



Summer 2019

Student Name: _____ Bear ID# _____
(Please Print)

_____ **I accept admission** to the 2nd Degree Bachelor of Science Nursing Program at the University of Northern Colorado beginning Summer Semester 2019. **I have purchased** my background check and drug screen materials. Documentation (receipt from American Data Bank) of these purchases is attached.

Initial

AND

_____ **I understand** the School of Nursing clinical clearance requirements and **agree to comply** as stated on the enclosed form.

Initial

Signature

Date

OR

_____ **I do not accept admission** to the 2nd Degree Clinical Nursing Program at the University of Northern Colorado beginning Summer Semester 2019.

Initial

Signature

Date

**RETURN STATEMENT OF INTENT & REQUIRED DOCUMENTATION BY
FRIDAY, MARCH 8, 2019, AT 5:00PM TO:**

University of Northern Colorado • School of Nursing • Gunter Hall 3080 • Box 125 • Greeley, CO 80639
Phone: (970) 351-2293 • Fax: (970) 351-1707 • Email: nursing@unco.edu

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