

**REQUIREMENTS FOR CERTIFICATION AS A
MEDICAL LABORATORY TECHNICIAN – MLT (AMT)**

1. Applicant shall be of good moral character.
 2. Applicant shall meet one of the following requirements (*Check one box only*):
 - A. COLLEGE OR UNIVERSITY PROGRAM
 1. Applicant shall be the holder of an associate degree in medical technology (or equivalent) from an accredited two-year college, or
 2. Applicant shall have completed at least two years (60 semester hours) of courses in any accredited college, including at least 25 semester hours in those disciplines that comprise medical technology and may include any chemical or biological science courses, as well as mathematics and/or courses in computer science, not to exceed 6 semester hours, plus six months of laboratory experience; or
 - B. PROFESSIONAL SCHOOL
 1. Applicant shall be a graduate of a medical laboratory school or program accredited by an organization approved by the US Department of Education, and must show evidence of having obtained an appropriate degree or certificate of completion; or
 2. Applicant shall be a graduate of a medical laboratory school or program in an institution accredited by a Regional Accrediting Commission or by a national accrediting organization approved by the US Department of Education, and must show evidence of having obtained an appropriate degree.
 - C. MILITARY TRAINING

Applicant has completed a 50-week US military laboratory procedures training program provided that the training credits were earned in, or have been accepted for transfer by, an accredited college or university leading to the award of an appropriate degree.
 - D. The AMT Board of Directors has further determined that applicants who have taken and passed another certification organization's generalist examination for medical laboratory technician may be considered for MLT (AMT) certification *without* further examination, provided that such exam has been approved by the AMT Board of Directors, and that the applicant has met the AMT training and experience requirements.
 - E. Applicant has taken and passed a generalist medical laboratory technician level examination for state licensure, provided that the examination has been approved by the AMT Board of Directors.
 3. All applicants applying under 3. A, B, C, *must* take and pass the AMT certification examination for Medical Laboratory Technologist (MLT).
- Note:** If applying under 2D or 2E, indicate which medical laboratory technician examination you have taken and passed. Furthermore, the waiver of the examination requirement permitted by 2D or 2E is only granted when the applicant is currently employed, or has recent experience (working in three of the last five years), as a medical laboratory technician.

INFORMATION AND INSTRUCTIONS TO APPLICANT

1. Please type or print all information **except** where signatures are required.
2. Please check the Requirement above under which you are applying.
3. Before submitting this application, make sure you have provided the following:
 - \$125.00 application fee
 - Official transcripts verifying education and/or graduation from MLT School, college or training program (with school seal or Notarized), or official documentation of military training
 - Foreign transcripts must be evaluated and original evaluation or notarized true copy must be submitted with the application.
 - All solid line areas completed by applicant; all dotted line areas completed by designated person
 - Complete names and address of employers for experience verification
 - Copy of other credentials you hold (for 3.D)
 - Application signed and dated by applicant on back page
 - Signed and dated examinee agreement
4. You will be notified upon approval of this application and informed of examination schedules.
5. An applicant who does not appear at his/her examination will be assessed a \$60.00 fee for rescheduling.
6. Applicant must present photo identification at time of testing.

PART I. PERSONAL INFORMATION

Full Name _____ E-mail _____	
Street Address _____ City _____ State _____ Zip + 4 _____	
Daytime Phone Number () _____ Date of Birth _____	
Maiden and/or any former names _____	
Name and address of nearest relative (do not list spouse) _____	

<p>Have you ever been convicted of a felony? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please include the following information with your application on a separate piece of paper: when was the felony, what was the felony, what court and the outcome and please be specific. Include copies of court documents if available. NOTE: This question must be answered for your application to be processed.</p>	
OPTIONAL INFORMATION	
Marital Status: Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/>	Sex: Female <input type="checkbox"/> Male <input type="checkbox"/>
Race/Ethnic Group: White <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/>	

PART II. EDUCATION AND TRAINING

**A. SECONDARY
SENIOR
HIGH SCHOOL**

Name/Address	Dates Attended	Graduation Date
G.E.D.:		
	Date of Certificate/City/State	

B. COLLEGE OR UNIVERSITY

Name/Complete Address	Dates Attended	Hours Completed	Degree Awarded

C. MEDICAL LABORATORY SCHOOL

Proof of graduation must be provided.

Name/Complete Address	Dates Attended	Year Completed	Degree/Diploma/Certificates

