

NORTH DAKOTA STATE UNIVERSITY
Professional Program in Dietetics
Department of Health, Nutrition, and Exercise Sciences

APPLICATION FORM - 2016
Applying for: (may check both)

☐ **DEP**
☐ **DPD**

All information on this application must be typed.

Date _____

Name _____
(Last, First, Middle or Maiden)

Present Address _____
(Street)

(Apt. #)

(City, State, Zip Code)

(Phone)

Permanent Address _____
(Street)

(Apt. #)

(City, State, Zip Code)

(Phone)

Telephone number where you can be reached between semesters _____
(Area Code)

E-mail _____

Advisor Name _____

Student ID # (for NDSU students only) _____

International Applicants: Designate Immigration Status _____ Expiration Date: _____

The application packet should include 4 copies of the following:

1. Cover Letter – addressed to Dietetics Selection Committee
2. Completed Application Form
3. Official transcripts from all post-secondary academic institutions attended. Transcripts “issued to student” are acceptable. Include a Transfer Credit Report if transferring credits for another post-secondary academic institution. Transcripts are not required for courses taken for college credit during high school.
4. Two letters of reference under separate cover – only one copy of each is needed (include in your application packet in a sealed envelope with the signature of the reference across sealed flap).
5. \$35.00 Capacity Enrollment Fee – if you are not accepted into the program, this fee will be refunded (to HNES dietetics in the form of cash, check, or money order).

Selection Criteria will be based on: Overall GPA, Science GPA, Letters of Recommendation, Work Experience, Volunteer Experience, Professional Student Organization Participation, Cover Letter, Application Form, and Personal Interview.

All application materials must be received by February 3, 2016.

Education: List all colleges and universities attended after graduation from high school, with most recent listed first.

<u>School</u>	<u>Address (City/State)</u>	<u>Dates</u>	<u>Degree</u>

Instructions for completion of coursework section of application:

1. Complete the coursework form with the grade and grade points earned. List all coursework completed under each category.
2. Convert all grade point scales to A=4, B=3, C=2, D=1, F=0 points if your college or university utilizes a different point scale.
3. For repeated courses, list both grades earned but use only higher grade to calculate overall GPA for that category.

For example:

Chemistry 000 Fall/01	4 credits	F		
Chemistry 000 Spring/02	4 credits	B	12	(3.0 X 4 credits)

4. Include all courses which you have taken or in which you are currently enrolled. Place an **(IP)** in the grade earned column of courses in which you are currently enrolled or **(SS)** in the grade earned column of courses in which you plan to enroll during summer session. **Do not include these in total credits earned.**
5. Also include all classes that you have taken pass/fail. Place a P/F in the grade earned column. **Do not include these in total credits earned.**
6. Please note the following GPA criteria for admittance: **3.0 overall GPA; 2.75 in selected science classes** including, BIOL 220 Human Anatomy and Physiology I, BIOL 221 Human Anatomy and Physiology II, CHEM 121 Gen. Chemistry I, CHEM 121L Gen. Chemistry I Lab, CHEM 240 Survey of Organic Chemistry, CHEM 260 Elements of Biochemistry, HNES 250 Nutrition Science, MICR 202 Intro Microbiology, MICR 202L Intro Microbiology Lab

Grade earned – Letter grades A – F except: IP – in progress; W-waived; P/F- pass/fail; SS-summer session.
Grade points earned – Grade earned on a 4 point scale X number of credits.

Transfer Students – Use the NDSU course number (using URL <https://www.ndsu.edu/transfer/equivalencies/>) for the course equivalency database in order to identify the appropriate transfer credits for courses taken at another post-secondary academic institution.

***HD&E 189 or the equivalent is required of all entering freshmen and new students who transfer fewer than 24 semester credits to NDSU. Math 103 or Math 104 is not required if math placement test places student in Math 105 or higher. ENGL 110 is not required if student has an ACT composite score of 21 or above.**

Please note that this form is stored in the Acrobat PDF format. If the link doesn't work for you, you may need to install the free Acrobat reader software or possibly download a newer version of the Acrobat software. To download the necessary software, visit <http://www.adobe.com/products/acrobat/readstep2.html> and follow the instructions for downloading and installing Acrobat Reader.

