

School of Nursing College of Health and Human Services

Application of

Last Name	First Name	Middle Name	Maiden Name (if applicable)				
For Admission to the RN to BSN Program Please check the appropriate option.							
 Distance Education (Spring Admission) University Application – due Nov. 15 School of Nursing Application – due Nov. 1 (completely internet-based program) 							
	 Distance Education (Summer Admission) University Application – due May 1 School of Nursing Application – due April 1 (completely internet-based program) 						
	School	dmission) sity Application – due Jun of Nursing Application – letely internet-based progr	due June 1				

NOTE: It is important that you complete this application fully and as directed. Incomplete applications will NOT be reviewed.

The University of North Carolina at Charlotte – School of Nursing Application to the RN to BSN Program

Instructions

- 1. This application **must be completed** by all students seeking admission to the RN to BSN Program. The Distance Education (on-line) option admits in the fall, spring, and summer.
- 2. <u>There are **two applications** that must be completed: one to the University Undergraduate</u> <u>Admissions Office and one to the School of Nursing</u>. If you are a returning student, you will apply for readmission through the Registrar's office. **See due dates on the front of the application.**

• **University Application**

You must <u>apply on-line</u> to the University at the following website: <u>http://admissions.uncc.edu/transfers</u>

There is a fee for this application. You are responsible for completing the University application package by sending one official transcript from each school you have attended to the University's Undergraduate Admissions Office, plus one official transcript from high school. <u>It is your</u> responsibility to check that the Undergraduate Admissions Office has received your complete application including your official transcripts by the due date.

Readmission of Former Students: http://registrar.uncc.edu/readmission-information

• <u>School of Nursing Application</u>

Additionally, you must complete this paper application and mail it along with a copy of your RN license and copies of all transcripts including UNC Charlotte (these may be unofficial copies of transcripts) to:

RN BSN Program Coordinator School of Nursing UNC Charlotte 9201 University City Blvd. Charlotte, NC 28223-0001

- 3. All students in the RN to BSN Completion Program must complete a minimum of 122 semester hours consisting of general education requirements, nursing prerequisite courses, the 31 hours of the nursing curriculum, and the university credits granted for previous nursing coursework. Students are required to complete university General Education and nursing prerequisites prior to beginning the Upper Division. Admission to the RN to BSN Completion Program is competitive and there is restricted enrollment.
- 4. All admissions to the RN to BSN Curriculum are conditional until verification of the completion of all courses, and copies of your current and unrestricted RN license. These can be mailed to the above address.

<u>NOTE</u>: Incomplete or unsigned applications will not be reviewed. Applications without appropriate transcripts will not be reviewed.

Applicant Information (please print legibly)

Semester/Year applying for	Date					
Name						
Home Address						
City, State, Zip(plea	ase include zip code)	County				
Phone numbers: Home	Work	Cell				
E-mail address						
Basic nursing preparation:						
Name of Nursing School Attended:						
What year did you graduate:						
University application through the A YesNo Currently enrolled Are you currently employed as a RN If so, where are you currently worki If you have earned a bachelor's or m please state the type of degree, majo	N?YesNo ng? naster's degree in another area pr					
The following data is for statistical p	purposes only and will NOT be u	sed in the admission decision:				
Gender:MaleFemale						
Date of Birth:						
 Race/Ethnic Group: I: Native American/Alaskan Native; O: Asian or Pacific Islander; B: Black/Non-Hispanic H: Hispanic; W: white/non-Hispanic; X: choose not to report; Z: other 						

Be sure to complete the Course Table on page 4.

Course Table

Note: This table MUST be completed for application, even with attached transcripts.

Please indicate the semester you completed the prerequisite courses or if you are currently enrolled in the course.

Students must complete EACH prerequisite course with a grade of C or higher.

Nursing Prerequisites			
Course	<u>Semester</u>	Credit Hours/Grade	<u>Institution</u>
Chemistry I – CHEM 1203			
Microbiology – BIOL 2259			
Anatomy & Physiology I - BIOL 2273/KNES 2273			
Anatomy & Physiology II – BIOL			
2274/KNES 2274			
Introduction to Anthropology – ANTH 1101			
Or Introduction to Sociology – SOCY 1101			
General Psychology – PSYCH 1101			
English Composition I – ENGL 1101			
College Algebra - MATH 1100			
Statistics 1220, 1221, or 1222			
General Education (these courses or transfer equivalents)CourseEnglish 1102		Credit Hours/Grade	<u>Institution</u>
LBST 110X Arts & Society			
LBST 2101 Western Tradition			
LBST 2102 Global Understanding			
LBST 220X Ethical Issues& Cultural Critique			
Electives Course Elective 1:	Semester	Credit Hours/Grade	<u>Institution</u>
Elective 2:			

All courses must be completed by the end of the summer semester for fall admission and by the end of the fall semester for spring admission.

A minimum Cumulative GPA of 2.0 is required to apply.

University General Education Requirements:

Students are responsible for checking with the RN to BSN Coordinator and the university catalog to ensure they have met the General Education requirements for graduation.

Acknowledgement of Responsibility and Accuracy

_____, attest that I have read and understand I, (please print) the information and instructions of this application and that all information contained herein is true and accurate. I understand that any false and/or misleading information will exclude my application from consideration.

Signature: _____ Date: _____