



SURGICAL FIRST ASSIST PROGRAM APPLICATION

One Stop Student Services – onestop@cw.edu – 208.562.3000 phone – 888.562.3216 fax
P.O. Box 3010 – Nampa, ID 83653 – cw.edu

This form is used to apply for admission to the Surgical First Assist program. Students interested in the program must first apply for admission to the College of Western Idaho. Admission to the college does not guarantee admission to the Surgical First Assist program. Each spring semester, 15 students will be admitted to the program. If not admitted, applicants must reapply each year.

COLLEGE OF WESTERN IDAHO - SURGICAL First Assist Program APPLICATION

LAST NAME	FIRST NAME	M.I.	CWI STUDENT ID		
ADDRESS	CITY	STATE	ZIP	CWI EMAIL	
PHONE NUMBER (INCLUDING AREA CODE)			OTHER PREVIOUSLY USED NAMES		

APPLICATION INSTRUCTIONS

- 1) Admitted as a CWI Student at cw.edu/apply.

You must read and complete all the steps to ensure a complete application. Only complete applications will be reviewed. Applications for the program Spring 2025 start will be accepted beginning **Sept. 2, 2024**, through the application deadline **Dec. 13, 2024**. Applications will not be accepted after the deadline. It is **STRONGLY RECOMMENDED** you complete the following steps early to ensure all materials have been received. **Please follow the instructions carefully and check off each item on the application as you complete it.**

STEP 2: REQUIRED APPLICATION SUBMISSION MATERIALS

- 1) Surgical First Assist Program Application (this form) – Only complete applications will be considered.
- 2) Enclose a copy of your most current “My Progress” report – your Student Success Advisor can print a copy for you. Use this report for scoring on the Surgical First Assist application.
- 3) CWI Professional Reference Forms – A minimum of two professional references are required. References require the reference form; however, reference letters will be accepted **in addition** to the form. Professional references must be from a surgeon whom you have worked with. If possible, one reference from **a general surgeon is preferred**.
- 4) Enclose Employment Verification Form documenting at least two years of current employment as a Certified Surgical Technologist. This form must be completed by your supervisor.
- 5) Enclose copy of your unofficial transcripts.
- 6) Enclose copy of your current NBSTSA certificate. Expired or lapsed certifications will not be accepted.
- 7) A current BLS certificate is also required. Please enclose a copy of your certificate.
- 8) Signature on the final page acknowledging that your attendance is required at the mandatory Program Overview.

STEP 3: OPTIONAL MATERIALS

While not required, this is a competitive program. These materials count toward your ranking points.

- Include copies of CURRENT Healthcare Certifications (See step 5). Expired or lapsed certifications will not be accepted. A current BLS certification is also required.

STEP 4: RECORD YOUR OVERALL GPA from your most recent college transcripts

Please calculate your overall GPA from your most recent college transcripts.

STEP 4 Scoring:..... Possible Points (4): _____

STEP 5: VERIFICATION OF CURRENT AND UNINCUMBERED HEALTHCERTIFICATION

While healthcare certifications are not required to apply, certifications do count towards your ranking points. Include a copy of your current certifications. Expired or lapsed certifications will not be accepted.

CERTIFICATION	Points
(Certified Registered Central Service Technician) = 2 points	
EMT (Emergency Medical Technician) = 2 points	
OTC (Orthopedic Technologist Certified) = 2 points	
Paramedic = 3 points	
RN= 2 points (must still be a CST)	
Other healthcare certifications = 1 point	

STEP 5 Scoring: Enter the points for all current certifications held..... Total Points: _____

STEP 6: References and employment verification

The reference forms and employment verification must be submitted in individually SEALED ENVELOPES with this application. Reference professionals should return the reference form to the applicant in a sealed envelope with their signature across the back of the envelope to ensure it hasn't been opened. Professional references must be from surgeons whom you have worked with. **If possible, one of your references should be from a general surgeon.** Due to the anonymity of this section, you will not be able to score this area. Each positive reference is worth 10 points.

Employment verification must be from a minimum of one recent supervisor and must include a minimum of two years. You may include more than one employment verification if you have worked at more than one facility over the previous two years.

STEP 7: INTERVIEW

If you are one of the top scoring applicants, you will be selected for an interview. The applicant pool varies every year, so there is no way to offer a baseline or average score for applicants to shoot for. If you are selected to interview, there are an additional 30 possible points awarded in that process.

STEP 8: SIGN THIS APPLICATION

I certify all the information provided in this application is true and correct to the best of my knowledge. I understand falsification of information is cause for denial of admission/expulsion. Illegal use, possession, and/or misuse of drugs or a felony conviction may prevent me from being admitted into the Surgical First Assist program.

 STUDENT SIGNATURE DATE

STEP 9: SUBMIT THIS APPLICATION AND SIGN AT THE END OF STEP 9

1) Together, with this application, submit all of the materials required in Step 2 in one, large, sealed envelope to CWI prior to **Dec. 13, 2024, by 4:00 p.m.** for consideration. **Note**** If mailing application, please allow for additional time, so that materials are received by the deadline.

2) Write **your name** and "**Surgical First Assist Program Application**" on the envelope.

3) **Hand-deliver ONLY to:** **OR** **Mail ONLY to:**

College of Western Idaho
One Stop Student Services
Ada County Center Lynx Building
9300 W. Overland Rd.
Boise, ID 83709

College of Western Idaho
One Stop Student Services: MS 5100
P. O. Box 3010
Nampa, ID 83653

NO ADDITIONAL MATERIALS WILL BE ACCEPTED TOWARD YOUR APPLICATION AFTER THE SUBMISSION OF YOUR PACKET.

I understand that, as a Surgical First Assist applicant, I am required to attend a **Mandatory Program Overview with Surgical First Assist Faculty, on **Wednesday, Nov. 13**, at 5 p.m. MST via ZOOM. The ZOOM meeting invitation will be sent out just prior to Nov. 13 using the CWI student email address. Please make sure your email address and phone number are legible.**

STUDENT SIGNATURE _____ DATE _____