

LETTER OF INTENT
California State University, Long Beach
ADA Dietetic Internship (DI)
E-mail or Fax to Dr. Gail Frank, RD at 562-985-4414

Date: _____

I _____, have/ will have (circle one) a BS degree in _____ (major). Presently I am/ am not enrolled (circle one) in graduate classes at CSULB. I am interested in applying for the Fall _____ DI. I understand that the following criteria have to be met for admission:

1. Graduated or will graduate from the following University/College: _____

Date of the Didactic Program Completion: _____

I have a Verification Statement of Didactic Program completion signed by the Didactic Director?

Yes ___ Not Yet ___

2. I have completed or I intend to enroll in two of the following CSULB core graduate courses:

	<u>Semester</u>	<u>Grade</u> (if completed)
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FCS 531 (Spring) Advanced Community Nutrition	_____	_____
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FCS 533 (Spring) Recent Advances in Food Science	_____	_____
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FCS 562 (Fall) Contemporary Issues in Nutrition	_____	_____
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3. Available for interview at CSULB during the interview process in March? No ___ Yes ___

Best time: _____ Best day of the week: _____

Best mailing address including zip:

Phone: (H) _____ (O) _____

e-mail address _____

I _____ hereby verify all information above is correct, I acknowledge that it is my responsibility to complete and to provide all necessary documentation in a timely manner for competitive application to the DI program.

Signature: _____