

A Quick Guide to Your AMT Application

CREATE AN ACCOUNT

- Visit www. americanmedtech.org
 - » Click on login.
 - » If you already have an account, enter your login information. If not, click on create an account.

Follow the steps to create a profile:

- » Find your school.
- » Connect your profile to your school by clicking on search for school.
- » Ask your program director or instructor for your school's organization ID, and enter it into the form.
- » Click on your school.



	account because your CURRENT school or employer directed you to, r school or employer below.
Education	
Please enter eithe	r your School or Organization Name or School or Organization ID.

Education		
Please enter either your School	or Organization Name or School or Organization ID.	
Organization Name		
1		
Organization ID		
129623		
Zip Code		
	Q SEARCH School Search Results 1 Institution(s) Found that Match Your Set	earch. Select your school by clicking on
	Institution Name field. If you are not abl school Program Administrator for your A	e to find your school, please contact yo

Institution ID	Institution Name	Address	City	State	Zip
129623	Northwestern Memorial Healthcare-MA Program	541 N Fairbanks Ct Ste 950	Chicago	IL	60611



APPLY ONLINE

Apply online right from the profile confirmation page.

You will need to log in again.

- » Choose your certification and the education route, click on next.
- » Complete your personal information.

Your Login Information		
Your Login Informatio	on	
Username	alexwhite1242@gmail.com	
Password	****	
Basic Information		
AMT ID	2989401	
First Name	Alex	
Last Name	White	
Primary Contact Infor	mation	
Address Type	Home	
Mailing Address	926 W Margate Ter	
Mailing Address Cont.	202	
City	Chicago	
State/Province	IL	
Zip/Postal Code	60640	
Country	United States	
Cell/Primary Phone	3143744359	
	alexwhite1242@gmail.com	

Move on to Education and Training.

» Complete all known information.

» Connect your profile to your school again by clicking on search for school.

Submit your application	
Select your Certification Type and Eligibility Route. (For details, click the Eligibility Route Descriptions links b	pelow.)
Important notes:	
Don't create a new application If you just need to make changes to an application you already submitted. Instead, please review the Applia and email your changes or corrections to documents@americanmedtech.org. Incomplete or missing info application. you were previously certified with AMT and want to re-establish your certification. See the "Lapsed Cert instructions.	rmation can delay the processing of your
Payment with coupon code If your school or employer is paying for your application:	
 Obtain a payment coupon code from that organization before starting this application. Connect your application to the paying organization by selecting them from the list in either the Educatio Employment Section "Search for Employer" of the application. Enter the coupon code in the Payment Section of the application. 	n Section "Search for School" or
O Medical Assistant (RMA)	Eligibility Route
Phlebotomy Technician (RPT)	Descriptions
Medical Administrative Specialist (CMAS)	RMA
O Dental Assistant (RDA)	RPT CMAS
 Dental Assisting Radiography (DAR) 	• RDA
 Medical Laboratory Scientist (MLS) (formerly Medical Technologist (MT)) 	DAR MLS MLT
 Medical Laboratory Technician (MLT) AMTS MLT exam is approved in the state of CA. Applicants choosing to take the exam for recognition by the state must note that the competencies covered on the test exceed CA state lawful scope of practice. 	CMLA AHI
 Medical Laboratory Assistant (CMLA) 	• PCT
 Allied Health Instructor (AHI) 	
 Certified Laboratory Consultant (CLC) 	
 Molecular Diagnostic Technologist (MDT) 	
O Patient Care Technician (PCT)	



This will look the same as it did in the create an account section.

- » Enter your school's organization ID and search.
- » Click on your school.

COMPLETE THE APPLICATION

- Skip the employment history section by scrolling and clicking on continue to examinee agreement.
 - » Read the examinee agreement, click agree and submit.

Continue to the payment screen.

- » If you are paying, click on credit card, enter your information and click on process order.
- » If your school will be paying for your application, click on my organization will pay.
- » Ask your program director or instructor for a coupon code to enter in the space provided.
- » Click on process order to complete your application.

Your application is complete!

- Visit your AMT Portal by logging in to access:
 - » Application summary
 - » Acknowledgment letter
 - » Authorization to test letter
 - » Practice exam

Allied Health Training		
Degree or Diploma Awarded	Select One	~
Major or Name of Program	Select One	~
Name of School		
	Q SE	ARCH FOR SCHOOL
Dates Attended From (MM/DD/YYYY)	Q SE	ARCH FOR SCHOOL
		ARCH FOR SCHOOL

Application for Certification

EXAMINEE AGREEMENT

If taking an exam, please read carefully - you must agree to the following policies in order to qualify for this examination:

1. Validity Assurance and Score Cancellation

AMT reserves the right to cancel any examination score if, in AMT's professional judgment, there is any reason to question the score's validity. Circumstances warranting score cancellation may include, but are not limited to: copying from notes or from another examinee's answers; speaking or otherwise communicating with others during the test administration; alding or receiving aid from other examinees; consulting study aids of any type during the exam; copying, transcribing, or otherwise reproducing test materials; removing test materials from the examination room; or having improper access to AMT exam content prior to the exam administration. Significant score increases upon retesting may also be investigated to ensure the authenticity of results. Misconduct may disqualify you from all future examination attempts and from AMT certification.

2. Exam Confidentiality and Non-Disclosure Agreement

The content of all AMT certification exams is copyrighted and is the property of AMT. Exam materials will be provided to you on a temporary basis for the sole purpose of testing your knowledge and competency in the discipline for which you seek certification. You are required to return any exam materials to the test administrator immediately after completing the exam, and you are prohibited from using or possessing AMT examination content for any other purpose or at any other time. You agree not to disclose, publish, copy, reproduce, transmit or distribute exam ontent, in whole or in part, in any form or by any means, for any purpose, without the express prior written authorization of AMT's Director of Testing and

Select Payment Method	CREDIT CARD	\$ MY ORGANIZATION WILL PAY
our organization is paying fo	or your application	and exam, obtain a coupon code from your organization.
Enter coupon code:	COUPON-CODE	
Your final total is 💲	07.00	✓ PROCESS ORDER





Check out AMT's library of exam prep resources, and build your confidence before your exam.
» Visit americanmedtech.org/edge

Know Before You Test

ABOUT YOUR APPLICATION

- 1. Good for one year
- 2. Allow 1-2 weeks for processing
- 3. Pay by credit/debit card OR if your school is paying, they will provide you with a coupon code
- 4. Fee is non-refundable

SCHEDULING YOUR EXAM

- 1. Once your application gets processed, you will be sent an email with directions on how to schedule your exam.
- 2. Exams are scheduled at Pearson VUE testing centers, unless your school is registered as a testing site.
- 3. AMT cannot schedule your exam for you.
- 4. The Pearson VUE profile you create for the exam is separate from your AMT account.

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