

ARIN Fellowship Application

All applications must be submitted on a current Fellow application. Reformatting the online application will result in disqualification of the application. If additional space is needed, attach a separate sheet. The minimum number of points required for consideration for elevation to Fellow is 60; 45 of these points must be earned in Section A. Activities or service not appearing on the Fellow Point Evaluation Scale will not be reviewed.

| Applicant Information (Please type or print legibly) |
|---|
| Name of Applicant and credentials (in ANA preferred order) (Full name as it should appear on certificate) |
| Address: Street, City, State, ZIP, Country |
| Primary phone (please indicate home, cell, or work phone number) |
| E-mail (please indicate home or work email) |
| Fax (please indicate home or work fax) |
| Applicant Place of Employment |
| Address, Street, City, State, ZIP, Country |
| Applicant Title and Credentials |
| ARIN Membership Number |
| |

State Board of Nursing/International Equivalent Number



| Sponsor Name, Credentials | |
|---|--|
| Title, Institution | |
| Primary Phone | |
| Applicant Personal Statement (max. 500 words) | |



A. ARIN Professional Society Activities

| 1. | Member of ARIN Board of Directors – 4 points p | per ye | ar | | |
|----|--|--------|--------|-----|----------------------|
| | Position | | Year | Pts | Sponsor Verification |
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| 2. | Member of ARIN Executive Board – 2 points pe | r year | • | | |
| | Position | | Year | Pts | Sponsor Verification |
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| 3. | ARIN Committee Chairman – 2 points per year | | | 1 | |
| | Committee | Ye | ar P | ts | Sponsor Verification |
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| 4. | ARIN Committee Member – 1 point per year | T | | . 1 | |
| | Committee | Ye | ar P | rts | Sponsor Verification |
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5. ARIN Task Force Chairman – 2 points per year

| Task Force | Year | Points | Sponsor Verification |
|------------|------|--------|----------------------|
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6. ARIN Task Force Member – 1 point per year

| Task Force | Year | Points | Sponsor Verification |
|------------|------|--------|----------------------|
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7. ARIN Liaison to External Organizations/Professional Societies (RSNA, SIR, etc.) -1 points per year

| Organization | Position | Year | Points | Sponsor Verification |
|--------------|----------|------|--------|----------------------|
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9. JRN Editorial Review Board Member – 1 point per year

| Year | Points | Sponsor Verification |
|------|--------|----------------------|
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10. ARIN Active Member (after 5 years of consecutive current membership)

- 1 point per year - maximum 15 points

| Year | Points | Sponsor Verification |
|------|--------|----------------------|
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11. ARIN Lifetime Member – 1 point

| Year | Points | Sponsor Verification |
|------|--------|----------------------|
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12. ARIN Conference Lecturer – 1 point per hour

A lecture can only be used once for full credit; subsequent presentations earn half credit.

| Lecture Title | Society | Meeting | Date | Points | Sponsor Verification |
|---------------|---------|---------|------|--------|-------------------------|
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13. Imaging Review Course Master Faculty – 1 point per 4 hour presentation; 1 point per topic update (indicate topic updated under Lecture Title

| Lecture Title | Mtg Site/Topic Updated | Date | Points | Sponsor Verification |
|---------------|------------------------|------|--------|----------------------|
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14. Nurse Planner – 1 point per conference/webinar application; 1 point Directed Journal Reading (question development/application)

| Title | Туре | Date | Points | Sponsor Verification |
|-------|--------------------------|------|----------|----------------------|
| 11616 | | Date | 1 011165 | Sponsor vermeation |
| | (conference/webinar/DJR) | | | |
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15. ARIN-assigned Lecturer to External Organization (ANA, ONS, etc.) – 1 point per hour. A lecture can only be used once for full credit; subsequent presentations earn half-credit.

| Lecture Title | Society | Meeting | Date | Pts | Sponsor Verification |
|---------------|---------|---------|------|-----|-------------------------|
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16. ARIN Poster Presentation – 1 point per exhibit

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|--------------|------|--------|-------------------------|
| Poster Title | Date | Points | Sponsor Verification |
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17. ARIN Publication of Scholarly Peer-reviewed Article or Directed Reading - 1 point

| Title | Journal | Month/Year | Pts | Sponsor Verification |
|-------|---------|------------|-----|-------------------------|
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18. ARIN Self-learning modules – Home study/Video/Tape/CD - 1 point

| Title | Description | <u>Date</u> | Points | Sponsor Verification |
|-------|-------------|-------------|--------|-------------------------|
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19. ARIN Awards* – (Nurse of the year, Joanna Po President's Award, JRN Editorial Award) – 1 point per award.

| Award | Date | Points | Sponsor Verification |
|-------|------|--------|----------------------|
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B. Other Professional Contributions

- 1. Chapter Level ARIN Chapter activities
- a. Active member (after three years of consecutive membership)
- 1 point per year, 5 points maximum

| Years of Active Membership | Chapter | Points | Sponsor Verification |
|-------------------------------|---------|--------|----------------------|
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b. Chapter Board member – 2 points per year

| Position or Office | Chapter | Year | Points | Sponsor Verification |
|--------------------|---------|------|--------|----------------------|
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c. Chairman or member of a chapter committee – 1 point per year

| Position or | Chapter | Year | Points | Sponsor Verification |
|-------------|---------|------|--------|----------------------|
| Committee | | | | |
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d. Lecturer (chapter presentation)— 1 point per hour A lecture can only be used once for full credit; subsequent presentations_earn half credit.

