



# STUDENT ACKNOWLEDGEMENT

## School of Health, Radiation Therapy

Submit with application to: BCIT Admissions, SW1  
3700 Willingdon Ave, Burnaby, BC V5G 3H2  
F 604.431.6917

**Instructions:** 1) Save this PDF to your desktop, 2) Open with Adobe Reader or Adobe Acrobat, 3) Complete all required fields, 4) Save, 5) Close PDF then re-open to ensure the content you filled in has saved, 6) Submit to BCIT.

## RADIATION THERAPY BACHELOR OF SCIENCE PROGRAM

Student acknowledgement of program requirements: (this form is part of the student confirmation package and requires signature and return for final program acceptance).

I, \_\_\_\_\_ a student enrolled in the Radiation Therapy program at BCIT, agree to participate in classroom, laboratory, and clinical exercises that impart necessary knowledge and skills for practice in the field.

I understand that my education includes non-invasive exercises such as:

- participation in clinical simulations;
- the making of an immobilization device (impression) by fellow students;
- participation in lifting and moving labs that will require me to move a fellow student and/or be moved by fellow students;
- other relevant lab or clinical activities as provided by the instructors.

I understand that this program includes clinical site placements during terms 3, 4, and 6, and that I could be scheduled to the Vancouver Centre (600 W 10th Ave.); Fraser Valley Centre (13750 96th Ave., Surrey); Abbotsford Centre (32900 Marshall Rd.), Vancouver Island Centre (2410 Lee Ave., Victoria), Kelowna Cancer Center (399 Royal Ave., Kelowna) or Prince George Cancer Center (1215 Lethbridge St., Prince George). I also understand that all moving and residency costs are my responsibility when scheduled away from my home area.

The clinical terms run as follows (subject to change):

- **Term 3:** August – December (15 weeks)
- **Term 4:** May – August (16 weeks)
- **Term 6:** January – April (17 weeks)

Although students are given complete program information in the first week, this information sheet is meant to highlight some of the experiences a student can expect. By signing on the next page you have agreed to the above information and are willing and able to participate fully as required.

## STUDENT ACKNOWLEDGEMENT OF PHYSICAL REQUIREMENTS:

Radiation therapy is a physically demanding profession. It requires a high level of manual dexterity, physical strength, controlled sensitivity to odours and sights associated with the human body, and the ability to work in a busy and sometimes stressful environment.

Radiation therapy practitioners must be able to:

- exert fine motor control;
- lift and move incapacitated patients or heavy equipment;
- stand for long periods of time;
- demonstrate good visual depth perception, discern grey colour scale, full visual field including central and peripheral vision in both eyes;
- have normal hearing ability or aided hearing.

A physical limitation is defined as a condition that impedes a person's ability to walk or stand for long periods of time, ability to use your senses such as sight, hearing, or touch, or impaired ability to communicate. The following conditions are considered a physical limitation:

- Limited vision including peripheral or central vision loss or impairment that cannot be aided
- Loss of hearing in one or both ears that cannot be aided
- Impaired or loss of physical mobility; loss or diminished physical strength
- Impaired dexterity or strength that requires mobility aids
- Impaired speech or cognitive processing due to a neurological or physical cause

**DECLARATION**

I am aware of the physical requirements for the Radiation Therapy program as describe above. I confirm that I possess the physical strength and attributes to perform these functions.

I hereby also acknowledge I am aware of the program requirements as stated and agree to participate in classroom, laboratory, and clinical practicums that impart necessary knowledge and skills for practice in the field. I also agree to abide by the clinical site selection process for the clinical practicums.

I also understand that once I have been provisionally accepted, I will be required to submit a criminal record check and complete an immunization form. The BC Health Authorities require students to be fully immunized in order to go out to their clinical practicum. I understand that failure to complete this form will prevent me from attending the Radiation Therapy program.

I recognize that in order to have current CPR certification prior to the first clinical practicum, it is best to update my CPR HP certification just prior to the start of the program.

Signature	Date
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