**UTAH VALLEY UNIVERSITY RESPIRATORY THERAPY PROGRAM APPLICATION INFORMATION**

To secure a Spring 2026 seat in the Respiratory Therapy Program – Class of 2027, all application materials must be submitted by 11:59pm, September 19, 2025.

Thank you for your interest in the UVU Respiratory Therapy Program. Admission to the program is contingent upon satisfactory results of both a federal criminal background check and a drug screen. Information on how to obtain both reports will be provided upon acceptance. The Respiratory Therapy Program has sole discretion to deny acceptance based on information contained in either report.

The UVU Respiratory Therapy Program is a very rigorous, time-intensive program. Students are expected to attend all classes, labs, and clinical assignments as scheduled. Classes, labs, and clinicals are not flexible and if missed could jeopardize success in the program. If you are considering working during the program, a high level of flexibility will be required in your work schedule. The Respiratory Therapy Program requires a full commitment each semester, from the first day of class until the last day of class.

1. **Submit a Utah Valley University Application**

Acceptance to UVU is required prior to applying to the UVU Respiratory Therapy Program. Application to UVU can be completed online at [www.uvu.edu/admissions](http://www.uvu.edu/admissions).

1. **Submit a Respiratory Therapy Application**

Following admission to UVU, an application must be submitted to the Respiratory Therapy Program. All applications are submitted via email to **lesley.stevenson@uvu.edu**. Please complete the application form in its entirety and include all application materials prior to sending. Before submission, please save your application as FIRST NAME.LAST NAME.pdf. In your application email, please be sure to attach the following:

* Completed application form (below)
* Essay
* TEAS Scores
* TOEFL Score (if applicable)

1. **Notification of Decision**

All applicants will be contacted for an interview or notified of non-acceptance via myUVU email. Please check your myUVU email.

* If you are offered an interview, you must respond via email, by the specified deadline, with either an “accept” or “decline” of the offer to interview. You will not get a second chance if you fail to respond by the specified deadline.
* All responses will be verified by a return email. If you accept the interview, you will be given the specific day and time of your interview. No further emails will follow, and you will be expected to arrive on the day and time identified. No interviews will be rescheduled. Failure to attend the scheduled interview will result in a non-acceptance for this application cycle.
* All interviewed applicants will be notified of final admission decisions via myUVU email.

1. **Eligibility**

To be eligible for consideration, applicants must have:

* Been accepted to UVU.
* Earned a final grade of a C or better without repeating any of the prerequisite courses more than once within the past five years. If you repeated the course, the most recent grade will be used.
* Taken the TEAS test. (We use the first or second test taken within a five-year time frame.)

1. **Transferring Credits to UVU**

It is your responsibility to have official transcripts of all previous college course work sent to the UVU Admissions Office. Following review, official transcripts will be posted on your UVU academic record. This process may take up to three weeks; please prepare accordingly.

1. **Prerequisite Course Work Information**

All prerequisite course work must be completed (or in progress) with a C grade minimum by the application deadline. It is your responsibility to ensure all grade information has been submitted to the UVU Admissions Office with sufficient time for review by the Respiratory Therapy Program.

1. **Acceptable College Credits**

Although there are a variety of ways to obtain college credit, not all are appropriate for the Respiratory Therapy Prerequisites. Please be aware of the following credits and/or grades, and how they may affect your eligibility to apply:

**ACT Scores**: At UVU, ACT scores are used to determine placement into a subject, typically they do not waive prerequisite courses.

**Repeating Course Work**: Repeating a course for a better grade is an option and does not affect your UVU Respiratory Therapy application adversely; however, only one repeat, per course, in a five-year time frame will be allowed. The second attempt is used for the application. Once a course is repeated, grades for the first attempt will not be used to satisfy **any** degree requirement. Therefore, if the grade for your **most recent attempt** falls below a C grade, you are ineligible to apply.

**Pass/Fail or Credit/No Credit Grades**: With most points awarded being based on the prerequisite GPA, only letter grades are acceptable for prerequisites.

**AP Credits**: AP scores of three, four, or five can be accepted for prerequisite requirements. These must be posted to your UVU transcript as credit. For purposes of calculating the GPA, a score of 3=B+, 4=A-, and 5=A.

**Course Substitutions**: In order to give the student the best opportunity to have a competitive GPA, there are some courses which may be used as a substitution for a prerequisite if a higher grade was received in the substituting course, and the grade in the prerequisite course meets Respiratory Therapy standard minimum grade. The following is an example of appropriate suggestions:

**ENGL 1010**: If ENGL 2010 or 2020 has been completed with a better grade than the ENGL 1010, that course can be substituted bur the prerequisite ENGL 1010 course.

All other substitutions will be determined on an individual basis by the Department of Respiratory Therapy Admission Committee.

