



Track 2 Application Materials

Dear Prospective Dosimetry Student:

Thank you for expressing an interest in our Medical Dosimetry Program at Southern Illinois University Carbondale.

All Medical Dosimetry application materials are enclosed. To be considered for admission, you must complete and submit all requested application materials for evaluation. **It is very important that you follow the procedures accurately and that your file is completed as soon as possible.** Only completed files will be considered. Review of completed applications will be performed as they come in.

If you have any questions concerning the program, or the admission process, please feel free to contact me.

Sincerely,

Scott Collins, MS.Ed., RT(R)(T) CMD
Program Director
Medical Dosimetry



The following is a check list of things that need to be completed.

1. _____ **Apply to the Graduate School at Southern Illinois University Carbondale. Please be sure to choose the “Medical Dosimetry Program” on the following Graduate School Application. Follow link below:**

<http://www.siu.edu/gradschl/>
2. _____ **Pay on-line the \$50.00 program application fee. If you can not pay by credit card, submit a check or money order for \$50.00 made payable to SIUC Medical Dosimetry Program.**
3. _____ **Submit the Medical Dosimetry application form, two letters of reference, and a one page statement of interest to the Admissions Clerk.**
3. _____ **Send official copies of all college transcripts to the Admissions Clerk.**
4. _____ **If you are currently enrolled in any coursework, send a copy of your class schedule to the Admissions Clerk**

NOTE: It is important that you follow the procedures accurately and that your file is complete as soon as possible. Only completed files will be considered. Review of completed applications will be performed as they come in. A letter will be sent stating your acceptance or rejection to the program. If you have further questions, please feel free to contact Scott Collins, Program Director, at (618) 453-8800 or by email: kcollin@siu.edu.



Track 2 Medical Dosimetry Program Southern Illinois University Carbondale

Last Name	First	Middle	ID. Number
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Present Address	Legal Address
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City	State	Zip	City	State	Zip
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Current Telephone	Home Telephone	E-mail Address
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Communications should be sent to: Present Address Legal Address E-mail Address

I am currently a Certified Medical Dosimetrist at _____.

How many years of dosimetry experience do you have? _____.

What year did you become a CMD? _____.

List College(s) Attended. If more room is needed, please attach a separate sheet.

College Name	City/State	Dates Attended	Degree/Major	Year Graduated
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College Name	City/State	Dates Attended	Degree/Major	Year Graduated
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College Name	City/State	Dates Attended	Degree/Major	Year Graduated
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I hereby certify that the information I am submitting in this application is complete and correct to the best of my knowledge.

Signature of Applicant	Date
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**Track 2
Medical Dosimetry
Southern Illinois University Carbondale**

Application Continued:

Please type a one page paper to inform the Selection Committee why you have chosen to pursue a Master of Science Degree in Medical Dosimetry.

In addition to the paper, have two letters of reference sent for the selection committee to review. These letters should come from previous educators or supervisors.

Mail Completed Medical Dosimetry Application Materials to:

Donna Colwell, Admissions Clerk
School of Allied Health, MC 6615
College of Applied Sciences and Arts
Southern Illinois University
Carbondale, IL 62901
(618) 453-8869