**WEST LIBERTY UNIVERSITY**

**APPLICATION FOR ADMISSION TO THE BA/BS to BSN PROGRAM**

***In order to be considered for admission to the WLU BA/BS to BSN Program you must have:***

**(Please check)**

* Applied for admission to West Liberty University
* Completed the following prerequisites with at least a “C” grade in science courses\*

**OFFICE USE ONLY**

DATE RECEIVED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE REVIEWED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ ADMITTED

\_\_\_\_\_ REJECTED \_\_\_\_\_ HOLD

\_\_\_\_\_ PRE-REQUISITES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE RECONSIDERED: \_\_\_\_\_\_\_\_\_\_\_\_

OUTCOME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Completed Date to be Completed

❑ General Psychology \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❑ Developmental Psychology \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❑ Chemistry \* \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❑ Anatomy & Physiology I \* \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❑ Anatomy & Physiology II \* \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❑ Microbiology \* \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❑ Statistics \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* High School Transcripts sent to WLU
* Achieved a cumulative GPA of 3.0 or higher on a 4 point system
* Earned baccalaureate degree from an accredited college or university with all transcripts submitted to WLU
* Personal essay related to how this program will help the student reach goals (attached)
* Resume (attached)
* I will have a background check with “unremarkable” findings and a drug screen with “clean” results.

**NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student **ID #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(LAST) (FIRST) (MI)

List any different last name(s) you have ever used: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Are you currently an RN? ❑ YES ❑ NO

**ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(STREET) (COUNTY) (CITY) (STATE) (ZIP CODE)

**E-MAIL:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**WHEN DO YOU PLAN**

**PHONE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TO **BEGIN: FALL of \_\_\_\_\_\_\_\_\_**

(HOME) (CELL) (YEAR)

**EDUCATION:** List most recent first – (include High School, other college/university, and any previous West Liberty course work)

|  |  |  |  |
| --- | --- | --- | --- |
| **SCHOOL** | **YEARS** | **GRADUATION DATE / DEGREE** | **CUM. GPA** |
|  |  |  |  |
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|  |  |  |  |

**WORK:** List most recent first

|  |  |  |  |
| --- | --- | --- | --- |
| **EMPLOYER** | **YEARS** | **SUPERVISOR** | **JOB TITLE** |
|  |  |  |  |
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**NOTE:** The West Virginia Board of Examiners for Registered Professional Nurses reserves the right to deny a license to practice registered professional nursing to Persons who abuse alcohol and/or drugs, have been convicted of a felony or engaged in other improper activities as stated in Article 7, Chapter 30, Section 11, Code of West Virginia.

**SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Return application by *FEBRUARY 1st* to:**

**West Liberty University – Nursing Program, 208 University Drive, CSC# 140, West Liberty, WV 26074-0295**

**(or) drop off at the Health Sciences Office (351 Campbell Hall).**

Updated: 11/10/17 mc