

APPLICATION FOR ADMISSION



Interdisciplinary Graduate Program in Nutritional Sciences University of Washington

305 Raitt Hall, Box 353410
Seattle, WA 98195-3410
nutr@u.washington.edu
(206) 543-1730

1. NAME: _____
Last First Initial

2. FORMER NAME (of previous school records): _____

3. MAILING ADDRESS:

TELEPHONE, FAX, E-MAIL:

_____ (_____) _____
Street Home

_____ E-Mail
Country

Legal Residence (if U.S., which state): _____ SEX (optional): Male Female

4. DEGREE APPLYING FOR:

Select one: Admission Date (Qtr/Yr)
MS _____
MPH _____
PhD _____

5. NUTRITION AREA OF INTEREST _____

6. EDUCATION (List highest degree first)

<i>Institution</i>	<i>Location</i>	<i>Degree</i>	<i>Major</i>	<i>Dates</i> <i>From To</i>
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7. EXAMINATIONS TAKEN OR PLANNED:

GRE Date_____ Score: Verbal_____ Quantitative_____ Analytical_____

TOEFL Date_____ Score_____

8. HAVE YOU SUBMITTED AN APPLICATION TO THE GRADUATE SCHOOL ? (circle) Yes No

(The Graduate School Application must be submitted to Graduate Admissions by the departmental deadline)

9. HAVE YOU CONSULTED OR CORRESPONDED WITH UW NUTRITIONAL SCIENCES FACULTY?

Yes No If yes, Please list their names:

TRAINING FOR PROFESSIONAL CREDENTIALING IN NUTRITION AND DIETETICS: (SEE PAGE 4 FOR TERMS AND DESCRIPTIONS OF THE DIETETIC PROGRAMS)

10. Are you currently a Registered Dietitian? Yes ___ (Go to 11)
No ___ (Go to 10a)

a. Do you plan on becoming a Registered Dietitian? Yes ___ (Go to 10b)
No ___ (Go to 11)

b. Have you completed all of the coursework in dietetics and received a verification form from a dietetic program director? Yes ___ (Go to 10d)
No ___ (Go to 10c)

c. Will you complete all of the coursework in dietetics before you enter the University of Washington ? Yes ___ (Go to 10d)
No ___ (Go to 10e)

d. Are you applying for the Dietetic Internship? Yes ___ (Go to 11) Complete the Dietetic
No ___ (Go to 11) Internship Application

e. Do you plan on completing the coursework in dietetics at the University of Washington? (Didactic Program in Dietetics) Yes ___ (Go to 11) (Also complete section 11b)
No ___ (Go to 11)

11. PREREQUISITES

a. Prerequisites for **Nutritional Sciences** (all applicants)

Course _____ **Institution** _____ **Date** _____ **Grade** _____

General Nutrition _____

General Chemistry _____

11. PREREQUISITES (CONTINUED)

Biochemistry (2 quarters) _____

Human Physiology (2 quarters) _____

Organic Chemistry _____

b. Prerequisites for the **Didactic Program in Dietetics** (Complete only if 10e= "Yes")

<u>Course</u>	<u>Institution</u>	<u>Date</u>	<u>Grade</u>
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English	_____	_____	_____
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Psychology	_____	_____	_____
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Microbiology	_____	_____	_____
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12. NUTRITION-RELATED EXPERIENCE (LIST LATEST FIRST. PLEASE USE SEPARATE SHEET(S) IF NECESSARY.)

<i>Organization</i>	<i>Location</i>	<i>Title and/or Duties</i>	<i>Dates</i>	
			<i>From</i>	<i>To</i>

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

13. HONORS, SCHOLARSHIPS AND GRANTS:

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

14. PROFESSIONAL CERTIFICATION, LICENSURE, AND SOCIETY MEMBERSHIP:

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

15. PUBLICATIONS:

16. PERSONAL REFERENCES (MINIMUM OF THREE, NO FORMAT PROVIDED):

1) _____

2) _____

3) _____

PERSONAL STATEMENT: Please be as specific as possible in answering the questions below. **Use no more than four double-spaced typewritten pages.**

1. Discuss your qualifications and readiness for pursuing graduate studies in nutritional sciences.
2. Describe a specific problem area or a problem that is of interest to you in nutritional sciences.
3. What are your career plans?

I certify that the information contained in this application is true to the best of my knowledge.

(Name)

(Date)

SUBMISSION OF DEPARTMENTAL APPLICATION: Submit this application along with your personal statement, transcripts, yellow copy of the Graduate School Application, copy of the TOEFL, if applicable, and official GRE scores, to: Graduate Program Assistant, Nutritional Sciences, University of Washington, Box 353410, 305 Raitt Hall, Seattle, WA 98195-3410, Tel (206) 543-1730, Fax (206) 685-1696, Email: nutr@u.washington.edu. Please make sure the Department receives the three letters of recommendation by the deadline. They may be sent with the Application Packet (in sealed envelopes) or separately. **(THERE IS NO FORM FOR LETTERS OF RECOMMENDATIONS)**

Departmental Application Deadlines for Autumn Quarter: Feb 1

GRADUATE SCHOOL APPLICATION: The application fee for Graduate students is \$50. The fee is \$45 for those applying for Graduate status interactively on the Web (www.grad.washington.edu/application/).

If you are unable to access the Graduate Admissions web page, please contact the office directly at (206) 543-5929 or e-mail them at uwgrad@u.washington.edu.

The University of Washington reaffirms its policy of equal opportunity regardless of race, color, creed, religion, national origin, sex, sexual orientation, age, marital status, disability, or status as a disabled veteran or Vietnam era veteran in accordance with University policy and applicable federal and state statutes and regulations. The University of Washington is committed to providing access, equal opportunity and reasonable accommodation in its services, programs, activities, education and employment for individuals with disabilities. To request disability accommodation in the application process contact the Disability Services Office at least 10 days in advance at (206) 543-6450/V, (206) 543-6452/TTY, (206) 685-7264 (FAX), or email at dso@u.washington.edu.

