

EASTERN KENTUCKY UNIVERSITY
COLLEGE OF HEALTH SCIENCES
DEPARTMENT OF BACCALAUREATE AND GRADUATE NURSING

APPLICATION FOR ADMISSION TO 2ND DEGREE OPTION

Please submit completed application along with the following items by **March 1st** to be considered for admission into the 2nd Degree BSN Program.

1. Complete official transcripts of all academic work. International students must have an evaluation done by JSILNY, WES, or ECE to document degree completed. Contact admissions for more details. An interview may be required.
 - a. **Official transcripts are required.** (Front **and** back copies of official transcripts issued to student are acceptable.)
 - b. If applicable, official transcript of TOEFL score and JSILNY, WES, or ECE transcripts are required for International Students.
 - c. NOTE: Transcripts sent to ECU Admissions are not accessible by our office. They must be separately sent with your application.
2. Personal Essay (Maximum of 500 words). Grading criteria:
 - a. Organization/Writing Style and Grammar
 - b. Goals and Community Service
 - c. Consistent Values (articulates: caring humanistic view, commitment to nursing profession, honesty, and trustworthiness)
3. Professional Resume (Include educational and employment history).
 - ❖ List organizations, specific activities, and dates of service for each service activity
4. 3 professional reference letters from the following list:
 - ❖ Recent employer
 - ❖ Most recent academic program (Advisor, professor, etc.)
 - ❖ Recent service organization/volunteer work for which you were a participant
 - ❖ NO FAMILY OR FRIEND REFERENCES WILL BE ACCEPTED.
 - ❖ NOTE: Letters can be given to applicant and put with application packet or emailed/mailed directly to DBGN Main Office.

Applicant's Personal Information:

Name: _____ ECU ID #: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____ Phone: () _____ - _____

E-mail Address (where letter will be sent): _____

Bachelor's Degree Information:

Degree: _____ Institution: _____

Date Degree Completed: _____ Check if still in progress: _____
Term/Year to be completed

Prerequisite Course Information:

Human Anatomy _____ / _____
Course Name & Number Term

Nutrition _____ / _____
Course Name & Number Term

Human Physiology _____ / _____
Course Name & Number Term

Statistics _____ / _____
Course Name & Number Term

Microbiology _____ / _____
Course Name & Number Term

*If a prerequisite has not been completed, please indicate the term you are taking it, where you will be completing it, and when it will be completed by. (Please note that all courses must be completed **before** you are eligible to begin the program).

Have you been enrolled in nursing courses in another nursing program? Yes No

*If yes, you must also complete the Applicant from Another Nursing Program form and the Nursing School Director Reference form.

Are you also applying to the Traditional BSN Option? (Separate application by March 31st) Yes No

Are you an Alice Lloyd student pursuing the Dual Degree Program? Yes No

Student Signature _____ Date _____

Revised 01/11, 09/11, 5/12, 7/14, 6/15

Mail application to:
Eastern Kentucky University
Department of Baccalaureate & Graduate Nursing
Second Degree BSN Program
223 Rowlett Building
521 Lancaster Avenue
Richmond, KY 40475-3102