

Delgado Community College
Radiation Therapy (RATH) Program

APPLICATION COMPLETION CHECKLIST

MUST BE COMPLETE BY May 1,2023

_____ Submit your Application to the Radiation Therapy Program online at:

<https://www.dcc.edu/academics/allied-health/programs/radiation-therapy/application.aspx>

_____ Submit official transcripts from EACH college or university attended, other than Delgado Community College, to ensure graduation requirement are met. Transcripts can be

1. mailed directly to the Allied Health Admission Office at 615 City Park Ave. New Orleans, LA 70119

OR

2. Emailed from the sending institution to the Allied Health Admissions Office at ahatranscripts@dcc.edu

_____ Upload unofficial transcripts from EACH college or university attended, other than Delgado Community College. The unofficial transcripts will allow admissions to begin processing your program application.

_____ Verify that all **three** recommendation forms have been completed electronically. Please note that some institutions may block the email from DCC requesting a recommendation. It is your responsibility to ensure that the email address's you provide in your application will accept the form electronically. (You may need to request a personal email address from the recommender.)

_____ Documentation of Observation Form(s).

Documentation of observation in radiation therapy is required. A minimum of 40 hours is recommended.

Download and complete Part 1 of the observation form. Upon completion of observation, present this form with a self-addressed stamped envelope to the radiation therapist who will be providing your documentation of experience.

The radiation therapist must SEAL the envelope provided by the applicant and SIGN ACROSS THE SEAL to insure confidentiality. This form may either be mailed, or hand delivered to the applicant. **The applicant must submit the UNOPENED envelope to the Allied Health Admissions Office to be added to their application folder.** If you observe at more than one site, a form must be completed for each site. Copies of this form are acceptable. Envelopes can also be mailed to:

Allied Health Admissions
Building 4, Room 313
615 City Park Avenue
New Orleans, LA 70119

NOTE: If your name, address, phone, or email address changes after you submit your RATH Program Application you must notify the Allied Health Admissions Office.