

**APPLICATION TO THE SCHOOL OF NURSING  
FAYETTEVILLE STATE UNIVERSITY**

**GENERIC BACHELOR OF SCIENCE IN NURSING PROGRAM**

School of Nursing, Third Floor, 1200 Murchison Road, Fayetteville, NC 28301, 910-672-1924

**YOU MUST SUBMIT THE TYPED HARDCOPY OF THIS APPLICATION FORM TO THE SCHOOL OF NURSING.**

**APPLICATION DEADLINES:  
MARCH 30—FALL ADMISSION  
SEPTEMBER 30—SPRING ADMISSION**

---

**A. PERSONAL INFORMATION**

Legal Last Name*	Legal First Name*	Legal Middle Name	
Banner ID #		Date of Birth* (MM/DD/YYYY)	Gender:

**B. CONTACT INFORMATION**

Mailing Address, Line 1*	Daytime Phone Number
Mailing Address, Line 2	Evening Phone Number
Permanent Address, Line 1	Cell Phone Number
Permanent Address, Line 2	FSU Email Address*
Emergency Contact, Name	Emergency Contact Phone Number
Emergency Address, Line 1	
Emergency Address, Line 2	



## D. PREREQUISITE COURSEWORK

Determine if you are eligible to apply to the Generic BSN program based on the calculation generated by the prerequisite GPA Calculator found on the website. If you are eligible to apply, fill in your prerequisite information in the table listed below for your Math/Science evaluation.


List the specific required courses you have taken or/plan to take and indicate when you took them/ when you will complete them. Enter the grade you received for completed courses. You must have a **minimum of the listed 3 Math/Science prerequisite courses AT THE TIME OF APPLICATION.**

### MATH /SCIENCE COURSES COMPLETED

Subject	Course Title	Semester Taken/ to be Taken	Check box if not taken	# of Credits	Final Grade By Numerical value A=4, B=3,C=2, D=1	Grade points Multiply # of credits by Final Grade
Math 123	College Algebra					
Chem 105	Introduction to Chemical Principles					
Chem 106	Introduction to Organic Chemistry & Biochemistry					
BIOL 255	Microbiology					
ZOOL 210	A&P I					
ZOOL 230	A&P II					
				Add this column up for <b>Total Credits</b>  1. _____		Add this column up for <b>Total Grade Points</b>  2. _____

Divide Total Grade Points (2) by Total Credits (1)

**Cumulative Pre-Nursing Math/Science GPA**



**You are eligible to apply if**

1. Completed/ or enrolled in all required Math/Science Courses and your GPA is 2.8 or higher

**You are NOT eligible to apply**

1. You have completed all Math/Science Courses and your GPA is less than 2.8 or
2. You have failed **ANY** of the Math/Science courses more than once

## E. Entrance Exam

The Kaplan Entrance Exam is required for admission. The examination will be proctored by University Testing Center. Students can only take the Kaplan a total of two times, and only once per semester. To sign up for the Kaplan, students must submit their hardcopy application to the School of Nursing by the application deadline.

## F. Proctored Essay

After initial review of all BSN applicants, applicants who **continue to be considered for admission** will be notified by email and invited to come to the School of Nursing to write a proctored essay and for an interview with the Admission Committee. Dates of the proctored essay and interview will be announced in the email.

## G. Communication

The Bachelor of Science in Nursing program is an upper-division course of study requiring students to communicate effectively. Students in this program are expected to demonstrate skill in independent decision-making, professional communication, critical thinking, and problem solving.

Accordingly, the manner in which an applicant/prospective student communicates with the School of Nursing may be considered a potential indicator of the applicant/prospective student's ability to succeed in the BSN program. The School of Nursing seeks to foster the reciprocal benefits of direct communication, which provides an opportunity for the communicator to identify and articulate his or her thoughts, and for the recipient to consider and respond directly to both another person's words and tone.

For these reasons, as well as adherence to FERPA regulation, the school will not discuss an application with a third party.

## H. Personal Statement

All applicants are required to submit a personal statement (not to exceed one double-spaced page) as part of their application. The personal statement should indicate why the applicant wants to become a nurse.

## I. Application Checklist

Your completed and signed application should be mailed in one envelope to the **School of Nursing**, Fayetteville State University, 1200 Murchison Road, Fayetteville NC 28301 by the application deadline (March 30 for fall admission; September 30 for spring admission).

Checklist for School of Nursing Generic BSN applicants

### **TO BE COMPLETED BY OFFICE PERSONEL ONLY**

- \_\_\_\_ 1. Completed, signed and dated application
- \_\_\_\_ 2. Access to background check information
- \_\_\_\_ 3. Personal Statement
- \_\_\_\_ 4. Official transcripts from all universities and colleges attended (excluding FSU)
- \_\_\_\_ 5. Proof of military affiliation **if applicable.**

## I. Signature

- I certify that I have read and understand the above statements and all materials I have submitted for consideration by the School of Nursing are complete and accurate.
- I understand that my complete application must be received by the School of Nursing on or before the deadline for application (March 30 for fall admission; September 30 for spring admission).
- I understand that if I do not write the proctored essay as required following submission of this application, I will not be considered for admission.
- I understand that an offer of admission to the Generic BSN program will be revoked for any of the following reasons:
  - I did not achieve the pre-requisite requirements in the classes I was enrolled in after application submission.
  - I have not met FSU admission requirements.
  - I was not successfully admitted as a transfer applicant.
  - Failure to pass a criminal background check. Applicants to FSU School of Nursing are required to have a criminal check run by a designated private company. Applicants with a criminal history are evaluated for admission and continuation of the program on a case by case basis with input from the applicant and our Board of Nursing.

**APPLICANT SIGNATURE AND DATE** \_\_\_\_\_