

Programs beginning in Spring, Summer II, & Fall 2026

**Application**

**P**

# **GENERAL APPLICATION INSTRUCTIONS**

Office hours are limited, so review of these applications will take longer. Your legal name and Indiana University ID must be on every page. For assistance with this application, email askhpp@iu.edu or Joanna Plew at jplew@iu.edu well in advance of the program deadline.

## **STEP 1: UNIVERSITY ADMISSIONS STATUS (IU INDIANAPOLIS CAMPUS)**

Students seeking admission to any Health Professions Programs (HPP) must complete an application for enrollment on the Indiana University Indianapolis campus or be currently enrolled at IU Indianapolis as a degree seeking student. Actively enrolled degree-seeking students do not need to reapply to IU Indianapolis. If you last attended IU Indianapolis more than one year ago (by the time the program starts) or were only a non-degree seeking application, please contact IU Indianapolis Undergraduate Admissions at (317) 274-4591 or [apply@iu.edu](%5C%5C%5C%5Ciu-iusm-vg.ads.iu.edu%5C%5Cgroups%24%5C%5CDMHP%5C%5CShared%5C%5CHPP%5C%5CAdmissions%5C%5CApplication%20Materials%5C%5C2024-25%5C%5Capply%40iu.edu). If submitting the [IU Indianapolis application](https://indianapolis.iu.edu/admissions/apply/), pay close attention to your term of entry to the IU Indianapolis campus. This must match the program’s term of entry listed below unless you are planning to enroll before the program starts.

## **STEP 2: PROGRAM SELECTION**

Check the appropriate box to select your program of choice. If applying to a program with two start dates, please check the date you intend to start. If applying to more than one program, a **SEPARATE** application packet must be submitted for each program. Each application must be complete and submitted by the program’s deadline as shown below.

|  |  |  |
| --- | --- | --- |
| DEGREES | DEADLINE | TERM OF ENTRY |
| [ ]  \*Paramedic Science, AS | October 1, 2025, or February 1, 2026 | [ ]  Spring 2026[ ]  Fall2026 |
| [ ]  Radiography, AS[ ]  Traditional Clinical Pathway[ ]  Non-Traditional Clinical Pathway For details about pathways see information under program details. | January 1, 2026 | Summer II 2026 |
| [ ]  Medical Laboratory Science, BSIndianapolis or Evansville | December 1, 2025 | Fall 2026 |
| [ ]  Cytotechnology, BS | December 1, 2025 | Fall 2026 |
| [ ]  \*\*Medical Imaging Technology, BS (Clinical track) | November 15, 2025 | Fall 2026 (Other clinical tracks) |
| [ ]  \*\*Medical Imaging Technology, BS (Non-clinical track) | December 4, 2025 (SP25), April 25, 2026 (SU24), or June 1, 2026 (FA25) | [ ]  Spring 2026[ ]  Summer 2026[ ]  Fall 2026 |
| [ ]  Diagnostic Sonography[ ]  Medical Sonography[ ]  Echocardiography | November 15, 2025 |  Summer II 2026 |
| [ ]  Nuclear Medicine Technology, BS | January 1, 2026 | Summer II 2026 |
| [ ]  Radiation Therapy, BS | January 1, 2026 | Summer II 2026 |
|  [ ]  Respiratory Therapy, BS | February 1, 2026 | Fall 2026 |
| [ ]  \*\*\*Respiratory Therapy, BS(Advanced Standing) | Rolling Admission | [ ]  Fall 2026 [ ]  Spring 2026 |

\*Requires current EMT-B Certification

\*\*Requires current certification from ARRT (Radiography, Nuclear Medicine Technologist, Radiation Therapist, or Sonographer), NMTCB (Nuclear Medicine Technologist), or ARDMS (Sonographer)

\*\*\*Requires current certification from NBRC as Registered Respiratory Therapist (RRT)

## **STEP 3: PREVIOUS APPLICANT**

If it has been one year or longer since you applied to IU Indianapolis/HPP and you have not been attending classes at IU Indianapolis, please contact IU Indianapolis Undergraduate Admissions at (317) 274-4591 or apply@iu.edu. Pay close attention to your term of entry to the IU Indianapolis campus as it must match the program’s term of entry (listed on previous table) unless you plan to enroll before the program starts. Submit updated transcripts since you last applied.

Have you previously applied to this same program? [ ]  YES [ ]  NO Year Applied: Click or tap here to enter text.

