

ADDITIONAL INFORMATION REQUESTED

Updated 3/2022

Applicant's Name _____ E-mail: _____ phone _____

CHOICE OF HOSPITAL:

Please select 1st, 2nd and 3rd preferences for the hospital you would like to complete your internship:

- _____ AMITA Health Adventist Medical Center
Hinsdale/LaGrange/Bolingbrook, IL (1-2 interns)
- _____ Dayton Children's Hospital, Dayton, OH (2 interns)
- _____ Kettering Health Network, Kettering, OH (1-3 interns)
- _____ Lakeland Healthcare System, St Joseph, MI (1 intern)
- _____ Spectrum Health, Grand Rapids, MI (3 interns)
- _____ Florida Hospital Memorial Medical, Daytona Beach, FL (1 intern)
- _____ Florida Hospital Waterman, Tavares, FL (1 intern)
- _____ Florida Hospital Zephyrhills, Zephyrhills, FL (0-1 intern)
- _____ Florida Hospital Tampa, Tampa, FL (1 intern)
- _____ Goshen Hospital, Goshen, IN (1 intern)
- _____ Columbus Regional Health, Columbus, GA (1 intern)
- _____ Community Hospital, IN (1-2 interns)
- _____ Memorial Hospital, South Bend, IN (1 intern)
- _____ Texas Health Huguley Hospital, Fort Worth, TX (1 intern)

REASON(S) FOR PREFERENCE:

Specialty Rotations:

Our internship has an opportunity for 1-2 interns who are passionate about pediatrics and eating disorder to complete a specialty rotation. If interested please check here: _____

EMERGENCY CONTACT PERSON:

Name: _____ Relationship: _____

Phone: _____ E-mail: _____

Address: _____

Our program requires an application fee of \$50.00. Send application fee via check or money order to:

Dietetic Internship
Andrews University
Sherri Isaak, MS, RD, CDCES, BC-ADM, DipACLM
School of Population Health, Nutrition & Wellness
Internship Program of Nutrition & Dietetics
8475 University Blvd.
Berrien Springs, MI 49104-0210