NORTHERN ILLINOIS UNIVERSITY SCHOOL OF HEALTH STUDIES DIETETIC INTERNSHIP

APPLICATION NOTIFICATION FORM

NAME: _____

| √ Check if | Admission Requirements |
|------------|--|
| completed | |
| | Dietetic Internship Program Application – completed via DICAS system |
| | • Completion of (or Intent to Complete) Didactic Program in Dietetics (DPD) program |
| | Personal Statement |
| | • 3 Letters of Recommendation |
| | • Completion of a minimum of 150 hours of dietetics-related work experience – <i>work history</i> |
| | completed in application |
| | Official Transcripts of Undergraduate coursework |
| | Graduate School Application – online via NIU Graduate School |
| | Submission of computer matching application to D&D Digital |
| | \$25.00 application fee for Dietetic Internship (check made payable to Northern Illinois University) |
| | included |

All information submitted is accurate.

Signature

Date

Please check all that apply.

- □ White, non Hispanic
- □ Black, non Hispanic
- □ Hispanic

Birth Date: _____

□ Asian or Pacific Islander

□ American Indian, Alaskan Native, Hawaiian Native

PLEASE RETURN THIS FORM AND PAYMENT TO: Nancy T. Prange, PhD, MPH, RDN, LDN Director, Dietetic Internship School of Health Studies Northern Illinois University DeKalb, IL 60115-2828