| Lecture Title | Meeting Site | Date | Points | Sponsor Verification |
|---------------|--------------|------|--------|----------------------|
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e. Scientific Exhibitor – 1 point per exhibit

| Title Society | Meeting Site | Date | Points | Sponsor Verification |
|---------------|--------------|------|--------|----------------------|
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f. Editor of Affiliate Publication – 1 point

| Affiliate | Name of Publication | Dates | Points | Sponsor Verification |
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| 2. | Exter | nal | Orga | nizat | ions |
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- a. Professional Organization Board member (chairman or member Non-ARIN Nursing) -
- 1 point per year

| Position | Organization | Dates | Points | Sponsor Verification |
|----------|--------------|-------|--------|----------------------|
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b. Certification board item writer (RNCB, ANCC) or equivalent – 1 point per year

| Position | Credentialing Agency | Year | Points | Sponsor Verification |
|----------|----------------------|------|--------|----------------------|
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c. Certification board member (RNCB or equivalent) – 1 point per year

| Position | Credentialing Agency | Dates | Points | Sponsor Verification |
|----------|----------------------|-------|--------|----------------------|
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3. Publications

a. Author of scholarly peer-reviewed article in a national or international journal (other than JRN) -2 point

| Title of Journal | Month/Year of Issue | Author Position | Points | Sponsor Verification |
|------------------|---------------------|-----------------|--------|----------------------|
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b. Author of textbook related to the radiologic sciences - 8 points

| Title | Month/Year of Issue | Author Position | Points | Sponsor Verification |
|-------|---------------------|-----------------|--------|----------------------|
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c. Editor of textbook related to the radiologic sciences - 8 points

| Title | Month/Year o <u>f</u> Issue | Editor Position | Points | Sponsor Verification |
|-------|--------------------------------|-----------------|--------|----------------------|
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d. Author of textbook chapter related to the radiologic sciences - 4 points

| Title | Month/Year of Issue | Author Position | Points | Sponsor Verification |
|-------|------------------------|--------------------|--------|----------------------|
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4. Postsecondary Education (highest degree only awarded points) Note: Points awarded for this category cannot be claimed for CE credit.

a. Associate degree or certificate programs-2 points

| College | City and State | Dates Attended | Points | Sponsor Verification |
|---------|----------------|-------------------|--------|-------------------------|
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b. Baccalaureate degree – 4 points

| College | City and State | Dates Attended | Points | Sponsor Verification |
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c. Master's degree – 6 points

| College | City and State | Dates Attended | Points | Sponsor Verification |
|---------|----------------|----------------|--------|-------------------------|
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d. Doctorate degree – 8 points

| College | City and State | Dates | Points | Sponsor |
|---------|----------------|----------|--------|--------------|
| | | Attended | | Verification |
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6. Certification

a. Additional certifications – 3 points

Section B Total Points _____

| Certification Credential | Certification Body | Date | Certified Certificate Number | Points | Sponsor Verification |
|-----------------------------|-----------------------|------|------------------------------------|--------|-------------------------|
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| Total Points: | | |
|---------------|--|--|
| Section A | | |
| Section B | | |
| Total | | |
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(Minimum number of points required for consideration to elevate to fellow is 60 points; 45 must be earned in section A).



Attestation Statement from Applicant

I hereby certify that the information contained in this application for the Academy-ARIN is, to the best of my knowledge, accurate and complete. I understand any misrepresentation or willful omission is cause to disqualify me for acceptance as a Fellow of the Association for Radiologic & Imaging Nursing.

| I, herewith, submit supporting documentation of my qualifications and associated activities. |
|---|
| Applicant SignatureDate |
| Printed name with credentials |
| Attach/upload professional/business casual looking "Headshot" of Applicant here (passport size of selected as a member of the Academy, ARIN (and Elsevier) may use my photo for promotion purposes. |
| Yes |
| No |
| Signed: |



Appendix A: Sponsor's Form

Sponsor's Statement: (max 500 words) – documents the length of time and in what capacity the sponsor knows the nominee and highlight the special contributions of the applicant.

Attestation Statement from Sponsor

I certify that the information and statements contained in the application of the above applicant for Fellow of the Association for Radiologic & Imaging Nursing are accurate and correct, to the best of my knowledge.

I affirm this applicant to be a quality candidate for the title of Fellow in the Academy-ARIN.

| Sponsor Signature | Date | Printed |
|---------------------------------------|-------------------------------------|-----------------|
| name with credentials | | _ |
| One sponsor endorsement from a member | er of the Fellows Committee. (Excep | otion 1st year) |

Deadline Date: Please check the website for current deadlines.

Applicant: Please include \$50.00 non-refundable application fee to cover processing costs.

Email application and supporting documentation to:

Association for Radiologic and Imaging Nursing (ARIN)

General Inquiries: Toll Free (866) 486-2762

Mail to: info@arinursing.org

200-411 Richmond St East, Toronto ON, M5A 3S5, Canada