Marshall University College of Health Professions School of Nursing Master of Science in Nursing Program Application

MUID:		Legal Name:				
		Last	First	Middle/Maiden		
		Address:				
Street/PO Box			City State	·	ounty	
Countr	y (if not U	(S)	Date of Birth:_	Gender:_	Ethnicity	
			Hansa Dhanas	144 I. Dh	Optional	
Email A	Address:		Home Phone:_	Work Ph	one:	
		Indicate	Desired Program and A	Area of Emphasis		
□ Mast	er of Scien	ce in Nursing Program	Post Master's	□ Post Master's Certificate Program		
□ Family Nurse Practitioner				☐ Family Nurse Practitioner		
□ Nurse Midwifery*			_	□ Nursing Administration		
□ Nursing Administration			Nursing Edu	□ Nursing Education		
	ursing Educ					
	-	1ental Health NP				
Admission Requested for Fall/Spring of			Admission Requ	Admission Requested for Site: Huntington, MOVC, S. Charleston, Beckley, Bluefield		
		(Circle One) (Yea	ar) Huntington, MO	IVC, S. Charleston, Beck	iey, Bluefield	
			ary of Work Experience	e on Admission		
Years e	employed	in nursing:	Current Setting	g: 🗆 Urban 🗆 Rural 🗅	Underserved	
Current position:			County Employ	red:		
Curren	t specialty	y:				
3. 4. 5. 6.	a. Degroc. d. Professio a. Posi c. d. Professio Professio Commun	onal Background (list in reversinstitution and address b. ree awarded Dates attended (from MM/D Was this nursing program NL nal Background (list in reversinstitution and address b. tion held Dates of employment (from I Reason for leaving nal Licensures and/or Certific nal Organization Membership ity Service Projects es and/or Awards Received (i	D/Year to MM/DD/Year) NAC or CCNE accredited a e chronological order): MM/DD/Year to MM/DD/ cations (if any) p(s)		on (Y /N)	
7 .	I took 3 c	redits of research from	Institution	Grade	Semester completed	
8.	l took 3 d	credits of statistics from	msutation	- Grade	Jemester tompieteu	
			institution	Grade	Semester completed	
	I verify t	that the submitted informa	ation is correct.		Date:	
	•			Signature		
	Submit all	applications and materials to:	Marshall University Gradu Attn: Office of Admissions One John Marshall Dr Old Main B19	•		
			Huntington, WV 25755			

Note: Applications for admission will be accepted on a priority rolling basis no later than December 1st for Spring and August 1st for Fall semesters.
*All candidates for Nurse-Midwifery and Psychiatric Mental Health Nurse Practitioner MUST complete an Interview with Shenandoah University.