

**Southeastern Louisiana University
Department of Kinesiology and Health Studies**

Bachelor of Science in Health Studies

Application for Admission

Admission is limited to individuals who are currently enrolled in or have completed an accredited certificate, diploma, or associate degree program in a health care specialization.

Application for admission and all other required documentation must be completed in full and turned into the office of the Coordinator of the Health Studies Program.

I. PERSONAL INFORMATION:

(Please type or neatly print all information)

Today's Date: _____

Student W#: _____

Name: _____
(Last) (First) (Middle)

Local Address: _____
(City) (State) (Zip)

Local Phone # : () _____

Permanent Address: _____
(City) (State) (Zip)

Permanent Phone #: () _____

Email Address: _____

Date of Birth: _____

Please check all that apply. All necessary copies must be provided.

____ Certification	Type of certification: _____
____ Licensure	Type of licensure: _____
____ Diploma	Type of diploma: _____
____ Associate Degree	Major: _____

III. LETTER OF INTENT:

The letter of intent is used to provide the Health Studies Admission and Retention Committee with more insight into the following:

1. Why you have chosen this major?
2. Your career and educational goals and expectations.
3. Your previous experiences as they relate directly to health education and/or your health care specialization.
4. Please include a statement on whether or not you will attend school on a full-time or part-time basis and the semester in which you will start taking classes toward this degree.

The letter of intent should be 1-2 pages (no more), typed, and single spaced.

IV. TRANSCRIPTS:

Official transcripts from all universities and/or accredited institutions must be mailed to: Evelyn J. Del Rio, SLU Box 10845 Hammond, LA 70402.

V. PROBATIONARY STATUS:

Students may be granted probationary status until they have completed all coursework and have graduated from an accredited certificate, diploma, or associate degree program in a health care specialization. Students must have met the GPA requirement in order for this to take place. Students may not progress to the internship portion of this program until they have met all requirements and may be removed from probationary status at that time.

VI. OTHER INFORMATION:

Students who are given formal admittance into the Health Studies Program will be required to submit evidence of their current CPR card(s) before they are allowed to participate in the internship portion of this program. These include American Red Cross (CPR for the Professional Rescuer) and/or American Heart Association (Health Care Provider or National Safety Council, Healthcare Provider).

Students who are given formal admittance into the Health Studies Program will be subject to random drug testing during the internship. Students are required to submit a criminal background check at students' own expense prior to the internship portion of the program.

VII. SIGNATURE OF APPLICANT:

I certify that all information that is provided in this application and its supporting documents best portrays me as an individual applying to the Health Studies Program. Any false statements or intentional misrepresentations will result in the denial of my application.

(Signature of Applicant) (Applicant's printed name) (Date)

Please mail or bring application packet to:

Evelyn J. Del Rio, Coordinator of the Health Studies Program
SLU Box 10845
Hammond, LA 70402
Office: (985) 549-3871
Fax: (985) 549-5119
Office Location: MIMS 234
Email: edelrio@selu.edu

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