

**DELTA STATE UNIVERSITY  
SCHOOL OF NURSING  
BACCALAUREATE PROGRAM  
APPLICATION**

Spring \_\_\_\_\_ Fall \_\_\_\_\_ Summer \_\_\_\_\_ Year \_\_\_\_\_

1. Name in Full \_\_\_\_\_  
(Last) (First) (Middle)
2. Home Address \_\_\_\_\_  
(Number & Street or RFD) (City) (State) (Zip) (Phone)
3. Mailing Address \_\_\_\_\_  
(If different from home)
4. Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Race \_\_\_\_\_
5. List all institutions of learning attended since high school (attach extra sheets as needed)  
Institution \_\_\_\_\_ through \_\_\_\_\_  
Institution \_\_\_\_\_ through \_\_\_\_\_
6. Composite score on the ACT \_\_\_\_\_ If less than 21, when do you plan to retake? \_\_\_\_\_
7. Have you previously enrolled in any type of nursing program? \_\_\_\_\_ If yes, type of program \_\_\_\_\_
8. When do you expect to enroll in the DSU School of Nursing? \_\_\_\_\_

9. The following statements, documents, and forms must be submitted by the appropriate deadline before this application for admission is considered. It is the applicant's responsibility to ensure that all forms are received in the School of Nursing.
- A. Admission to Delta State University
  - B. Official ACT profile score. If this is on file in either the Admission's or Registrar's Office, the applicant must request that a copy be sent to the School of Nursing. Student must insure that an official copy is on file in the School of Nursing. ACT scores printed on transcripts and not specifically designated "National Testing" are **not** considered official scores.
  - C. Transcripts from all colleges and universities attended sent to the School of Nursing. DSU students are responsible for having all transcripts, **including DSU transcripts**, sent to the School of Nursing office. DSU students must request DSU Registrar's Office send DSU transcripts to School of Nursing office.
  - D. Three references utilizing School of Nursing criteria and forms. Applicants are responsible for ensuring that reference forms are received in the School of Nursing office.
  - E. Proof of current health provider CPR card (adult, child, infant)
  - F. Proof of criminal background "clearance" (signed affidavit from School of Nursing)
  - G. Approved nurse entrance assessment test
  - H. RN applicants only: Proof of RN license in good standing

10. Have you ever been convicted or are you in the process of being tried for a misdemeanor or felony?  
\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, explain \_\_\_\_\_

**Individuals having been convicted of a misdemeanor or felony may not be allowed to write the NCLEX Exam for RN Licensure. In their discretion the Mississippi State Board of Nursing has the authority to refuse licensure to anyone convicted of a misdemeanor or felony. (See State of Mississippi, Law, Rule & Regulations, Mississippi Board of Nursing Section 73-15-29 (1) (b)).**

11. I hereby make application to the School of Nursing, Delta State University and agree to abide by the regulations and policies of the School of Nursing while I am a student.

Applicant's Signature \_\_\_\_\_ Social Security Number \_\_\_\_\_

**ASSURANCE OF COMPLIANCE (NO 34-0090):**

Delta State University is committed to a policy of equal educational and employment opportunity without regard to race, color, religion, sex, national origin, disability related to program performance, disabled veteran status or Vietnam era veteran.

Revised: 07/04

**REFERENCES FOR ADMISSION  
TO THE BACCALAUREATE NURSING PROGRAM  
DELTA STATE UNIVERSITY  
SCHOOL OF NURSING**

1. Three references are required for admission to the School of Nursing.
2. The applicant is responsible for securing the recommendations.
3. Persons requested to give references should complete the forms provided and return them to the School of Nursing by no later than October 1, for Spring admission.
4. Questions regarding references should be directed to the Coordinator of Academic Programs, Delta State University School of Nursing.
5. References for generic students **MUST** be from the following:
  - a. High school principal or counselor
  - b. College level instructor
  - c. Employer, if the student has been employed in the past
  - d. Any person other than a family member, if the student has not been employed.
6. References for Registered Nurse students **MUST** be from the following:
  - a. Employer (Required)
  - b. College level instructor (Required)
  - c. High school principal or counselor
  - d. Any person other than a family member, if the student is unable to get a reference from a high school principal or counselor.