Please check one:

[ ]  Currently enrolled at IU Indianapolis as a degree-seeking student

[ ]  Currently enrolled at another IU campus

[ ]  Enrolled at IU Indianapolis over a year ago (or it will be longer than a year upon program start date) and in the process of reapplying to IU Indianapolis

[ ]  Currently enrolled at a non-IU school

## **STEP 4: GENERAL INFORMATION**

Previous Legal Names on Transcripts (If Applicable): Click or tap here to enter text.

Name: Click or tap here to enter text.

Cell Phone Number: Click or tap here to enter text.

IU E-Mail Address: Click or tap here to enter text.

Non-IU E-Mail Address: Click or tap here to enter text.

Current Address: Click or tap here to enter text.

City: Click or tap here to enter text. State: Click or tap here to enter text. Zip: Click or tap here to enter text.

## **STEP 5: EDUCATIONAL BACKGROUND**

List all previous institutions attended including those that were part of your high school education. If re-applying, please supply updated transcripts. Submit a separate transcript from EACH college, university, or other institution attended (except Indiana University). This includes any college level courses completed while enrolled in high school. Applications will not be evaluated until all transcripts are received. Transcripts must be submitted even if the courses taken are not considered prerequisites. Photocopies, unofficial copies or student copies of the transcript(s) are accepted. The program’s admissions committee reserves the right to request an official copy. Submission of illegible copies will delay the review of the application.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| HIGH SCHOOL | TERM OF ENTRANCE | TERM OF DEPATURE | DEGREE RECEIVED? | TRANSCRIPT ATTACHED(YES, NO, NA) |
|  |  |  |  | Submission of high school transcript is only required for Radiography, AS applicants if the applicant has less than 12 college credit hours |
| PREVIOUS AND CURRENT INSTITUTIONS | TERM OF ENTRANCE | TERM OF DEPATURE | DEGREE RECEIVED? | TRANSCRIPT ATTACHED(YES, NO, NA) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

## **STEP 6: GENERAL EDUCATION CORE AND COMPLETION PLAN**

Students who are applying for any baccalaureate degree programs are required to meet the [IU Indianapolis General Education (GE) Core](https://undergraduate.indianapolis.iu.edu/undergraduate-curricula/general-education/iupui-general-education-core/index.html). Students at other IU campuses or other state supported institutions in Indiana must meet that campus’ general education core requirement and must also meet their program’s fundamental core requirements. If you transfer to IU Indianapolis before the Indiana College Core (ICC) is completed at your prior institution, you must complete the requirements on the IU Indianapolis campus.

Completion of the Indiana College Core can be met in various ways. Please check the box that applies to your circumstance:

[ ]  I have previously completed a baccalaureate degree within the United States.

[ ]  I have already completed the above ICC and it is noted on my transcript.
*(This only applies to students at any IU campus or other state-supported institutions in Indiana)*

[ ] I am in the process of completing the ICC.
*(If completing the General Education Core at IU Indianapolis, please indicate in the chart below your plan for completion.)*

[ ] I am applying to an associate/certificate degree program. (GE Core is not required)

|  |  |  |
| --- | --- | --- |
| IU Indianapolis General Education Core – 30 credit hours | Learn more about the [IU Indianapolis GE Core](https://undergraduate.indianapolis.iu.edu/undergraduate-curricula/general-education/iupui-general-education-core/index.html). |  |
| DEPARTMENT/COURSE | TERM COMPLETED OR PLANNED | GRADE |
| Core Communication- 2 courses, 6.0 credit hours |  |  |
|  |  |  |
|  |  |  |
| Analytical Reasoning- 2 courses, 6.0 credit hours |  |  |
|  |  |  |
|  |  |  |
| Cultural Understanding- 1 course, 3.0 credit hours |  |  |
|  |  |  |
| Life & Physical Science- 2 courses, 6.0 credit hours |  |  |
|  |  |  |
|  |  |  |
| Arts/Humanities & Social Science- 3 courses, 9.0 credit hours At least 1 course in Arts/Humanities and 1 course in Social Science |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

*Note:* If you are currently in the course or plan to take it, mark the grade as IP for “In Progress”.

