



Georgia Baptist College of Nursing
of Mercer University

3001 Mercer University Drive
Atlanta, GA 30341

Application for MSN Program and
Nurse Educator Certificate Program

APPLICATION FOR ADMISSION
Master of Science in Nursing
Nursing Educator Certificate
Georgia Baptist College of Nursing of Mercer University

APPLICATION PROCESS

MSN APPLICANTS

1. Complete this application to apply to the Master of Science in Nursing (MSN).
2. Submit a \$50 nonrefundable fee. Please do not send cash. Please send a check or money order made out to Georgia Baptist College of Nursing of Mercer University.
3. One official transcript from each college/university/professional school attended.
4. Official scores from the Graduate Record Examination (GRE) or the Miller's Analogy Test (MAT). Scores must be less than five years old.
5. Three letters of professional reference addressing your ability to successfully complete graduate study in nursing. At least one of these letters must be from a master's prepared nurse. Please use the attached forms for recommendations.
6. Submit a 300 word essay describing professional goals and reasons for seeking graduate education or nurse educator certification.
7. A copy of your current, unencumbered Georgia RN license.
8. Interview with the Associate Dean for the Graduate Program or designated faculty member.
9. A minimum of one year of work experience as a registered nurse in, or related to, the selected clinical area is recommended.

NURSE EDUCATOR CERTIFICATE APPLICANTS

Applicants with an earned master's degree in nursing and a minimum of 1,000 hours of nursing practice during the most recent three years may be considered for the Nurse Educator Certificate program. All items listed for the MSN applicants must be submitted, except test scores (#4). Two letters of professional reference are required (rather than three).

INTERNATIONAL APPLICANTS International applicants submit items 1-9 (as listed above) in addition to the following:

1. Official current score report for TOEFL.
2. Official evaluation of international transcripts from one of the approved international transcript evaluation services:
Josef Silny & Associates, Inc., E-mail: info@silny.com
Educational Credentials Evaluators, E-mail: eval@ece.org

Deadlines (Please note that all documents must be received by the deadline):

Fall Semester	April 15	priority deadline and international student deadline
	July 1	final deadline (based on space available)
Spring Semester	October 1	priority deadline and international student deadline
	November 1	final deadline (based on space available)

HONOR CREED AND PLEDGE – All Applicants Must Sign

Adherence to the Honor System is an obligation that all students are expected to meet when they are accepted into this academic community. In selecting Georgia Baptist College of Nursing of Mercer University, I adopt the Honor System by the following creed: As a member of the Georgia Baptist College of Nursing of Mercer University community, I am bound by honor to develop and uphold the highest standards of honesty and integrity, to strive for full intellectual and moral developments; and to accept my personal and academic responsibilities in the community. To attain these ideals, I embrace this Honor System as my way of life.

In addition to living by the creed, I acknowledge that, as a student at the College of Nursing, I would be asked to pledge all quizzes, examinations, papers, projects, or lab work with the following pledge: On my honor, I pledge that I have neither given nor received help on this work, nor am I aware of violation on the part of others.

My signature indicates that I am providing the College with information that is factually correct, complete and honest in its presentation. With this application, I am requesting admission to Georgia Baptist College of Nursing of Mercer University on the basis of the terms listed above.

Signature of Applicant _____ *Date* _____

Printed Name _____

APPLICATION FOR ADMISSION

GEORGIA BAPTIST COLLEGE OF NURSING OF MERCER UNIVERSITY

3001 Mercer University Drive • Atlanta, GA 30341 • (678) 547-6700
E-mail: nursing@mercer.edu
nursing.mercer.edu

<i>Please type or print clearly</i>				PERSONAL INFORMATION			
DATE	EXPECTED TERM OF ENTRY Semester <input type="checkbox"/> Fall 20__ <input type="checkbox"/> Spring 20__	AREA OF CONCENTRATION <input type="checkbox"/> Nurse Educator Cert. Program <input type="checkbox"/> Nurse Educator <input type="checkbox"/> Clinical Nurse Specialist/Adult <input type="checkbox"/> Dual	PLAN TO ENROLL <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time				
LEGAL LAST NAME		FIRST NAME		MAIDEN/MIDDLE		SOCIAL SECURITY NUMBER <input type="checkbox"/> If none, check here	
PREFERRED NAME			GENDER <input type="checkbox"/> M <input type="checkbox"/> F	Under what other names might academic records be listed?			
CURRENT MAILING ADDRESS (Number and Street)				COUNTY		PHONE ()	
CITY		STATE/COUNTRY				ZIP	
PERMANENT MAILING ADDRESS (Number and Street)				HOMETOWN NEWSPAPER		HOME PHONE ()	
CITY		STATE/COUNTRY				ZIP	
E-MAIL ADDRESS			WORK PHONE ()		DATE OF BIRTH	PLACE OF BIRTH (City/State/Country)	
ARE YOU A U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO	COUNTRY OF CITIZENSHIP		TYPE OF VISA		If permanent resident, provide Alien # Date Issued		
* The College of Nursing is required to report data on race/ethnic group and sex to certain federal and state agencies as those data relate to civil rights compliances. Ethnicity and Race are optional – for statistical data only.							
IS ENGLISH YOUR NATIVE LANGUAGE? <small>If not, please list language</small> <input type="checkbox"/> YES <input type="checkbox"/> NO			RELIGIOUS PREFERENCE/DENOMINATION (optional)			MARITAL STATUS (optional) <input type="checkbox"/> MARRIED <input type="checkbox"/> SINGLE	
ARE YOU A MEMBER OF SIGMA THETA TAU INTERNATIONAL CHAPTER? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, CHAPTER:				PLEASE LIST ALL CURRENT PROFESSIONAL MEMBERSHIPS:			
CHECK APPROPRIATE BOX <input type="checkbox"/> Hispanic Origin <input type="checkbox"/> Not of Hispanic Origin			Select one or more boxes as appropriate for Race <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Black or African American <input type="checkbox"/> White				
PERSON TO NOTIFY IN CASE OF EMERGENCY: NAME			RELATIONSHIP			TELEPHONE ()	
STREET ADDRESS				CITY		STATE	ZIP

