



**Hagerstown Community College Radiography Program  
Observation Verification Form**

**Job Shadowing Observation Experiences are to be completed between  
June 15<sup>th</sup> and December 15<sup>th</sup> of the application cycle.**

**Program Application Deadline: February 1<sup>st</sup>**

The Hagerstown Community College Radiography Program requires our prospective students to observe 8 hours of radiography- related procedures **in a hospital setting**, as completed by a registered radiologic technologist, so that they may gain a better understanding of their chosen career. Our goal is to further the profession of radiography by training quality radiographers who are passionate about their patients and their work. Please print and sign in the indicated space(s) below.

**Completed observation forms may be submitted in-person or via email to the HCC Admissions Office**

Admissions Office  
Hagerstown Community College  
11400 Robinwood Drive, ASA-401  
Hagerstown, MD 21742  
Email: [admissions@hagerstowncc.edu](mailto:admissions@hagerstowncc.edu)

Applicant Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Student ID #: \_\_\_\_\_

Name and Address of Hospital:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date(s) of Job Shadowing Experience: \_\_\_\_\_

**It is the expectation of the Radiography program faculty that prospective students will conduct themselves in a professional and appropriate manner for the duration of the job shadowing experience.**



In the space below, describe the cases/procedures observed during the shadowing experience. Identify the technologist who completed each case/procedure listed.

Ask the radiologic technologist(s) you are shadowing the following questions and provide their answers in the space provided. Answers may be typed in a separate document and submitted to the Admissions Office with the completed observation verification form.

1. What are the primary responsibilities of your job? How do your responsibilities vary from a radiologist's?
2. How much hands-on patient care do you provide daily?
3. What are some things you think I should consider as I enter this profession?
4. How is radiography different from other health professions, like nursing?
5. What is one piece of advice you can give me regarding radiography education or about the profession?



Signature of student applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name & credential of registered radiologic technologist \_\_\_\_\_

Signature of registered radiologic technologist: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name of department manager/ lead technologist \_\_\_\_\_

Signature of department manager/ lead technologist \_\_\_\_\_ Date: \_\_\_\_\_



Prospective Radiography program students may complete shadowing experiences in any **hospital facility**, under the supervision of a licensed/credentialed radiologic technologist. Student shadowing opportunities are provided at the discretion of each, individual healthcare entity. Students bear the exclusive responsibility to arrange shadowing experiences. The faculty and staff of the HCC Radiography program will not facilitate any shadowing experiences for prospective students.

Listed below is information for different facilities in the Tri-state area where students **may** be permitted to complete shadowing experiences. This list does **not** exclusively designate the locations in which job shadowing experiences may be conducted.

**Berkeley Medical Center**

2500 Hospital Drive  
Martinsburg, WV 25401  
304-264-1000

**Meritus Medical Center**

11116 Medical Campus Rd.  
Hagerstown, MD 21742  
301-790-8000

**WellSpan Chambersburg Hospital**

112 N 7th St.  
Chambersburg, PA 17201  
717-267-3000

**WellSpan Waynesboro Hospital**

501 E Main St.  
Waynesboro, PA 17268  
717-765-4000

**Frederick Health Hospital**

400 W 7th St.  
Frederick, MD 21701  
240-566-3300