**Curriculum Guide for the Professional Dietetic Options [Dietitian Education Program
(DEP) and Didactic Program in Dietetics (DPD)]**
Department of Health, Nutrition and Exercise Sciences
College of Human Development and Education
North Dakota State University

Please enter the grade you received for each of the following courses. Enter **IP** (In Progress) if you are currently enrolled and **SS** if you will be taking course during summer session, or **W** if course has been waived.

Credits Grade Earned Grade Points
Earned

I. PROFESSIONAL STUDIES
(Required in 4 Year Plan of Study)

ANTH 111 Intro to Anthropology or Soc.110	3
COMM 110 Fundamentals of Public Speaking	3
ECON 105 Elements of Economics	3
*ENGL 110 College of Composition I	3
ENGL 120 College of Composition II	3
*HD&E 189 Skills for Academic Success	1
HNES 141 Food Sanitation and Safety	1
HNES 291 Introduction to Dietetics	1
HNES 251 Nutrition, Growth and Development	3
*MATH 103 or MATH 104	3
PSYC 111 Introduction to Psychology	3
PSYC 211 Introduction to Behavior Modification	3
Or PYSC 280 Introduction to Health Psychology (new plan)	
STAT 330	3
Humanities	
_____	3
_____	3

Additional professional studies courses complete or In Progress on 4-year plan

(use additional page if needed)

Total	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
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Professional Studies (other dietetics related courses): (Exclude P/F, IP, & SS for total credits)

Grade Point Average in Professional Studies:
(Credits taken X grade point earned ÷ credits taken)

Credits Grade Earned Grade Points
Earned

II. SCIENCE (Natural & Physical) (Required in 4 year Plan of Study)

BIOL 220 Human Anatomy and Physiology I	3
BIOL 221 Human Anatomy and Physiology II	3
CHEM 121 Gen. Chemistry I	3
CHEM 121L Gen. Chemistry I Lab	1
CHEM 240 Survey of Organic Chemistry	3
CHEM 260 Elements of Biochemistry	4
HNES 250 Nutrition Science	3
MICR 202 Intro Microbiology	2
MICR 202L Intro Microbiology Lab	1

Total **Science Studies: (Exclude P/F, IP, W, & SS for total credits)**

Grade Point Average in Science Studies:

(Credits taken X grade point earned ÷ credits taken) (**2.75** is required)**III. ELECTIVES (not required in 4 year plan of study)**

	Credits	Grade Earned	Grade Points Earned

(use additional page if needed)

Total **Electives (Exclude P/F, IP, & SS for total credits)**

Grade Point Average in Elective Studies:

(Credits taken X grade point earned ÷ credits taken)

CUMULATIVE GPA (including all colleges & universities attended)

_____ Total grade point earned (Professional Studies + Science + Electives)

_____ Total credits earned (Professional Studies + Science + Electives)

_____ Cumulative grade point average based on 4.0 system (Total grade points earned ÷ total credits earned) (**3.0** is required)

WORK EXPERIENCE

Paid work experience in the past 5 years. List paid work experience beginning with the most recent experience. Briefly describe responsibilities.

<u>Organization Name</u> <u>City/State</u>	<u>Position,</u> <u>Title</u>	<u>Inclusive Dates</u> <u>(Mo/Yr)</u>	<u>Hrs/Wk</u>	<u>Name and Title of Supervisor/Phone #</u>
1. _____				
Key Responsibilities				

2. _____				
Key Responsibilities				

3. _____				
Key Responsibilities				

4. _____				
Key Responsibilities				

5. _____				
Key Responsibilities				

6. _____				
Key Responsibilities				

7. _____				
Key Responsibilities				

(use additional page if needed)

Extracurricular/Volunteer Activities: List memberships (specify year(s) of membership), appointed or elected offices you held in organizations. Please indicate if it was high school or college, with most recent listed first.

