



**DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM
APPLICATION INSTRUCTIONS**

Delgado Community College
Allied Health Admissions
615 City Park Avenue
Building 4, Room 313
New Orleans, LA 70119
Phone: 504-671-6201 Fax: 504-483-4609

Thank you for your interest in the **Diagnostic Medical Sonography Program**.

Please review all instructions before beginning the application process.

THE ONLINE ADMISSIONS APPLICATION FOR THE DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM INCLUDES THE FOLLOWING INFORMATION:

- *Online Application (Online)
- *Technical Standards MOU Form / Acknowledgement Statement Form
- *Documentation of Observation form(s)
- *Unofficial / Official Transcripts of all Colleges attended
- *Narrative Statement

APPLICATION DEADLINE

MAY 1st

(Class Beginning – August each year)

APPLICATION INSTRUCTIONS

TRANSCRIPTS

- Unofficial transcripts are required to be submitted with the online application for **EACH** college or university attended other than Delgado.
- Official transcripts should be sent to the Delgado Community College Admissions Office.

Note: If you send your application packet DURING ANY semester, while you are enrolled in a college/university, it will be necessary for you to submit updated transcripts after completion of that particular semester.

Acknowledgement and Notification of Missing Credentials:

An Acknowledgment verifying receipt of your application by the Allied Health Admissions Office will be sent via email provided on Application. Notification of Missing Credentials email may be sent at a later date if your application is missing any information.

DOCUMENTATION OF OBSERVATION FORMS

Documentation of observation for the Diagnostic Medical Sonography Program is **strongly encouraged**. A maximum of 40 hours is recommended. All Observation of Sonography should be completed by **May 1st**.

- Complete the Document of Observation section in the online application before submission once all observation is completed.
- If Observation will not be completed, select “**NO**” on application.
- If for any reason, Observation will not be completed before submission of the online application, please contact mtoups@dcc.edu before **May 1st**.

NARRATIVE STATEMENT

Please include descriptive answers to the following in your narrative:

- Why you are interested in this field of study.
- Describe your Short-Term and Long-Term career goals.
- What type of research you have done regarding Diagnostic Medical Sonography.
- *Briefly describe your educational background (OPTIONAL)*

NOTE 1: If you have any questions after reviewing the application, Please contact the Allied Health Admissions Office – (504)-671-6201.

NOTE 2: Questions regarding program interviews, curriculum, academic schedules or special circumstances should be directed to the Program Director, Michael Toups – (504)-571-1435 or mtoups@dcc.edu.

Technical Standards: See Diagnostic Medical Sonography Program Webpage on the College Website. www.dcc.edu.