

Application to the Prelicensure Bachelor of Science in Nursing

School of Nursing

Fayetteville State University

1200 Murchison Road, Fayetteville, NC 28301, 910-672-1924

APPLICATION DEADLINES:

FEBRUARY 28TH FALL ADMISSION

SEPTEMBER 30TH SPRING ADMISSION

A. PERSONAL INFORMATION

Legal Last Name*	Legal First Name*	Maiden 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	

C. ACADEMIC BACKGROUND

List **all** post-secondary (college-level) two and four year colleges and universities you have attended, **including Fayetteville State University**. Submit official transcripts of all **OTHER** institutions (not FSU) to the School of Nursing.

Name of Institution	Location	Indicate 2yr/4yr	Begin Date	End Date	Degree Obtained	Degree Awarded Date	Field of Study
					☐		
					☐		
					☐		
					☐		
					☐		
					☐		

D. PRE-REQUISITE COURSEWORK

Students can apply when either all prerequisites have been completed or the student is currently enrolled in the last of the required prerequisite courses. **If you are submitting an application in February for Fall admission, all prerequisite courses must be satisfactorily completed by the end of the Spring semester.**

C. ACADEMIC BACKGROUND (continued)

1. Are you a current Licensed Practical Nurse (LPN)?

☐ Yes

If yes, what is your license number/state?

2. Are you a veteran or active-duty soldier?

☐ Yes

☐ No

If you are a veteran, please provide a copy of your DD214. If you are active duty, please provide a copy of your ID card.

3. Have you ever been previously enrolled in a nursing program?

☐ Yes

☐ No

If you were previously enrolled in another nursing program, you must submit a letter of good standing from the Nursing Program Chair/Dean/Program Director with your prelicensure application. Failure to report prior enrollment in another nursing program or to submit the required letter will result in denial of further review for admission to the prelicensure program.

4. Have you ever been enrolled in the Fayetteville State University nursing program?

☐ Yes

☐ No

D. PRE-REQUISITE COURSEWORK -CONTINUED

Determine if you are eligible to apply to the Generic BSN program based on the calculation generated by the pre-requisite GPA calculator found on the website. If you are eligible to apply, fill in your pre-requisite information in the table listed below for your Math/Science evaluation. **All math and science prerequisites must be taken within the past (5) years from the date of application.**

List the specific required courses you have taken or plan to take and **indicate the semester and year you took them or when you will complete them.** Enter a check mark for any classes you **have not received a final grade for.** Enter the numerical value that corresponds to the final grade you received and the number of credit hours **ONLY for completed courses**, otherwise leave these columns blank. You must have a minimum of 3 of the listed Math/Science pre-requisites AT THE TIME OF SUBMISSION.

MATH/SCIENCE PRE-REQUISITES

Subject	Course Code	Semester & Year Taken or Will Be Taken	Check ONLY if you do not have a final grade	# of Credits	Final Grade by Numerical Value A=4, B=3, C=2, D=1	Grade Points (multiplied # of credits by final grade numerical value)
Math 123 (course code)/College Algebra			☐			0
CHEM 105/Chemical Principles			☐			0
CHEM 105L/Chemistry Lab			☐			0
CHEM 106/Organic & Biochemistry			☐			0
CHEM 106L/Organic & Biochemistry Lab			☐			0
BIOL 255/Microbiology			☐			0
BIOL 255L /Microbiology Lab			☐			0
BIOL 230/A&P I			☐			0
BIOL 230L/A&P I Lab			☐			0
BIOL 240/ A&P II			☐			0
BIOL 240L/A&P II Lab			☐			0
				Add this column up for Total Credits		Add this column up for Total Grade Points
				0		0

Divide Total Grade Points by Total Credits. Cumulative Pre-Nursing Math/Science GPA

You are eligible to apply if:

Your math/science GPA is 2.8 or higher **at the time of application.**

You are NOT eligible to apply if:

1. You have completed all math/science pre-requisites and your math/science GPA is less than 2.8 or
2. You have not completed all math/science pre-requisites and your GPA is less than 2.8 or
3. You have failed ANY of the math/science pre-requisites more than once.

E. Entrance exam

The Kaplan Entrance Exam is required for admission. The examination will be proctored by the University Testing Center. Students must complete the Kaplan entrance exam by February 12th for the fall application period and September 15th for the spring application period. Students must earn a score of 65 or higher to be eligible to apply to the nursing program. Students can only take the Kaplan a total of two times, and only once per semester.

F. Interview

After initial review of all BSN applications, applicants **being considered for admission** may be notified by email and, if applicable, invited to come to the School of Nursing for an interview with the Admission Committee. Any interview dates 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/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 must submit a personal statement of at least 500 words explaining why they want to become a nurse. Statements must be double-spaced, 12-point Times New Roman font, and submitted as a Word or PDF document. Submitted statements may be evaluated using AI-detection software to help assess originality and authenticity.

I. Application Checklist

Please adhere to the application deadline (February 28th for Fall Admission; September 30th for Spring admission).

Late applications will not be accepted; there are no exceptions to this rule.

TO BE COMPLETED BY SCHOOL OF NURSING PERSONNEL ONLY

Checklist for School of Nursing Generic BSN applicants

- ____ 1. Completed, signed, and dated application.
- ____ 2. **Official transcripts** from all universities & colleges attended (**excluding FSU**)
- ____ 3. Personal Statement
- ____ 4. Proof of military affiliation **if applicable**.
- ____ 5. **Letter of Good Standing, if previously enrolled in another nursing program. Failure to submit this letter will result in your application not being further reviewed for admission.**
- ____ 6. **Proof of LPN license**, if applicable.

J. Signature

- I certify that I have read and understand the above statements and all materials I have submitted for consideration to 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 (February 28th for Fall admission; September 30th for Spring Admission).
- I understand that if I do not write the proctored essay as required following the emailed invitation after the 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 student.
 - > Refusal to submit to a criminal background check and/or drug screen.
 - > Failure to complete a criminal background check and/or drug screen.
 - > Failure to be accepted into a clinical facility due to a criminal background check and/or drug screen.

I did not disclose prior enrollment in a nursing program and/or submit a letter of good standing.

APPLICANT SIGNATURE & DATE _____