

**MY LSU
DENTAL HYGIENE APPLICATION CHECKLIST**

DATES:

Requested/ Submitted	Completed/ Received
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1. DHCAS : www.adeadhcas.org

A. Complete Entry-level application

Check email for verification of application arrival

Follow application status to “complete”

B. Transcripts mailed after fall semester completed (if appropriate)

Address: DEA DHCAS Transcript Processing Center,
P.O. Box 9129
Watertown, MA 02471.

(Separate Transcripts must be submitted for all colleges attended)

C. Personal essay submitted to DHCAS

D. Two letters of reference:

1. Requested from a college professor:

Name: _____

2. Requested one additional:

Name: _____

Letters received by DHCAS: 1 2

****Applications not completed by February 1st will not be considered for admission***

2. Supporting Documents to be mailed to:

Office of Student Admissions
1100 Florida Ave., Box 228
New Orleans, LA 70119

A. Resident verification Form completed with**

Passport sized photo (2 ½ x 2 ½) attached

****Dental Hygiene applicants must be residents of Louisiana**

B. \$50.00 Non-refundable application fee paid online through the [LSUHSC Fee Payment Portal](#).

C. Copy of Driver’s license sent to LSUHSC School of

D. (males only) Copy of your current Draft Card status you can print a copy off the internet at www.sss.gov

E. Official ACT scores must be submitted to our office from ACT. It is your responsibility to contact the ACT Office at 319-337-1313 for permission to release scores to LSUHSC. The ACT School code is 1601. No photocopies accepted. This requirement will not be waived; placement test will not substitute for this requirement.

F. Official ATDH scores submitted directly to our office. No photocopies accepted. See www.ada.org/ATDH for further details for submission.

Your application will not be processed until all of the Section 2 information/documentation is received by the LSUSD Office of Student Admissions.

It is the applicant’s responsibility to make sure all items are received and completed by the deadline, February 1st.