1. **TEAS Test Information**

If you have not yet taken the TEAS (Test of Essential Academic Skills) you must do so to submit the application. One TEAS test per application is allowed. Any score below 50% makes the test ineligible. If you have two scores, you will choose which of the completed tests to submit. There will be no mixing of test scores. Scores are valid for five years unless the newer version of the TEAS is created by ATI. If you submit expired TEAS scores, they will not be used in reviewing your application and could result in your ineligibility.

1. **Interview Process**

Following review of TEAS and GPA scores, top applicants are selected to interview. The interview process is standardized to ensure that each candidate interviewed has an equal opportunity to be objectively evaluated. The interview process takes approximately two hours to complete. An interview does not guarantee acceptance. From those interviewed, the top candidates will be selected, notified, and offered positions in the Respiratory Therapy Program for the semester the student has applied for. A group of alternates will also be selected and notified. If accepted, you must meet all deadlines. Failure to do so will forfeit your position, which will then be offered to an alternate.

Read the material and instructions sent with your invitation to interview. Prepare as you would for a professional job interview. At UVU, the Career and Internship Center in LC 409 helps students with professional interview skills.

1. **Acceptance Information**

Acceptance is contingent upon the following:

* Letter of acceptance after completion of the interview.
* Submitting all requested documentation by the deadlines.
* Completion of required immunizations, current CPR certification, and physical exam.
* Providing satisfactory results of both a federal background check and drug screen. The background check will include a record of employment and all non-juvenile arrests and convictions, including sex offenses. UVU has sole discretion to deny entrance based upon the information contained in either of these two reports.

Due to limited space within the Respiratory Therapy Program, not all qualified applicants will be accepted. Alternate candidates will be notified, in rank-order, if openings occur prior to the beginning of the semester. Candidates and applications will not be forwarded to subsequent application cycles. A new application must be completed to be considered in another application cycle. If not accepted, an applicant may interview only twice within a five-year time frame.

1. **Scholarship Information**

Information and applications regarding scholarships, including all need-based, privately funded scholarships are available on the Financial Aid website at <http://www.uvu.edu/scholarships>.

**UTAH VALLEY UNIVERSITY RESPIRATORY THERAPY PROGRAM APPLICATION**

Please read and follow all instructions and complete the application in its entirety. Incomplete applications will not be considered.

**Personal Information:**

|  |  |
| --- | --- |
| **UVU ID #** |  |
| **First Name** |  |
| **Middle Name** |  |
| **Last Name** |  |
| **Phone Number** |  |
| **myUVU Email** | \*ALL email contact will be via myUVU email |
| **Mailing Address** |  |
| **City, State, Zip Code** |  |

All applicants will be notified of either a scheduled interview or non-acceptance through myUVU email. Begin checking your myUVU email within a week of the application due date. Forwarded email is sometimes delayed so check your myUVU email to avoid missing vital application information.

**SECTION 1: COLLEGE TRANSCRIPTS**

Prerequisite courses take at UVU, and prerequisite courses transferred from all other institutions that have already been reviewed by the Admissions Office and are listed on your Utah Valley University transcript and in the computer system and do NOT require additional attached documentation. Please select the appropriate situation.

* All prerequisites were taken at UVU. (no transcript required)
* All courses have been reviewed by admissions and are included on official UVU transcripts.

**SECTION 2: PREVIOUS DEGREES**

Please list any previously completed college degrees:

Degree: \_\_\_\_\_\_\_\_\_\_ University or College: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Completion: \_\_\_\_\_\_\_\_\_\_\_\_

Degree: \_\_\_\_\_\_\_\_\_\_ University or College: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Completion: \_\_\_\_\_\_\_\_\_\_\_\_

This information helps your advisor know if general education requirements covered by your previous degree have been met.

**SECTION 3: TEAS Test**

* I have submitted the test results page only of my TEAS test with a score of 50% or higher in each section.

If you have not taken the TEAS exam, you may schedule the exam with the testing center. Please contact your advisor for any questions about the TEAS exam or for study material. The exam results page must be attached for the application to be eligible.

