

**Please check one of the following tracks of study:**

Clinical Nurse Leader

Nursing Leadership & Management

Nurse Educator

**University of Central Florida  
College of Nursing**

**RN TO MSN PROGRAM  
Application for Admission**

**(To be eligible for this program you MUST have a current RN License.)**

**Please check program and indicate year of anticipated admission**

RN to MSN Fall 20 \_\_\_\_   
(Application deadline March 15th)

RN to MSN Spring 20 \_\_\_\_   
(Application deadline October 1st)

*Students are accepted into the RN to MSN program as an undergraduate student. After completing their BSN degree requirements, students must first apply and be accepted into graduate school to progress and complete the MSN portion of the program (admission to graduate school is not guaranteed).*

Date \_\_\_\_\_

PID # \_\_\_\_\_

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Social Security Number

Birth Date: \_\_\_\_\_  
Month Day Year

**Biographical Information:** (please print)

\_\_\_\_\_

Last Name

\_\_\_\_\_

First Name

\_\_\_\_\_

Middle or Maiden Name

- Male  U.S. Citizen
- Female  Resident Alien

**Ethnicity:**  American Indian  Asian or Pacific Islander  
(voluntary)  Black (not Hispanic)  Hispanic  
 White (not Hispanic)  Other

*Ethnicity is requested by the U.S. Department of H.E.W. under Title VI of the Civil Rights Act. Your response will not affect admission to the school*

**Resident Information** (please print):

**Home Address:**

\_\_\_\_\_ Street \_\_\_\_\_ Apt. #

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County

**Home Telephone:** ( ) - **Business Telephone:** ( ) - **Email:** \_\_\_\_\_

**RN License Number:** \_\_\_\_\_ **Employer:** \_\_\_\_\_

**I have completed General Education Requirements**  Yes  No

**I have passed the CLAST**  Yes  No  Exempt

**If you are not accepted into the RN-MSN option, do you want to be considered for admission to the RN-BSN program at the University of Central Florida, College of Nursing?**  Yes  No



Please return the application to:  
University of Central Florida  
College of Nursing  
Attn: RN-MSN Program Assistant  
P.O. Box 162210  
Orlando, FL 32816-2210  
<http://www.nursing.ucf.edu>

(407) 823-2744

Fax: (407) 823-2222

Name: \_\_\_\_\_

**Academic Record:** Include all schools attended since high school. If additional space needed, attach additional sheet (Please note if records are under another name)

Name & Location	Date Completed	Major	Degrees Obtained

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**Submit the following in one packet to the College of Nursing:**

- Application to the College of Nursing RN-MSN Program.
- An essay describing desire to pursue the accelerated RN-MSN option. Include interest in field and career goals.
- Resume.
- Three letters of recommendation from people who can judge your abilities to complete graduate level work. At least one must be from a faculty member. Ask them to seal the reference in an envelope, sign across the flap and return to you to enclose in your packet.
- Transcripts from all schools attended, copies are acceptable.
- Copy of RN License.
- Copy of TOEFL or CGFNS if applicable (international students only).

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**Special Needs: (This section if voluntary)** If you need any special accommodations from the University of Central Florida in order to succeed in your degree program, please list them below.  
 \_\_\_\_\_  
 \_\_\_\_\_

**Failure to answer these questions will delay the processing of your application.**

If you answer yes to any of the following, you must submit a full statement of relevant facts on a separate sheet attached to this form. You may be required to furnish the university with copies of all official documentation explaining the final disposition of the proceedings.

1. Have you ever been charged with or subject to disciplinary action for scholastic or any other type of misconduct at any educational institution?  
 Yes       No
2. Have you ever been charged with a violation of the law which resulted in probation, community service, a jail sentence, or the Revocation or suspension of your driver’s license (including traffic violations which resulted in a fine of \$200 or more)?  
 Yes       No
3. Have you ever been arrested?  
 Yes       No

If your records have been expunged pursuant to applicable law, you are not required to answer yes to these questions. If you are unsure whether you should answer yes to the above questions, we strongly suggest that you answer yes and fully disclose all incidents. By doing so, you can avoid any risk of disciplinary action or revocation of an offer of admission.

**I have read and understand the items above and have completed all sections.  
 I understand that my application will not be accepted unless all the required items are complete.**

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date