

**Technical Standards for Admission and Continuation in the
Nuclear Medicine Technology Program**

**School of Health Technology and Management
Health Science Program
Stony Brook University**

I certify that I have read and understood the Nuclear Medicine Technology Program's Technical Standards for Admission and Continuation, and that I meet each of these standards with or without reasonable accommodations.

Signature

Social Security Number

Printed Name

Date

If you have questions concerning the aforementioned Technical Standards, please contact the Nuclear Medicine Technology Program. If you believe that you cannot meet one or more of the Technical Standards, contact the Office of Disability Support Services at Stony Brook University.