**SECTION 4: PREREQUISITE COURSE WORK**

Due to the nature of the Respiratory Therapy Program, all but one general must be completed to apply.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PRIMARY PREREQUISITE** | **PREFIX AND COURSE #**  (as identified on campus where taken) | **DATE TAKEN OR PLANNED** | **LETTER GRADE** | **INSTITUTION** |
| ENGL 1005 or 1010 |  |  |  |  |
| ENGL 2010 |  |  |  |  |
| BIOL 1610 |  |  |  |  |
| Quantitative Literacy Requirement |  |  |  |  |
| CHEM 1110 |  |  |  |  |
| Human Anatomy + Lab (ZOOL 2320/ 2325) |  |  |  |  |
| Human Physiology + Lab (ZOOL 2420/ 2425) |  |  |  |  |
| Microbiology + Lab (MICR 2060/2065) |  |  |  |  |
| PSY 1010 or 1110 |  |  |  |  |
| RESP 1540 |  |  |  |  |

**SECTION 5: CRIMINAL HISTORY**

Have you ever been convicted of a felony of misdemeanor? No \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_

If yes, include a full disclosure of all circumstances involved, including, dates and/or times, any resolution reached. Attach a written explanation page to the application

**SECTION 6: ENGLISH LANGUAGE**

Is English your native language? No \_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_

If no, please attach documentation of a TOEFL score. Application to the program is contingent upon providing a minimum written score of 77. TOEFL score must not be older than 2 years.

**SECTION 7: ESSAY QUESTIONS**

Each candidate is required to submit an essay as part of the application process. In your introduction, please tell us about yourself. Essays should be 1-2 pages, APA 7 format, double-spaced, in 12-pt font, and address the following questions:

* Why do you want to be a respiratory therapist?
* How did you hear about the UVU Respiratory Therapy Program?
* Why did you choose the UVU Respiratory Therapy Program?
* How have you enhanced your knowledge of this profession?
* What are your personal and professional goals?

Essays must be typed, proofread, and emailed with completed application in PDF or Word format.

**SECTION 8: MISCELLANEOUS**

Clinical rotations may begin at 6:00, 6:30, or 7:00 am or pm. Clinical locations vary and may include any facility between Nephi and Bountiful.

* Do you own a car? No \_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_
* If you do not own a car, do you have transportation available? No \_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_
* Have you visited a hospital Respiratory Care Department No \_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_

or taken a formal tour?

* Have you performed any healthcare related volunteer work? No \_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_
* Do you have experience and/or training in healthcare or No \_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_

working with persons who are ill?

If yes, please explain at the end of your essay submission.

**SECTION 9: SIGNATURE**

By signing this application, I understand that:

1. Only complete applications will be reviewed; it is MY RESPONSIBILITY to submit, by the deadline, all required documents, including transcripts, TEAS score results, and TOEFL results (if English is not my native language); I assume full responsibility, as well as any consequence, if application instructions are not followed.
2. If accepted, I will be expected to make the Respiratory Therapy Program my first priority. The Respiratory Therapy Program cannot make accommodations to fit my work schedule. Flexibility in my work and family schedule is MY responsibility. The Respiratory Therapy Program requires full commitment each semester, from the first day of class until the last day of class.
3. I am strongly encouraged to acquaint myself with the demands associated with Respiratory Therapy. UVU Respiratory Therapy students are expected to demonstrate the ability to perform functions like what would be expected in an employment situation. I must be able to tolerate physically and emotionally taxing activities and perform appropriately during stressful situations, to meet the demands of the program and eventually the profession.
4. If accepted, students will be required to pass a universal background check prior to receiving clearance to register for classes.
5. To comply with the current recommendations given by the Utah State Division of Occupational and Professional Licensing (DOPL), as well as Clinical Affiliate Agreements at facilities where Utah Valley University respiratory students participate in clinical placements, the UVU Respiratory Therapy Program are required to have current and accurate drug screens on each student attending classes and clinical in the Respiratory Therapy Program. Students must complete a drug screen upon admission to the Respiratory Therapy Program.
6. Students are at risk for exposure and possible transmission of diseases because of their contact with patients or with the infective material of patients. Some diseases are preventable by vaccination (e.g., Hepatitis B), while others require early detection and effective treatment to prevent harm to the student and transmission to others (e.g., Tuberculosis). All students entering the Respiratory Care Program will require immunization and TB testing compliance. Before receiving clearance to register for clinical courses, students are required to submit documentation that all required immunizations and TB test results are complete and current. Immunization requirements are subject to change based on agency requirements for participation in clinical sites.
7. Students participating in clinical experiences must meet affiliated clinical agency requirements for Basic Life Support certification. Students are responsible for renewing certification and providing evidence of continuing certification without lapse. Students are only allowed to register when all requirements are met, including a copy of their current BLS/CPR certification which does not expire during the semester for which they are registering. The certification must be for healthcare providers or professional rescuers and through an approved program through the American Heart Association
8. I have read the complete instructions and understand the full requirements for acceptance into the Respiratory Therapy Program. I know that I will be contacted via myUVU email only for an interview and understand that if I fail to respond in the scheduled time, or fail to follow through with any deadlines, I will forfeit my interview, candidacy, and possible acceptance.
9. I must submit this form and all other application materials to **lesley.stevenson@uvu.edu** by the deadline dates as indicated.

Applicant Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant UVU ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_