

INQUIRY AND ADMISSION PACKET

BACHELOR OF SCIENCE IN NURSING

BSN PROGRAM

**SHAWNEE STATE UNIVERSITY
PORTSMOUTH, OH 45662**

Shawnee State University Nursing Department

BSN Application Form

Name: _____ Student ID: _____

Address: _____ City/State _____ Zip Code _____

Phone: (____) _____

Proof of current unrestricted RN Licensure: _____

Transcripts from all Colleges/Universities attended. _____ GPA _____
Yes Sent

Dates of Graduation from introductory RN Program: _____

Current Employer: _____

Past Work Experience:

Clinical Interest Area(s):

Attach 250 word paragraph on how the BSN would benefit you and how you will utilize it.
(Typed - computer generated)

Attach copy of immunization record and health history and physical (completed within 6 months of entrance into program).

Attach a copy of current CPR certification.

Shawnee State University Department of Nursing

Criteria for Admission to BSN Program

1. Current, unrestricted RN License
2. 2.5 GPA. (Cumulative from all previous college work)
3. Health assessment within 6 months of admission.
4. Current Immunization – MMR, HBV, TB, DPT, Tetanus
5. Current CPR certification.
6. Preference given to applicants with 15 hours/quarter or more beyond original nursing degree.
7. Preference given to applicants with six months practice.
8. Personal statement of approximately 250 words about the benefits of the BS and how you would utilize it. (Needs to be typed on a computer.)
9. Limit Course Enrollment:
Due to the number of applicants seeking admission to the Department of Nursing, admission will be competitive based on admission criteria. All applicants will be considered solely on the basis of criteria including grades and completion of all required courses, and without regard to race, gender, age, disability, religion, ancestry, or veteran status.