Please refer to this chart below to determine when prerequisite courses must be finished. Please refer to degree maps for detailed course completion requirements or contact Joanna Plew.

|  |  |  |
| --- | --- | --- |
| PROGRAM | PREREQUISITE COMPLETION DEADLINE | PROGRAM START DATE |
| Paramedic Science, AS | By program start date | January (spring entry) or August (fall entry) |
| Radiography, AS | End of Spring 2026 Term | June 2026 |
| Medical Laboratory Science, BS | July 1, 2026 | August 2026 |
| Cytotechnology, BS | By program start date | August 2026 |
| Diagnostic Medical Sonography, BS | By program start date | June 2026 |
| Medical Imaging Technology, BS | End of Spring 2026 Term | June or August (depending on track) 2026 |
| Nuclear Medicine Technology, BS | End of Spring 2026 Term | June 2026 |
| Radiation Therapy, BS | By end of Spring 2026 Term  | June 2026 |
| Respiratory Therapy, BS | August 1, 2026 | August 2026 |

### Completion Plan

In addition to the GE Core, each program has requirements that must be met. Please indicate below how you plan to finish all remaining courses (GE Core and additional Program Requirements) needed for admission into your intended program.

**General Education Core and Program Requirement Completion Plan**

|  |  |  |  |
| --- | --- | --- | --- |
| Term | Course Number and Title | Cr Hrs | Institution Attending |
| Fall 2025 |  |  |  |
| Fall 2025 |  |  |  |
| Fall 2025 |  |  |  |
| Fall 2025 |  |  |  |
| Fall 2025 |  |  |  |
| Spring 2026 |  |  |  |
| Spring 2026 |  |  |  |
| Spring 2026 |  |  |  |
| Spring 2026 |  |  |  |
| Spring 2026 |  |  |  |
| Summer Session I 2026 |  |  |  |
| Summer Session I 2026 |  |  |  |
| Summer Session II 2026\* |  |  |  |
| Summer Session II 2026\* |  |  |  |

\*This is only applicable to Cytotechnology and Paramedic Science applicants.

**PLEASE READ STEP 7 VERY CAREFULLY**

The use of one or more of HPP’s admission policies may have a direct impact on your ability to gain admission.

Before submitting your application, it is recommended that you discuss the options below with our academic advisor if you believe they may apply to your prior academic history. Contact the HPP Administrative Office at (317) 278-4752 or askhpp@iu.edu for more information.

Requests for Academic Bankruptcy and Fresh Start must be submitted at the time of program application.

## **STEP 7: ADMISSION POLICIES**

Use of any of the IU School of Medicine Health Professions Programs Admission Policies (Academic Bankruptcy, Fresh Start, or Repeated Courses) as described below are optional. As indicated above, using one or more of these policies may increase your chance of being admitted to your program of choice.

*NOTE*: Medical Imaging Technology applicants may not utilize Academic Bankruptcy and/or Fresh Start for professional Radiologic Sciences courses.

For more information about Academic Bankruptcy, Fresh Start, and Repeated Courses, please visit the School of Medicine’s HPP Section of the [IU Indianapolis Campus Bulletin](https://bulletins.iu.edu/iuin/2025-2026/schools/medicine/academic-regulations/index.shtml).

**Academic Bankruptcy** — If using this policy, please attach the [HPP Request for Academic Bankruptcy form](https://indiana-my.sharepoint.com/%3Aw%3A/g/personal/ajgeisle_iu_edu/EY784CX-05JAmimZfA5TVMkBs4E9lM8b2MJkFWVxrEAfQw?e=OzWjGX) to the application. It will be at the discretion of the director if it will be accepted.

I am requesting Academic Bankruptcy as part of my application: [ ]  YES [ ]  NO

**Fresh Start** — If using this policy, please attach the [HPP Request for Fresh Start form](https://indiana-my.sharepoint.com/%3Aw%3A/g/personal/ajgeisle_iu_edu/Ec1SvtpaCqFFsUlVckHfQoYBm0pD1ACWTP9DHl1oFQ69rg?e=YTHgIo) to the application.

I am requesting Fresh Start as part of my application: [ ]  YES [ ]  NO

**Repeated Courses** —If using this policy, please fill out the table below with any courses that have *already* been replaced by your current college or university on your official transcript, as well as courses in progress for the **current term.**

I have repeated courses on my academic transcripts: [ ]  YES [ ]  NO

Complete the following chart if Repeated Courses applies to you.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | COURSE NUMBER AND TITLE | INSTITUTION ATTENDED | CR HRS | GRADE RECEIVED |
| 1st attempt |  |  |  |  |
| 2nd attempt |  |  |  |  |
| 1st attempt |  |  |  |  |
| 2nd attempt |  |  |  |  |
| 1st attempt |  |  |  |  |
| 2nd attempt |  |  |  |  |
| 1st attempt |  |  |  |  |
| 2nd attempt |  |  |  |  |
| 1st attempt |  |  |  |  |
| 2nd attempt |  |  |  |  |

## **STEP 8: PROGRAM SPECIFIC REQUIREMENTS**

Many of the Health Professions Programs require the submission of an additional item(s) as part of the completed application packet. This item(s) must be included for the application packet to be considered as complete by the program’s application deadline. Failure to submit item(s) at the time of application will render the application incomplete. Incomplete applications will not be reviewed by the program until all materials are submitted.

