### Russell Sage College

# Dietetic Internship Application Release Form 2020-2021

Onsite and Distance Tracks

#### Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### Release for Application File

I authorize my DICAS application to be released to individuals participating in the Russell Sage College Dietetic Internship (RSC DI) selection process. I understand that the purpose of this review is for selection purposes only and information contained in the file will be kept confidential by the reviewers.

**Program Status:** *1= first choice; 2 = second choice;*

\_\_\_\_\_\_\_Full Time \_\_\_\_\_\_\_Part Time

**Program Track:** *(Please check the appropriate track you are applying to. If applying to both tracks, please rank. 1 = First Choice, 2 = Second choice; 0 = not applying)*

\_\_\_\_\_\_\_ Onsite Track \_\_\_\_\_\_\_\_ Distance Track

***DISTANCE TRACK ONLY:* State(s) where you will be completing your supervised practice hours:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***NOTE: All preceptors must be secured upon application to the program. The Preceptor Sign-up Form must be submitted with this document OR with your DICAS application to be considered for the distance track. If submitting the completed form with your DICAS application please check here: □***

***ONSITE TRACK ONLY:*** *For location*: Rank 1-4 (1=First Choice & 4=Last Choice), or 0= unwilling to go to this location

\_\_\_\_\_ Greater Capital District (Albany, Schenectady, Troy & Saratoga Counties)

\_\_\_\_\_ Plattsburgh

\_\_\_\_\_ Other (specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

**Release for placement:** I understand that if I numbered any of the areas above, I may be placed in any of those areas and I will be prepared to remain in chosen area for the duration of the program.

**Application Checklist** **Check, if present**

1. A check for $40 payable to Russell Sage College \_\_\_\_\_\_\_

 *(Fee waived for RSC graduates)*

2.Release form complete with signature below \_\_\_\_\_\_\_

**E-mail Contact:**

Please provide an e-mail address for contact, if necessary, by the RSC DI Application Review Committee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Acceptance Day Procedure:**

On Appointment Day, I will call or e-mail stating my acceptance/rejection of the match by 6:00pm EST to Michelle Morgan, DI Director, 518-244-4598 or morgam1@sage.edu.

I understand the implications of the application release, and the need to identify my preferred program status and placement for acceptance into the RSC DI for fall 2021.

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Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name Date