

#### Application Period August 1- September 1 Space is limited and applicants will be admitted in the order in which the application is received.

<u>University</u> Application – https://www2.calstate.edu/apply See website for deadline dates: https://www.csustan.edu/nursing/online-rn-bsn

The following prerequisites must be completed prior to admission to the nursing program:

- Oral Communication/Speech
- Written English Composition
- Critical Thinking/Logic
- Statistics
- Chemistry
- Microbiology
- Anatomy
- Physiology

<u>Step 1</u> - University Application - Students must first apply to the university prior to applying to the nursing program. Apply online at https://www2.calstate.edu/apply. University admission is required before final acceptance into the School of Nursing.

<u>Step 2</u> – Nursing Application - Send completed application with a copy of your current RN license. Send one (1) set of official transcripts from each previous attended college or university with your application.

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.



<u>Application Period August 1- September</u> Applications will be accepted on a first-come, first-served basis.

\*PLEASE MAKEA COPY OF THIS APPLICATION FOR YOUR RECORDS BEFORE SENDING

Student#				
		(or Date of Bi	(or Date of Birth)	
Name	(First)	(Middle)	(Alias/Maiden)	
(Last)	(14151)	(Middle)	(Allas/Waldell)	
Address (Number & Street)	(City)	(State)	(Zip)	
Home Phone: ( )	C	SU Email:		
Cell Phone: ( )	E	mail:		
California R.N. License Number		Expiration Date	·	

ACADEMIC INFORMATION: List education preparation in nursing and colleges attended.

Name of College Where Associate Degree Was Completed	Month & Year ADN Completed
Name of Other Colleges Attended	Month & Year Diploma or Degree Obtained



<b>Required Prerequisite</b>	Courses			
	Name of College	Course <u>Number</u> & Name	Term/Year	Grade
Oral Communication/Speech				
Written English Composition				
Critical Thinking/Logic				
College Level Math/Statistics				
Chemistry				
Microbiology				
Anatomy				
Physiology				

I certify that the foregoing statements on this application are true, complete and accurate:

(Applicant's Signature)

(Date)

#### RETURN COMPLETED APPLICATION ALONG WITH APPLICATION FEE OF <u>\$60.00</u> TO:

California State University, Stanislaus University Extended Education MSR 180 ATTN: Dinah Copple One University Circle Turlock, California 95382

Be sure to include:

- Official Transcripts
- Statistical data form (see pg. 5)
- Copy of CA RN license or date of ADN
- \$60.00 money order for application fee



# STATISTICAL DATA FORM

The following information will be used for accreditation and the State Board of Registered Nursing statistical reports only. The data is <u>confidential</u>. It is unlawful to discriminate against you on the basis of this information.

Full Name Date of Birth
GENDER:     Male     Female       RACE / ETHNICITY:     (Select one)
BLACK: African origin; not of Hispanic origin
ASIAN: Far Eastern, Southeast Asian, or Indian Origin Chinese Japanese Korean Vietnamese Asian Indian Cambodian Laotian Other
PACIFIC ISLANDER: Hawaiian Islands or Pacific Island origin     Hawaiian Guamanian/Chamorro Samoan Other
HISPANIC:Spanish/Latin-American/Latino
CAUCASIAN
AMERICAN INDIAN:Indian origin Native to the Americas with cultural identification Aleut Eskimo Native American: Tribe/Nation
☐ FILIPINO
OTHER NON-WHITE
DECLINE TO STATE
HOW DID YOU LEARN ABOUT OUR PROGRAM?
<ul> <li>Advertising (source)</li> <li>Colleague, Friend, Alumni or Relative</li> <li>Hospital</li> <li>Other</li> </ul>