Division of Nursing Application for the Upper Division

Please review information below and follow the guidelines explicitly to facilitate the processing of your application. Failure to comply with all directions and requirements will result in the application not being considered.

Meeting the minimal admission criteria as listed below, does not guarantee admission into the Upper Division of Nursing. Factors that are considered in admission decisions include but are not limited to:

- Grades received in science courses
- Grades received in Lower Division Nursing courses
- Overall Academic profile

Minimum Admission Criteria

- Cumulative GPA 2.6
- Verbal/Critical Reading SAT 470 if taken prior to March 2016; 500 if taken March 2016 or after OR ACT English score 19
- Grade of C or better in required Life and Physical Sciences courses taken within the last seven years on the first attempt. A student who receives a failing grade in a required life of physical science course may be denied admission.
- General education core and nursing pre-requisites

The Application Process

1. Meet with academic advisor prior to the deadline for submitting the application, preferably, the semester prior to applying to the Upper Division to assure readiness for applying and to clarify any questions related to the application process.
2. Complete the application form (attached).
   - Submit along with the application the documentation for each admission criteria listed under the minimum admission criteria. SAT or ACT score report or documentation of the score on a high school or college transcript.
   - Submit transcript(s) from all institution (including WSSU) showing the grades for the general education core and nursing pre-requisites (completed and current enrollment), current GPA and degree if applicable. (DO NOT SUBMIT DEGREE AUDITS)
3. Submit application, transcripts and all other requested documents to the Office of Student Affairs, Division of Nursing located in room 207 F.L. Atkins building.

NOTE: Application deadline is January 31st. Incomplete application packets will not be reviewed.
APPLICATION FOR ADMISSION TO THE
Upper Division in Nursing

First Time Applying: Yes ☐ No ☐ if no date applied: ☐

Banner ID ______________________

The personal data requested on this form is needed by the Division of Nursing to provide aggregate data to regulatory and accrediting agencies and to meet clinical agencies’ requirements. All student information will be kept confidential and will be used only as indicated above. By providing the information requested in this document, you give permission to DON to utilize the information as stated above.

Last Name:  First Name:  Middle Name:  Maiden Name:  

Address:  City:  State:  Zip:  County  

DOB:  Age:  Gender:  Marital Status:  Veteran Status:  

US Citizen: Yes or NO  if no, indicate country  Rural Residential background (Yes or NO):  

Home Telephone:  Cell Phone:  WSSU Email:  

Other Email:  Next of Kin:  Contact Information:  

Race/Ethnicity
○ African American
○ Caucasian
○ Native American (indicate country)___________
○ African (indicate country)___________
○ Hispanic (indicate country)___________
○ European (indicate country)___________
○ Asian (indicate country)___________
○ Pacific Islander (indicate country)___________
○ Other (indicate country)___________
Education Background:

Previous College(s)/dates attended/degree (copies of transcripts attached):

1. ________________________________________________________________

2. ________________________________________________________________

3. ________________________________________________________________

4. ________________________________________________________________

5. ________________________________________________________________

Degree Obtained: ____________
Date of Graduation: ____________