* **Medical Laboratory Science** — No additional items required at this time.
* **Cytotechnology** — No additional items required at this time.
* **Medical Imaging Technology (clinical track)** — Complete a [Medical Imaging Technology Clinical Preference Form](https://indiana-my.sharepoint.com/%3Aw%3A/g/personal/ajgeisle_iu_edu/EdIr_n2gMoxPpgHU_GnY13gBr6EWWNW-HN_-CfXfhdg21A?e=uOBkeX) and submit with application. Submit copy of ARRT credential. This does not apply if you are currently enrolled in a Radiography program.
* **Medical Imaging Technology (non**-**clinical track)** — Submit copy of ARRT credential. This does not apply if you are currently enrolled in a Radiography program.
* **Diagnostic Sonography** — Complete a Clinical Experience Verification [Form](https://indiana-my.sharepoint.com/%3Aw%3A/g/personal/ajgeisle_iu_edu/ESml1rsXrB9NoZA2rQnWn7QBJ6cgHHFRSf_kXM-VZmF1rw?e=bwL5Jc) and submit with application.
* **Nuclear Medicine Technology** — Complete TEAS test and submit with application and submission of Questionnaire found [here](https://indiana-my.sharepoint.com/%3Aw%3A/r/personal/ajgeisle_iu_edu/Documents/Health%20Professions%20Programs/Application%20Supplements/Nuclear%20Medicine%20Technology%20Questionnaire.docx?d=wc0f892a125864801ae297d140cece222&csf=1&web=1&e=bI2dUJ)
* **Paramedic Science** — Submit a copy of your state or national EMT certification and a copy of your state-issued driver’s license with application. If you will complete coursework leading to the EMT-B credential during the 2025-2026 academic year, include this as part of the “General Education Core and Program Requirement Completion Plan” under Step 6.
* **Radiography** — Complete TEAS Test. Must submit with application. [TEAS Test instructions](https://indiana-my.sharepoint.com/%3Ab%3A/r/personal/ajgeisle_iu_edu/Documents/Health%20Professions%20Programs/Application%20Supplements/2025%20TEAS%20Registration%20Instructions.pdf?csf=1&web=1&e=frr6t7). Health Care Experience Questionnaire [Form](file:///C%3A%5CUsers%5Cajgeisle%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CContent.Outlook%5CA73YTW7J%5C2025%20Radiography%20Questionnaire.docx)
* **Radiation Therapy** — Two observations are **required and must be submitted with application.** Suggested sites can be found below. Please fill out the [Radiation Oncology Observation form](https://indiana-my.sharepoint.com/%3Aw%3A/g/personal/ajgeisle_iu_edu/EfM1rXaDeG1KnGorHZciqmQBKrayBQDcDOY_puTrM0dgBQ?e=w84BtA) during each of your observations. These observation hours must be completed in a minimum of two different [Clinical Observation Sites](file:///%5C%5Ciu-iusm-vg.ads.iu.edu%5Cgroups%24%5CDMHP%5CShared%5CHPP%5CAdmissions%5CApplication%20Materials%5C2024-25%5CHPP-RadiationClinicalObservationSites.docx).
* **Respiratory Therapy** — Observations(s) preferred but not required. Suggested sites can be found [here](https://indiana-my.sharepoint.com/%3Ab%3A/r/personal/ajgeisle_iu_edu/Documents/Health%20Professions%20Programs/Application%20Supplements/2025%20Resp%20Clinical%20Observation%20Sites.pdf?csf=1&web=1&e=vugMqy). Submit any [observation forms](https://indiana-my.sharepoint.com/%3Aw%3A/g/personal/ajgeisle_iu_edu/Edn4RR40F0tMgXTQqiY0pDIBah_NYAMJRsbBsHtLBAam9w?e=YwdONQ) with application.
* **Respiratory Therapy Advanced Standing** — Submit copy of RRT Certificate, proof of state license, and verification of one year of employment in Respiratory Care with application.

