



APPLICATION CHECK SHEET

DONE	TASK
	DICAS application submitted on time.
	Selected KADDI on D&D Digital
KADDI SUPPLEMENTAL APPLICATION	
	This goes into the supplemental folder on DICAS
	<p>DRAFT CALENDAR</p> <ul style="list-style-type: none"> I have included a plan of how I will spend every week during my internship. You must use the KADDI Weekly Calendar and edit it. You may put your rotations in any order. For each rotation give the site and preceptor's name. An example is: MNT Week 1 St. Luke's Hospital Jane Jones, RDN
	<p>FOODSERVICE</p> <ul style="list-style-type: none"> I have included a facility form for each place where I plan to spend time in my rotation. I have submitted a copy of the facility's contract or the responsible person's name, email and phone number so that KADDI can execute an agreement. I have included a preceptor form and continuing education information for my foodservice preceptor. This may be a resume or ServSafe certificate. If the person is a Registered Dietitian, submit PDP log or a copy of their current CDR card.
	<p>MEDICAL NUTRITION THERAPY</p> <ul style="list-style-type: none"> I have included a facility form for the place(s) where I plan to spend time in my MNT rotation. I have submitted a copy of the facility's contract or the responsible person's name, email and phone number so that KADDI can execute an agreement. I have included a preceptor form and continuing education information for my primary clinical preceptor. This may be a resume. The preceptor must be a Registered Dietitian, so submit PDP log or a copy of their current CDR card.
	<p>COMMUNITY</p> <ul style="list-style-type: none"> I have included a facility form for each place where I plan to spend time in my community rotation (a minimum of two and up to four sites). I have submitted a copy of the facility's contract or the responsible person's name, email and phone number so that KADDI can execute an agreement. I have included a preceptor form and continuing education information for each community preceptor. This may be a resume showing meetings they have attended for continuing education. If the person is a Registered Dietitian, submit PDP log or a copy of their current CDR card.
	<p>BUSINESS/ENTREPRENEURSHIP (B/E)</p> <ul style="list-style-type: none"> I have included a facility form for the business where I plan to spend time in the B/E rotation. I have either submitted a copy of the facility's contract or the responsible person's name, email and phone number so that KADDI can execute an agreement. I have included a preceptor form and a resume or evidence of continuing education for the person who will supervise me in my B/E rotation. OR – include a sheet stating that you intend to arrange your B/E rotation after you are admitted.