**APPLICATION**to the

**Traditional Degree BSN Program**

Applications accepted:

January 4th – January 20th, 2017 *(by 5:00 pm)*

*(Materials received after 5pm on Friday, January 20, 2017 will not be accepted.)*

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**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*(please type last, first, MI)*

**Your Application Checklist***(see detailed instructions for further information)***:**

* **Step 1 - Admitted to UNC** *(all official transcripts have been received,   
  bear email set up, Bear ID issued, and transcript evaluation completed)*
* **Step 2 – Completed School of Nursing application** *(please type)*

**This coversheet and application**

**Official transcript(s)** *(in addition to those submitted to UNC)*

**Proof of current CNA course completion or certification**

**Proof of registration of remaining prerequisite courses  
for Spring 2017**

**2 Personal Essays**

**2 Letters of Recommendation**

**Resume**

**APPLICATION TO THE UNC SCHOOL OF NURSING Traditional Degree Program**

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| --- | --- | --- | --- | --- | --- |
| **Personal Information (please type)** | | | | | |
| Last | First |  | MI | Other Names that appear on transcripts | |
|  |  | |  |  | |
| Local Address |  | City | ST | Zip | Home Phone |
|  | |  |  |  |  |
| Permanent Address |  | City | ST | Zip | Mobile (required) |
|  | |  |  |  |  |
| UNC Bear E-mail Address (all communication will be sent to your Bear email address | | | | |  |
|  | | | | |  |
| Personal E-mail Address (Optional) | | | | |  |
|  | | | | |  |
| Bear Number (required) | Ethnic Origin | | Gender | |  |
|  |  | |  | |  |
| Are you a Licensed Practical Nurse (LPN)? | | | Are you bilingual (if yes, please list language) | | |
|  | | |  | | |
| Are you from a rural area (more than 30 miles from a town with a population of <30,000)? | | | Number of times previously applied to UNC School of Nursing: | | |
|  | | |  | | |

|  |  |  |
| --- | --- | --- |
| **Education** | | |
| List every higher education institution (including UNC) for which you are submitting transcripts that document:   * last 45 credit hours of course work * all nursing prerequisite courses * previous Bachelor’s or higher degree *(if applicable)*   ***NOTE: Failure to report all schools attended documenting the most recent 45 credits hours will result in your application not being considered. This includes any coursework from dual enrollment (if applicable).*** | | |
| School | Degree and Major | Date Conferred or Last Attended |
|  |  |  |
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Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- |
| **Prerequisite Information** | | | | | | |
| Required Prerequisite Courses | Semester completed  Term/Year | Name of school where completed | Title of equivalent course (if applicable) | Plan to take Spring 2017 | School where you will take Spring 2017 | Check here if course was repeated |
| **BIO 110** - Principles of Biology |  |  |  |  |  |  |
| **BIO 245 -** Intro to Human Anatomy & Physiology |  |  |  |  |  |  |
| **BIO 246 -** Advanced Human Anatomy & Physiology |  |  |  |  |  |  |
| **BIO 251 -** Allied Health Microbiology |  |  |  |  |  |  |
| **CHEM 281 -** Fundamentals of Biochemistry |  |  |  |  |  |  |
| **ENG 123 -** College Research Paper |  |  |  |  |  |  |
| **FND 250 -** Principles of Nutrition |  |  |  |  |  |  |
| **NURS 326 -** Pathophysiology |  |  |  |  |  |  |
| **PSY 230 -** Human Growth & Development |  |  |  |  |  |  |
| **STAT 150 -** Intro to Statistical Analysis |  |  |  |  |  |  |

Unofficial grades for spring semester prerequisite courses are due to the School of Nursing by May 19, 2017.

***Entry into the nursing program is contingent on completing and passing all Nursing Prerequisites   
with a grade of “C” or higher (C- is not acceptable).***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Semester Preference** | | | | | |
| Seventy-two (72) students will be admitted. Half will begin Summer and half will begin Fall. Please indicate your first choice below. (Admission is not affected by your choice.) | | | | | |
|  | **Summer** |  | **Fall** |  | **Either** (No Preference) |

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Signature and Printed Name Date