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26

Physical Therapist Assistant

Portfolio

1400 Tanyard Road, Sewell, NJ 08080 | RCSJ.edu

Portfolio Deadline

Portfolios Will Be Accepted: January 5, 2026 – February 27, 2026

Portfolio Deadline: Friday, February 27, 2026 at 5 p.m.

All Admissions Decisions Sent on or about: Thursday, April 2, 2026

All admissions decisions will be sent to the **student's RCSJ Gloucester email address**. Applicants should ensure they have access to this email account **prior** to submission of portfolio. **All admissions decisions are final.**

To confirm acceptance, a \$100 non-refundable tuition deposit and evidence of a complete criminal history background check (CHBC) and urine drug screen will be due within two weeks after the notification date. The offer of acceptance will be rescinded if the deposit, CHBC and urine drug screen are not received by the due date.

How to Submit Your Complete Portfolio

All applicants to the Physical Therapist Assistant program must review the Summer 2026 Physical Therapist Assistant admissions handbook **before** completing the Portfolio. The Admissions Handbook contains all current policies and procedures for submitting a complete portfolio.

Complete PTA portfolios may be submitted at any time from January 5, 2026 through February 27, 2026 at 5 p.m.

Complete portfolios can be submitted either in-person at the Gloucester Campus admissions office or by mail.

Electronic submissions of portfolios are not accepted.

Once submitted, the portfolio is a final document and property of the College. Students cannot add, edit, or remove documentation from their portfolio after submission. Portfolios will not be reviewed by RCSJ Staff for completion prior to submission.

Compile all required documentation and secure in a large manila envelope. Do not use file folders, binders, folders with sheet protectors, or mailing envelopes. Your portfolio should be able to be sealed with all documents inside. Manila envelopes can be found at most stationery stores, wholesale retailers (ex. Walmart or Target), and post offices.

**Write the following on the front
of the manila envelope:**

- Student's Name
- RCSJ Student ID number
- 2026 PTA Portfolio
- Gloucester Campus

**If mailing your portfolio,
please use the address below:**

Rowan College South Jersey
Admissions Office
ATTN: Selective Admissions Portfolio
1400 Tanyard Road, Sewell, NJ 08080

Please allow extra time for mailed portfolios to be received!

Applicants should contact Selective Admissions at Gloucester Campus with any questions on whether a document needs to be included **prior** to submission of their PTA portfolio.

2026 Physical Therapist Assistant Portfolio Checklist

Complete the following sections and include each document in your large manila envelope. Check each box as you include the document. The order of the portfolio should match the order of the checklist. **Do not staple, paper clip, or binder clip pages together. Please type or print clearly. Use blue or black ink if handwriting application.**

Part I: Required Forms:

All forms must be completed and signed (where necessary) by the applicant before submission.

- 2026 Portfolio Checklist
- 2026 Physical Therapist Assistant Application
- General Admission Completion Form – signed by both admissions and applicant
- 2026 Physical Therapist Assistant Portfolio Submission Agreement
- 2026 Physical Therapist Assistant Information Session Proof of Attendance
Date Attended: _____
- 2026 Physical Therapist Assistant Admissions Ranking Scoresheet
- Observation Hours Form (Must include a business card or letter on company letterhead for each PT/PTA observed)

Part II: Required Transcripts and Score Reports:

- Official HSRT-AD Exam Score Report
Must be in sealed envelope from Testing Center. Unofficial scores are NOT acceptable.
- Unofficial RCSJ Transcript
Print directly from your RCSJ student portal.
 - N/A – I have never generated an academic record/taken a class at RCSJ. No transcript included.
- Official College Transcripts
Write the name of each college where you generated an academic record and include an official transcript for each. Do not include RCSJ on this list.
 - _____
 - _____
 - _____
 - _____
 - _____
 - _____
- Official High School Transcript
 - N/A – My high school transcript is on file with the admissions office AND my most recent/current cumulative GPA is from a college or university. No high school transcript included.

Last Name: _____ First Name: _____ Student ID#: _____

2026 Physical Therapist Assistant Application

*This application is **not** the same as your general admissions application.
Please type or print clearly. Use blue or black ink if handwriting application.*

Applicant Information:

RCSJ Student ID # _____

Legal Last Name: _____ First Name: _____

Maiden Name (if applicable): _____ Middle Initial: _____

Date of Birth: ____/____/____ Sex: Male Female

RCSJ Email Address: _____

Address: _____

City: _____ State: _____ ZIP Code: _____ County: _____

Primary Phone Number: (____) _____ Cell Phone Home Phone Work Phone
 Can leave a message/text Don't leave a message/text

Alternate Phone Number: (____) _____ Cell Phone Home Phone Work Phone
 Can leave a message/text Don't leave a message/text

Education Information:

*Please list below all high schools, vocational/technical schools, and colleges/universities attended, including RCSJ.
This section needs to match the information on the portfolio checklist **and** in the student's current RCSJ file.*

