exam for the same day and time that you purchased, your registration will be deleted, and fees will be forfeited.***



**SUMMER 2025 SURGICAL TECHNOLOGY PROGRAM APPLICATION FORM  
(FA26-SU27 SURT Class)**

**APPLICATION CHECKLIST**

All program applications must be submitted to LSUE Health Sciences, T-104, by **July 1st**. Incomplete applications will not be considered for selection.

**Completed applications must include the following:**

- ☐ A completed program application form
- ☐ Documentation of your healthcare degree (if applicable)
- ☐ Transcript Release Form
- ☐ Application Summary
- ☐ Proof of purchase for the NLN NEX exam
- ☐ Proof of your scheduled exam from the LSUE Testing Center

**\*\*Important Notes:\*\***

- If you are not currently enrolled at LSUE, you must apply for general admission to the university.
- If you are currently enrolled at a university other than LSUE, you must send a copy of your transcripts immediately after your final grades are posted.