Application Checklist – MCDPH DI WIC Track

Direct application questions to:

Courtney Baker, MHS, RDN
Dietetic Internship Director
CourtneyBaker@mail.maricopa.gov
(602) 506-9319

Maricopa County Department of Public Health
Office of Community Health Innovation
4041 N. Central Avenue, Suite 1400
Phoenix, AZ 85012

Initial the DICAS application submission acknowledgment:

____ I have submitted the online internship application through DICAS at https://portal.dicas.org by the January deadline, including the following:

  ____ Official college transcripts from all colleges and universities attended have been mailed to DICAS by the deadline on https://portal.dicas.org

  ____ Three letters of recommendation with at least one academic and one work/professional. *Please do not include letters from friends or family.*

  ____ DPD Course List Form from your DPD Director.

  ____ Signed Verification of Completion of Dietetics Programs in Dietetics or a signed Declaration of Intent to Complete. *If your date of DPD completion is five or more years old, additional coursework will be required.*

  ____ Personal Statement, which must address all of the following:
  1. The reason for entering dietetics
  2. Preparatory career experiences
  3. Short and long term goals
  4. Personal strengths and areas for improvement
  5. Attributes important for candidate selection
  6. Reason why you are applying to our public health focused program
  7. Your expectations from our program
  8. A project completed without supervision
  9. Note if you speak, read or write a language other than English and your level of fluency

  ____ Scan the following items into one supplemental document:

    ____ Completed Application Checklist (this form)

    ____ Work Experience Calculation Form

    ____ Volunteer Experience Calculation Form

    ____ Arizona WIC Program Declaration of Intent

Initial the items below and mail to the address above:

____ Completed PAL Portfolio. *Follow these instructions and use this template for your portfolio.*

____ Non-refundable application fee of $52.00 made payable to Maricopa County.

Signature: _____   Date: _____

Printed Name: _____