Name of Institution:	Address:	Dates Attended:	Degree Received:
High School	City/State	Month/Year	
Vocational/Technical School	City/State	Month/Year	
College/University	City/State	Month/Year	
College/University	City/State	Month/Year	
College/University	City/State	Month/Year	
College/University	City/State	Month/Year	
College/University	City/State	Month/Year	
College/University	City/State	Month/Year	

The Board of Trustees is committed to providing a work and academic environment that maintains and promotes affirmative action and equal opportunity for all employees and students without discrimination on the basis of certain enumerated and protected categories. These categories are race, creed (religion), color, national origin, nationality, ancestry, age, sex (including pregnancy and sexual harassment), marital status, domestic partnership or civil union status, affectional or sexual orientation, gender identity or expression, atypical hereditary cellular or blood trait, genetic information, liability for military service, or mental or physical disability, including AIDS and HIV-related illnesses. For questions concerning discrimination, contact Almarie J. Jones-Gloucester Campus, Vice President, Chief Diversity Officer, Diversity and Equity, Title IX and Compliance at 856-415-2154 or ajones@rcsj.edu; Nathaniel Alridge Jr, J.D.-Cumberland Campus, Executive Director, Threat Assessment Management, Title IX, Diversity and Judicial Affairs at 856-498-9948 or nalridge@rcsj.edu. For disabilities, contact Carol Weinhardt-Gloucester Campus, Director Department of Special Services, ADA/504 Officer at 856-415-2247 or cweinhar@rcsj.edu, Meredith Vicente-Cumberland Campus, Senior Director, Accessibility and Support Services 856-200-4688 or mvicent1@rcsj.edu.

RCSJ General Admission Completion Form

Directions:

1. Complete information requested in the Student Section (name, ID number, signature, and date.)
2. Request an Admissions Office Staff Member to review your form in either of the following ways:
 - a. In-person at Gloucester Campus admissions office window. *No appointment necessary!*
 - b. Scan the form and send it via email: *SelectiveAdmissions@rcsj.edu*
3. Admissions Office Staff will review, sign, and note successful completion with a colorful checkmark across the form.
4. Include completed form with checkmark in portfolio. **Requests made after the February 27, 2026 deadline will not be honored.**

Student Section:

Student Name: _____ RCSJ Student ID #: _____

I am submitting a portfolio for the Summer **2026 Physical Therapist Assistant Program** at the Gloucester Campus.

I request the Admissions Office to verify my general admission application (including application, high school completion credentials, and college level placement in reading, writing, and math) is complete.

I acknowledge that only **after** an Admissions Office Staff Member signs this form it will be ready to be enclosed in the portfolio.

My signature acknowledges that I, the applicant to the program named above, am solely responsible for ensuring I meet the general admission requirements **before** submitting a portfolio.

Student Signature: _____ Date: _____

RCSJ Admissions Office Section: **DO NOT COMPLETE – For Admissions Office Staff ONLY**

1. **General Application:** This applicant has a completed general admissions application to the campus designated in Applicant Section.

Yes No

2. **High School Completion Credentials:**

Preliminary high school transcript (*send final copy after graduation*)

Official high school transcript

Home school transcript

GED

Applicant is missing high school completion credentials.

3. **RCSJ Placement Test Status:** This applicant satisfied the RCSJ placement test or received a testing exemption in the following areas (*Note: all three must be satisfied to submit a portfolio*):

Reading

Writing

Math

Yes: _____

Yes: _____

Yes: _____

No: _____

No: _____

No: _____

Admissions Office Staff Member: _____ Date: _____

Last Name: _____ First Name: _____ Student ID#: _____

Portfolio Submission Agreement

Please read the following statements carefully

- I reviewed the PTA Admission Handbook posted on the Selective Admissions website before completing my portfolio. I understand the contents of the document and adhere to all regulations, policies, and procedures contained within. I acknowledge and understand I am solely responsible for following the policies and procedures for the Selective Admissions process.
- I understand admission to the PTA program is not guaranteed, even if I meet or exceed all admissions ranking requirements.
- I certify that all documents and information provided by me are true, accurate and complete. Any misleading or false information may result in actions including, but not limited to, discipline, dismissal or denial of application to all selective admission programs. In addition, I realize my acceptance may be revoked if I engage in behavior that questions my honesty, integrity, maturity or ethical character.
- I further understand that once I submit this portfolio to the RCSJ Admissions Office, it is a final document and property of the College. I understand failure to include any required documentation will result in an incomplete portfolio and I will be ineligible for admission to the Summer 2026 PTA Program. This includes omission of any college transcript.
- The Buckley Amendment (Privacy Act) requires student permission before transferable college courses may be added to the student's academic record. I grant permission to the College to transfer any applicable courses and change my major course of study, should I be accepted to the program.
- I understand I am solely responsible for the contents and completion of this portfolio. My signature below confirms I understand and agree to the statements above.

Print Name: _____

Signature: _____

RCSJ Student ID Number: _____ Date: _____

Last Name: _____ First Name: _____ Student ID#: _____

2026 Physical Therapist Assistant Admission Ranking Scoresheet

33.34% – HSRT-AD Exam Score

Minimum score of 72. Score report must be in a sealed envelope from the RCSJ Campus Testing Center where you took the exam. Unofficial results printed by the student will result in an incomplete portfolio.

