



## APPLICATION PACKET COMPLETION CHECKLIST

For Diagnostic Medical Sonography Program

*Please be sure the items listed below are in your Application Packet before you submit it to Allied Health Admissions. If the deadline date falls on a holiday or weekend, the following week day will be considered the deadline.*

\_\_\_\_\_ Completed Application. Please proof read application to assure that **ALL** required questions have been answered. Keep a copy for your records. Be sure to sign and date the application. Allied Health Admissions Office must be notified of any changes in pertinent information after submission.

\_\_\_\_\_ Official Transcripts from **ALL** colleges attended *other* than Delgado Community College in sealed, signed envelopes. Official transcripts will be required to ensure completion requirements are met. If the transcript is for a college outside Louisiana, you must submit course descriptions to aid in determining course equivalencies. (Copied and pasted course descriptions will not be accepted).

\_\_\_\_\_ **2 Professional** Letters of Recommendation in sealed, signed envelopes

\_\_\_\_\_ Documentation of Observation Form(s) in sealed, signed envelopes.

\_\_\_\_\_ Typewritten Personal Statement describing your short and long term goals and explaining your interest in this field of study. (Handwritten Statements will not be read and will result in an incomplete application.)

Acknowledgement and Notification of Missing Credentials via email provided on Application.

This application is considered completed only when ALL supplemental information requested has been received by the Allied Health Admissions office. This includes typewritten personal statement, letters of recommendation, transcripts, and the completed and signed application.\* Only complete applications will be processed.

**APPLICANT'S NAME AND DATE must appear on each page of the documents submitted.**

**\*STUDENTS ARE RESPONSIBLE FOR MAKING SURE THAT THEIR OWN APPLICATION IS COMPLETE.**