



— DEPARTMENT OF —
**HEALTH
SCIENCES**
Application for AS in Health Sciences

If you have not met with a Health Sciences advisor, please call (801) 626-6136 to set up an advisement appointment.

Wildcat W# _____ e-mail address: _____

Name _____
LAST FIRST MIDDLE

List **any other names** under which we may find your transcripts _____

Home Address _____
STREET

CITY STATE ZIP

Phone Numbers: HOME () _____ WORK () _____ Cell () _____

Note: All applicants must submit a non-refundable **\$25.00** processing fee.

To pay over the **phone** with a card, call Cashiers at (801)-626-8006. **You must give them code NR 20.**

Please attach the receipt (proof of payment) with the application and send to HealthProfessions@weber.edu.

Or you can **mail** in a **personal check/cashier's check/money order** payable to **WSU/DCHP** along with the application. Or you may bring the payment along with your application to **MH 108 (no cash is accepted)**.

Please check the 1 Health Sciences Track you want to pursue:

The track requirements can be found on the Health Sciences information sheet at Weber.edu/chpadvising

- ☐ Health Sciences General
- ☐ Dental Hygiene
- ☐ Medical Laboratory Sciences
- ☐ Nursing
- ☐ Radiologic Technology
- ☐ Respiratory Therapy

Signature _____ Date _____

*Signature is not required if form is digitally completed and emailed through Wildcat email address.

Submit Application and Receipt/Fee to:

Weber State University Dumke College of Health Professions
Admissions Advisement Office
3875 Stadium Way Dept 3907
Ogden, UT 84408-3907

Or email application and receipt to HealthProfessions@Weber.edu from your Weber email



**Be advised that in order to graduate you need to apply for Graduation online.
Log into your eWeber portal, and type "Graduation Application."**