Overall Score: _____ Date of Exam: _____ Campus: Gloucester Cumberland

33.33% – Lab Science Requirement

Choose **one** science option below to use for admission ranking. Must be taken from **2022-present**, with a final letter grade of a "C+" or higher. All letter grades will be verified on the official transcripts included in the portfolio.

Option I: Lab Biology

High school or college level

College level BIO options: General Biology I, General Biology II, Human Biology, or equivalents

Lab Biology

Course Name: _____ School/College: _____

Semester/Year Taken (ex: Fall 2023): _____ Final Letter Grade: _____

Option II: Anatomy & Physiology I

College level only, equivalent to BIOL 105 (Gloucester) or BI 106 (Cumberland)

Course Name: _____ School/College: _____

Semester/Year Taken (ex: Fall 2023): _____ Final Letter Grade: _____

Option III: Anatomy & Physiology II

College level only, equivalent to BIOL 106 (Gloucester) or BI 107 (Cumberland)

Course Name: _____ School/College: _____

Semester/Year Taken (ex: Fall 2023): _____ Final Letter Grade: _____

33.33% – Cumulative GPA

Must be a 2.50 or higher from school of current/most recent attendance. High school seniors will use their weighted GPA if available. NO ROUNDING accepted. GPA is calculated to the hundredth digit.

Cumulative GPA: _____

School/College of current or most recent attendance: _____

RCSJ PTA Observation Documentation

Rowan College of South Jersey requires that applicants complete a minimum of twenty (20) hours of observation in at least two different sites which provide Physical Therapy services. These hours do not contribute to an applicant's overall admissions ranking but are required for application to the program.

Applicants must visit a minimum of two (2) to a maximum of three (3) different sites to complete their observation hours. Applicants may complete their observation hours in an inpatient setting, outpatient setting, or a combination of the two.

Observation hours must be within the past eighteen (18 months) to be considered for the 2026 PTA program.

Observation hours completed prior to August 27, 2024 will not be honored.

Observation may be completed with a licensed Physical Therapist or licensed/certified Physical Therapist Assistant, and hours will be accepted only if signed by the supervising PTA or PT. These signatures must be legible. **Applicants must include a business card or a note on company letterhead for each supervising PT/PTA they observe as part of their documentation form.**

Rowan College South Jersey does not provide potential sites for students to complete their observation hours requirement. Students are encouraged to reach out to a PT/PTA they are interested in shadowing directly to establish observation hours. Students can also use the APTA.org "Find a PT" database for available, local PTs near their location.

Observation credit should be given only for actual time spent observing patient care by a supervising clinician. Individuals working as paid employees in a physical therapy department may not use their regular working hours to complete applicable portions of this requirement.

Observation hours completed for a previous educational program of study will not be accepted toward fulfillment of the PTA program portfolio requirement.

All sections of the **PTA Observation Documentation Form** must be filled out completely and legibly. PTA faculty and administration will verify the hours on the documentation form for accuracy and legitimacy. An example of how to complete an entry is provided on the first line for you. Additional copies of the form are acceptable, if needed. Improperly documented observation hours may result in an incomplete portfolio and not considered for acceptance.

Properly documented observation hours will be accepted on forms from other educational institutions as long as there has been pre-approval by the Physical Therapist Assistant Program Director prior to submission of the applicant's portfolio.

The Physical Therapist Assistant Program at Rowan College of South Jersey is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 3030 Potomac Avenue, Suite 100, Alexandria, VA 22305-3085; telephone: 703-706-3245; email: accreditation@apta.org; website: capteonline.org. If needing to contact the program directly, please call 856-415-2188 or email edoyle@rcsj.edu

2026 PTA Observation Documentation Form

Name of Applicant: _____ Student ID#: _____

Date	Start Time	End Time	# of Hours	Name of the Facility	Location (City, State)	Telephone Number	Inpatient or Outpatient?	Signature of Supervising PT or PTA and license #
Example 04/01/23	8:00 a.m.	12:00 a.m.	4	Physical Therapy, INC.	Anytown, NJ	(123) 456-7890	Outpatient	<i>Signature</i> License: 1234567890
								Signature: _____ License #: _____
								Signature: _____ License #: _____
								Signature: _____ License #: _____
								Signature: _____ License #: _____
								Signature: _____ License #: _____
								Signature: _____ License #: _____
								Signature: _____ License #: _____

_____ **Total Hours Completed** _____ **Total Sites Visited**

I certify that the hours listed above were fulfilled by me. I understand that the PTA Admission Committee may verify this document for authenticity and I realize that falsification of information will result in my application to the PTA Program being withdrawn for consideration.

Applicant Signature: _____ **Date:** _____

REMINDER: Attach a business card or note on company letterhead for each PT/PTA you observed. Failure to attach a business card may result in unverifiable observation hours and an incomplete portfolio.

2026 RCSJ PTA Observation Documentation

Last Name: _____ First Name: _____ Student ID#: _____

