



APPLICATION INSTRUCTIONS DENTAL LABORATORY TECHNOLOGY

Your application will not be processed until all of the following information/documentation is received by the LSUSD Office of Student Admissions. **The deadline is MAY 31.**

Application filled out completely and mailed to LSUSD.

- _____1. \$50.00 Check or money-order, make check Payable to **LSUHSC**. (**Non-refundable** application fee)
- _____2. Passport sized photo (2 ½ x 2 ½) attached to application
- _____3. Copy of Driver's License
- _____4. Proof of Residency Form
- _____5. Copy of your current Draft Card status (males only) you can print a copy off the internet at <http://www.sss.gov>

Arrange to have the following information sent directly to
LSU School of Dentistry,
Office of Student Admissions,
1100 Florida Ave.,
Box 228,
New Orleans, LA 70119.

- _____1. Official transcripts sent by the registrar of every college you have attended. It is your responsibility to forward additional transcripts after each semester is completed.
- _____2. One confidential rating form. Completed by a faculty member who has instructed you in a college course. (Preferably in a science course).

LSU School of Dentistry, Office of Admissions
Phone: 504-941-8124
Email: ds-admissions@lsuhsc.edu

It is the applicant's responsibility to make sure all items are received by MAY 31ST.