CRIMINAL BACKGROUND CHECK AND DRUG SCREENING

The College of Nursing

Georgia Baptist College of Nursing of Mercer University does not require either a background check or drug screening for admission. Failure to be honest in the completion of the application question (below) regarding prior conviction may result in an honor code violation and could result in dismissal from the program.

Clinical Agencies

As a graduate nursing student, you may be required to provide a criminal background report and/or drug screening, at your own expense, if required by the clinical agency to which you are assigned, with results reported directly to the clinical agency, not Mercer University faculty or staff. If the clinical agency finds the results of the drug screening or criminal background check to be unacceptable, Georgia Baptist College of Nursing may not be able to provide further educational experiences, which could impede the student's progression and completion of the nursing degree.

Please respond to the following questions:

1. Have you ever been convicted of a violation of a federal, state, or municipal law, regulation or ordinance, other than a minor traffic violation? Yes No
2. Have you ever been in disciplinary difficulty while attending any college? Yes No

If you answered yes to either question, please provide a written explanation to be included with the application.

EDUCATION

PLEASE LIST IN CHRONOLOGICAL ORDER ALL SCHOOLS ATTENDED SINCE HIGH SCHOOL

Name	City / State	Dates Attended	Diploma/Degree Earned	Date Received or Expected to Receive Diploma or Degree

TEST SCORES

Have you taken the GRE? Yes No Date _____

Have you taken the MAT? Yes No Date _____

If you have not taken these tests, indicate the date you plan to take the GRE _____ or MAT _____.

If you are an International Student:

Have you taken the TOEFL? Yes No Date _____

Have you taken the TSE? Yes No Date _____

If you have not taken these tests, indicate the date you plan to take the revised TOEFL _____.

Have you successfully completed Mercer University English Language Institute (MUELI)? Yes No

If no, do you plan to enroll in MUELI? Yes No When? _____

EMPLOYMENT HISTORY

PLEASE LIST IN CHRONOLOGICAL ORDER YOUR WORK EXPERIENCE OVER THE LAST FIVE YEARS OR ATTACH CURRENT VITA OR RÉSUMÉ

Name	Position/Title	Dates of Employment

Are you eligible for veterans' benefits? Yes No

Do you now, or have you ever served in the military (including the reserves)? Yes No

Do you plan to apply for financial aid? Yes No

Please list any other graduate programs you are applying to for admission _____

Please list the names and titles of the three references who will be submitting recommendations _____

Where did you learn about Georgia Baptist College of Nursing of Mercer University? *(Check all that apply)*

Advertising, Where? _____ Campus Visit Co-worker Relative Alumni Church Friend Website

Professor/Advisor Brochures College Fair/Admissions Rep. Open House Other _____

What was the single most important factor that influenced your decision to apply to Georgia Baptist? _____

Please attach a 300-word essay describing your professional goals and reasons for seeking graduate education.

I certify that the information provided on this application is true, to the best of my knowledge, and I understand that omissions or misrepresentations may automatically invalidate consideration and/or acceptance to, or continuation, at the College of Nursing.

SIGNATURE (X)	DATE
------------------	------

This applicant works effectively with others.

strongly agree agree disagree strongly disagree unable to rate

This applicant possesses leadership abilities.

strongly agree agree disagree strongly disagree unable to rate

This applicant is knowledgeable in his or her field of nursing.

strongly agree agree disagree strongly disagree unable to rate

This applicant is highly motivated.

strongly agree agree disagree strongly disagree unable to rate

Please indicate your overall recommendation.

highly recommend recommend recommend with reservation do not recommend

Signature _____ Date _____

Please return in a signed and sealed envelope to:
Georgia Baptist College of Nursing of Mercer University
Office of Admissions
3001 Mercer University Drive
Atlanta, Georgia 30341
(678) 547-6000
nursing.mercer.edu • E-mail: nursing@mercer.edu