

BSN Post-Licensure Application

Last Name First Name Middle Name Maiden Name (if applicable)

1. This application **must be completed** by all students seeking admission to the RN to BSN Program.

The program accepts new students into the Fall, Spring and Summer semesters.

1. There are **two applications** that must be completed: one to Montana Tech as an institution AND one to the Nursing program. **YOU MUST APPLY TO MONTANA TECH BEFORE YOU APPLY TO NURSING.**
* **Montana Tech Application**

You must apply on-line to Montana Tech at the following website:

<http://www.mtech.edu/admissions/transfer/index.php>

There may be 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 Admissions Office, 1300 West Park St, Butte, MT. 59701. **It is your responsibility to check that the Admissions Office has received your complete application including your official transcript by the due date.**

* **BSN Post-Licensure Application**

Once you have been accepted to Montana Tech, you must complete this paper application and mail it along with a copy of your RN license and all transcripts (these may be unofficial copies) to:

Montana Tech Nursing Department

Health Science Building

1300 West Park Street

Butte, MT. 59701

1. Admission to the BSN Post-Licensure Program is competitive, and there is restricted enrollment.

**Applicant Information**

**(Please print legibly)**

**Semester/Year applying for\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **(Please include zip code)**

**Phone Numbers: Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Accredited ASN Program Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Year of Graduation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have you applied to and been accepted to Montana Tech?**

**\_\_\_\_\_ Yes \_\_\_\_\_\_ No**

**If you have earned a Bachelor’s or Master’s degree in another area prior to the date of this application, please state the type of degree, major, date earned, and the Institution you attended:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Required Documentation**

**In order for your application to be considered complete, you MUST submit all of the following documents WITH your application:**

* Unofficial Transcripts.
* Copy of unencumbered RN license.
* Proof of Tdap within the last 10 years.
* Proof of two shots of measles, mumps, and rubella vaccination or a titer showing immunity.
* Evidence of Hepatitis B (series of three shots) or a titer showing immunity.
* Varicella two doses or a titer showing immunity.
* Current evidence of freedom from active tuberculosis (TB skin test or chest x-ray) annually.
* Proof of current (infant through adult) CPR certification. (American Heart Association for the Health Care Provider OR American Red Cross for the Professional Rescuer ONLY.)
* Current annual Flu vaccine

**Course Table**

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

***Students must complete EACH prerequisites course with a grade of C- or higher.***

**Nursing Prerequisites:**

**Course Semester Credit Hours/Grade Institution**

Anatomy & Physiology I-BIOH 201/202 \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anatomy & Physiology II- BIOH 211/212 \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Intro to General Chemistry- CHMY 121 \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Intro to General Chemistry Lab-CHYM 122 \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College Writing I- WRIT 101 or WRIT121 \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College Algebra- M 121 \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fundamentals of Nutrition- NUTR 258 \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Intro to Psychology- PSYX 100 \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Microbiology for Health Science- BIOM 250\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Microbiology Lab - BIOM 251 \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Applicant Date**

**By signing above, I certify that all information is true and correct to the best of my knowledge.**