University of Iowa,

Medical Laboratory Science Program

Application for Admission to **University of Iowa, IA Medical Laboratory Science Program**

- Note: Read instructions and forms carefully
- Applications accepted through April 1st
- Reference and Technical Standards forms can be found at: https://mls.medicine.uiowa.edu/

Personal Information

Name: _____   Date of Birth (month/day/year): _____/_____/_____

               Last   First   Middle

Present Mailing
Address:_____

       Street   City   State   Zip Code

Phone: (_____) _____   Email: _____

Permanent Address: _____

Have you ever been convicted of a felony? _____Yes   _____No

Educational Background

Universities/Colleges Attended: **Please have an official transcript sent for each school by the application deadline.**

Name	Location	Date Attended	Degree

What is/are your major(s)? _____

What is/are your minor(s)? _____

Will you have a BS/BA degree before entering the program? _____Yes   _____No

Is English your first language? _____ Yes _____No

If no, do you have a TOEFL score? _____Yes   _____ No

If yes, please record TOEFL score here _____

Have to previously enrolled in an MLT or MLS program that you did not complete? _____Yes _____No

If yes, please list the name and dates of the program, in addition to the reason for not completing.

_____

List any honorary and professional organizations, scholarships and honors, college and post college) extra-curricular activities and offices held. You should not list any which indicate race, religion, color or national origin.

_____

_____

_____

_____

Employment Background

Are you a U.S. citizen? _____Yes _____No

If you are not a U.S citizen what is your VISA type? **Please check below and submit a copy with this application.**

_____Student_____Exchange visitor _____Permanent resident _____other, specify: _____

Professional or Work Experience:

Employer	Address	Position	Dates
1._____			
2._____			
3._____			
4._____			

References

Two reference forms are required for applicants. One reference is to be from a college science professor or teaching assistant and the second reference from a former/current employer.
List below two people from whom you plan to obtain a reference.

Name	Title	Phone	Address
1._____			
2._____			

Transcripts

All applicants must submit a/an official transcript(s) at the time of application. In addition, please list the courses (with credits) planned for the remainder of the year.

Planned coursework:

Interest

Please include with this application a one page typed essay describing why you chose MLS as a career and your future plans as an MLS.

Checklist of material required to complete application, all to be postmarked by **October 1st.**
_____College Transcripts (eTranscripts are acceptable through a certified company)
_____Letters of Reference – two required (form found online)
_____Technical Standards (form found online)
_____One page typed essay describing why you chose MLS as a career & your future plans as an MLS.

I certify the information in this application is complete and correct.

Signature_____ Date:_____

University of Iowa does not discriminate in its educational programs and activities on the basis of race, national origin, color, religion, sex, age, disability, or veteran status.

The University of Iowa MLS Program requests this information for the purpose of making an admission decision about you. No persons outside the Admission's Committee are provided this information. Misrepresentation of information on this application may invalidate the application and make you ineligible for consideration for any Iowa Medical Laboratory Science/Medical Technology Program.

Send all information to the following email address: mls-program@uiowa.edu

MLS Program Staff Checklist:

Post Marked Date: _____   Transcripts Received: _____

Technical Standards Received: _____   References Received: 1_____ 2_____

Essay recieved: _____   Application Scanned: _____

Status of application: _____   Notified of Status: _____