## **STEP 9: ADDITIONAL REQUIREMENTS & DISCLOSURE**

Social Security Number — ALL students must have a social security number (SSN) by February 1, 2026. This allows for a complete background check that is required upon offer of admission and may be needed for licensure. Students in the process of obtaining a new SSN must submit proof of receipt to the HPP office by February 1, 2026. Helpful information on the process can be found via the [Office of International Affairs](https://international.indianapolis.iu.edu/visas/taxes/social-security-numbers.html).

I have a Social Security Number (SSN). [ ]  YES [ ]  NO

\*If you replied “No” to the question above, please respond to the following question.

I have begun the process of obtaining a Social Security Number (SSN). [ ]  YES [ ]  NO

Click or tap here to enter text. By adding my initials, I understand that all admitted students must have a Social Security Number (SSN) no later than February 1, 2026.

Click or tap here to enter text. By adding my initials, I understand that I must be 18 years of age by June 29, 2026, to be in the professional program.

### **Compliance Requirements**

All applicants must read the [New Student Compliance Requirements](https://medicine.iu.edu/undergraduate-health-professions/admissions/medical-requirements).

Click or tap here to enter text. By adding my initials, I understand that all admitted students must meet all new student compliance requirements prior to starting the program as well as returning student requirements for programs that are two years in length. I further understand that I should not start this process until after receiving an offer of admission.

Click or tap here to enter text. By adding my initials, I understand that failure to meet any of these requirements can lead to my offer of admission being rescinded, a delay in my clinical training, or inability to finish the program.

Click or tap here to enter text. By adding my initials, I understand health care institutions that host clinical rotations of students from Indiana University may use different criteria for granting Covid-19 and other vaccination exemptions than Indiana University. IU cannot guarantee placement of students in the clinical setting if the host health care system vaccination requirements are not met which may result in delayed graduation or inability to complete the program.

### **Disclosure**

Applicants are required to disclose any convictions, charges, and/or probation/diversion at the time of application. The requirement for applicants to disclose continues throughout the application process, matriculation into a Health Professions Programs, and until graduation. This includes all past criminal history even if the charge(s) have been dismissed. If this applies to you, you must complete the [Student Disclosure Form](https://indiana-my.sharepoint.com/%3Ab%3A/g/personal/ajgeisle_iu_edu/EedoPVsJRfdGq1lccagg1D4BQAEz5lk6DpXcV5fPdBc2LA?e=CpzFKu) and email to Joanna Plew at jplew@iu.edu separately from your application. Questions about this requirement should be directed to Joanna Plew. The circumstances will be discussed confidentially with the program director to ensure that the previous criminal history will not cause difficulty in obtaining licensure or certification in their intended profession upon graduate or cause difficulties in completing degree requirements due to restrictions placed on entering students by the school’s clinical partners. Failure to disclose may result in the withdrawal of an acceptance offer, or in the case of a matriculated student, administratively withdrawal from the school. Once admitted, all students must submit to a full criminal background check as well as comply with other entry requirements.

Click or tap here to enter text. By adding my initials, I understand that all entering students must disclose any prior criminal history at the time of application, throughout the application and matriculation process, and until graduation from a Health Professions program.

[ ]  YES [ ]  NO Has your employment at any health care facility ever been involuntarily terminated for disciplinary reasons?

[ ]  YES [ ]  NO Have you been dismissed from any Health Professions program?

\*If you replied yes to either, please submit a full explanation in a separate email to Joanna Plew at jplew@iu.edu. (This is a separate issue from disclosing convictions, charges, and/or probation/diversion.)

## **STEP 10: SUBMISSION**

Confirm that your name and IU University ID are on all pages. Retain a copy of this application for your records. Incomplete applications will not be reviewed until all required documents are submitted. If these items are submitted after the program’s deadline, the application will be considered late, which may affect the program’s decision for admission. Complete applications and all additional documents may be submitted the following ways:

* Email .pdf documents to askhpp@iu.edu. Please utilize a scanner rather than submitting photos.
* Late applications may be accepted at the discretion of the admissions committee per program.
* Contact Joanna Plew (jplew@iu.edu) to schedule an application appointment.

Health Professions Programs

635 Barnhill Dr, MS 160

Indianapolis, IN 46202

Office Hours: Mondays and Tuesdays from 8:00 A.M.-3:00 P.M.

I, the undersigned, do hereby attest that my application to the above program, for entry into the program year 2026, is true and correct to the best of my knowledge. I have read all of the application instructions and realize that failure to follow these instructions may jeopardize my application.

**Signature**: Click or tap here to enter text.

**Date**: Click or tap to enter a date.

By signing, I understand that an electronic signature has the same legal effect and can be enforced the same way as a written signature.