Honors: List scholarships and honors received. Please indicate if it was High School or College, with most recent listed first.

Immunizations, background checks, and other requirements: Well-being of patients and clients is the first priority of health care facilities. In order to assure patient well-being and safety, health care facilities require students, interns, and employees to obtain and show proof of: vaccinations (including but not limited to: Varicella, Diphtheria, Tetanus, and Pertussis, Influenza, Hepatitis B, Measles, Mumps, and Rubella); yearly tuberculosis screening; and a federal, state and local, criminal background check with ID trace and search of the sex offender registry. In order for students to fully participate and successfully complete the program, they must be willing to obtain the required vaccinations, testing, and background check.

Please check one of the following options:

☐ I understand the requirements for vaccinations, background checks, and tuberculosis testing. If admitted to the program, I agree to receive any required vaccinations if I have not already received them, as well as undergo necessary tuberculosis testing, and the background check screening.

☐ I understand the requirements for vaccinations, background checks, and tuberculosis testing. I understand that a condition for being accepted into the Dietitian Education Program (DEP) is meeting these requirements and that if I do not I may only be considered for the Didactic Program in Dietetics (DPD), however, I DO NOT agree to meet these requirements.

Explanation (required):

Recommendations: List the names of the two (2) individuals who will complete your recommendation forms. (1 Academic and 1 Job/Volunteer)

Name	Title	Address	Phone
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<hr/>	<hr/>	<hr/>	<hr/>

LETTERS OF RECOMMENDATION

Two letters of recommendation are required and should be sent under separate cover to the address noted on this application form.

- 1) Academic – This letter should be written by a professor. This person should address your academic potential for success in the Program. Do not include a recommendation written by Dietetics Selection Committee (Dr. Ardith Brunt, Dr. Yeong Rhee, Dr. Sherri Stastny or Elizabeth Hilliard)
 - 2) Job/Volunteer – This letter should be written by a person who supervised you in a job or volunteer position. This person should address your interest and ability to work in the technologically-based profession of dietetics. The letter should be typed and on letterhead.
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OPTIONAL

The information requested below is voluntary and will be used for summary reports required by federal, and state laws and regulations and to support institutional affirmative action efforts. It will not be used as a basis for admission or in a discriminatory manner. You will not be subjected to adverse treatment if you do not provide any of the requested information.

Gender (check one): ☐ Male ☐ Female

Predominant Ethnic Background (check one):

- ☐ Hispanic/Latino
 - ☐ American Indian or Alaska Native (non-Hispanic/Latino)
 - ☐ Asian (non-Hispanic/Latino)
 - ☐ Black or African American (non-Hispanic/Latino)
 - ☐ Native Hawaiian or Other Pacific Islander (non-Hispanic/Latino)
 - ☐ White (non-Hispanic/Latino)
 - ☐ Two or More Races (non-Hispanic/Latino)
 - ☐ Not Disclosed
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CERTIFICATION

I certify that the information that I have provided in this application is true and accurate and recognize that any false or incorrect statements made herein will be grounds for my dismissal from the program.

Date _____

Signature _____

It is the applicant's responsibility to notify the programs in dietetics of any changes in name, address, or telephone number.

Application Packet includes the following:

1. Cover letter (original + 3 copies)
2. Application Form (original + 3 copies)
3. Official transcripts (or copies issued to the student) and Transfer Credit Report if applicable – Original (which can be opened for photocopying) + 3 photocopies
4. Two letters of reference (each in its own envelope)
5. \$35.00 Capacity Enrollment Fee
6. Please organize this information into 4 separate application packets (one for each member of the selection committee)

Please submit application packet by Wednesday, February 3, 2016 to:

Elizabeth Hilliard, MS, RD
Chair of the Dietetics Selection Committee
Department of Health, Nutrition, and Exercise Sciences
NDSU Dept # 2620- EML 351
P.O. Box 6050
Fargo, North Dakota 58108-6050