APPLICATION PACKET COMPLETION CHECKLIST
For Diagnostic Medical Sonography Program

Please be sure these items are in your Application Packet envelope 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.

_____ Official Transcripts from each college attended other than Delgado Community College in sealed, signed envelopes. Official transcripts will be required to ensure completion requirements are met.

_____ Course descriptions for ALL required courses from out-of-state colleges

_____ 2 Professional Letters of Recommendation in sealed, signed envelopes

_____ Documentation of Experience Form(s) in sealed, signed envelopes. NEW observation time is required. See Allied Health Advisor.

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

_____ 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.)

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.*

All enclosures for the application packet should bear the applicant's NAME and be dated.

EACH PAGE OF EACH DOCUMENT MUST INCLUDE APPLICANT'S NAME AND DATE.

PLEASE NOTE: Only complete application packets will be processed.

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