



THE AMERICAN REGISTRY
OF RADIOLOGIC
TECHNOLOGISTS®

ETHICS REVIEW PREAPPLICATION

INSTRUCTIONS

Do you think you might have to disclose an ethics violation? If so, the Ethics Review Preapplication lets you do so in advance instead of on your Application for Certification and Registration.

WHEN NOT TO USE THIS FORM

Don't use this form if any of the following apply to you:

ETHICS REVIEW PREAPPLICATION

For ARRT use only

ETHICS REVIEW PREAPPLICATION

Last Name

First Name

Middle Name or Initial

Street Address 1

Street Address 2

City State/Prov Zip/PC

Birthdate - - or Gender
MM DD YYYY U.S. Social Security Number No SSN M F X

