## APPLICATION FOR ADMISSION SCIENCE LABORATORY TECHNOLOGY

DELGADO COMMUNITY COLLEGE 615 City Park Avenue New Orleans, LA 70119 (504) 671-6419

Complete the general Delgado Community College admissions procedures before applying to Science Laboratory Technology Program.

Application must be typed. THE ADMISSIONS PACKAGE MUST INCLUDE: APPLICATION AND ALL OFFICIAL TRANSCRIPTS

OTHER THAN DCC. The admission package must be submitted to the Office of Admission, Science Laboratory Technology Program. Incomplete packages will be returned to applicant and will not be considered for admission. Semester for which applying: Spring Fall Concentration for which applying: □ Biological Technology Undecided You must apply to DCC to obtain a LoLa ID#. DCC LoLa ID# NAME: Last Middle Mailing Address: Number & Street City State Zip Parish CONTACT NUMBER w/Area Code: ALTERNATE NUMBER w/Area Code: EMAIL ADDRESS: PERMANENT ADDRESS: (if different from above) U.S. CITIZEN: Yes No  $\square$ Alien Regis. No. #:\_\_\_\_ If no, type of visa: Resident Student Student In an emergency notify: Name Relationship Phone Number w/area code Address List all schools/colleges attended, regardless of whether credit or a degree was earned (include current enrollment). Failure to acknowledge attendance at a school/college/university may result in dismissal from the program. SCHOOLS ATTENDED FROM TO **DEGREE RECV'D** Semester/Yr Semester/Yr (i.e. BA, BS, AS) High School (OR GED): College(s): Official transcripts of all colleges attended must be included with admissions package. Have you ever previously applied to the Science Laboratory Technology Program? Yes 🗌 No  $\square$ If yes, when did you apply? Have you ever previously applied to other Delagdo Community College Programs? Yes 🗌 No □ If yes, to which program(s) did you apply? \_\_\_\_ Yes Have you submitted an application to Delgado Community College? No 🗌

Presen	t employment:_	Name of company	Address	Phone
Positio	on		Immediate	Supervisor
			admission to the AAS-SLT program an This statement requires truthfully answ	
1.	Have you been issued a citation or summons for, or has/have warrants(s) been issued against you related to, or have you been arrested, charged with, arraigned, indicted, convicted of , pled guilty/"no contest"/nolo contendere/"best interest of" or an similar plea to ; or been sentenced for any criminal offense, including all misdemeanors and felonies in any state or other jurisdiction?			
2.	Have you beer	discharged from the military or	n ground(s) other than a honorable dis	charge?
3.		diagnosed with, do you have, ct your ability to safely practice		nental or emotional or psychiatric condition
4.	Have you had alcohol?	a problem with, been diagnosed	d as dependent upon, or been treated	by mood-altering substances, drug or
5.	Have you beer	ı diagnosed as dependent upor	/addicted to, or been treated for, depe	endence upon medications?
		nd understand that I will be req	uired to answer the five aforementione	ed questions after I am admitted to the
progran	n. Yes [	□ No □		
College	Science Labora	tory Technology Program. Wha	t are your professional plans/aspiratio	ns?
			the foregoing questions are true to the ely affect my admission to the AAS-SL	
SIGNATURE:			DA	ATE:
Please	keep this office i	nformed of any changes in the	information submitted on this application	on. Thank you.

Incomplete admission packages will be returned