The Nursing Programs at Tennessee State University (TSU) are limited enrollment programs based on faculty and clinical resources. Admission to the Associate of Applied Sciences is competitive.

Please type or print legibly:

**Name:**

___ ___ ___

First  Middle  Last  Maiden

**Mailing Address:**

____________________________________

Street name and number  Apt #  County

______  ______  ______

City  State  Zip Code  Home Phone  Cell #

*E-mail address: ________________________  Student ID T#  _______________________

Are you currently a resident of the state of Tennessee?

Yes  No

List all previous institutions attended: (Attach additional sheets if needed)

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<th>Name of Institution</th>
<th>Dates attended</th>
<th>Degree earned</th>
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The School of Nursing requires copies of the information listed below. Turn in ALL completed application materials TOGETHER to the School of Nursing - only when you meet ALL of the admission requirements. **If your application is incomplete, it will not be reviewed nor considered for the program.**

- [ ] High School/College Chemistry
- [ ] Required GPA (2.5 or higher)
- [ ] Pre-nursing exam score (HESI A-2)
- [ ] COMPLETION OF ALL DEVELOPMENTAL COURSES
- [ ] TSU admission letter
- [ ] Copies of previous college transcripts
- [ ] Updated academic/TSU transcripts
- [ ] Copy of Current [Unencumbered](#) License
- [ ] Verification of current employment (on letterhead)
- [ ] Reference Letter (on letterhead)
- [ ] Letter of Intent
- [ ] COMPLETION OF ALL GENERAL EDUCATION COURSES

Revised 7/28/15
Additional information required for Certified and Licensed Applicants:

Graduated or completed training from _____________________________________________ Name of Institution

Date Graduated or completed LPN training _________________________

Current Employment __________________________________________________________

Current Unencumbered LPN License # __________________________ State: ________

Expiration Date: ___________________

In keeping with the required affirmative action and institution reporting at Tennessee State University, applicants are encouraged to provide the following information; however, it is not mandatory.

Ethnic Background: ______________________________ Gender: ___ DOB: ________

Marital Status: Single___ Married___ Divorced ___ Separated ___ Widowed___ Other___

Head of Household ___________________________ Number of dependents _________

The School of Nursing seeks to provide a reasonably safe environment for its nursing students and their patients. A student may be required, during the course of the program, to demonstrate their physical and/or emotional fitness to meet the essential requirements of our program. Such requirements may include, but not limited to, freedom from communicable disease, the ability to perform certain physical tasks and suitable emotional fitness.

Any appraisal measures used to determine such physical and/or emotional fitness will be in compliance with Section 504 of the Rehabilitation Act of 1973 and the American with Disabilities Act of 1990, so as not to discriminate against any individual on the basis of handicap.

_________________________________________ _________________________
Signature of Applicant Date

Please submit your application material to the School of Nursing with all required information by

October 1st for Spring Admission

Send completed application materials to:
Tennessee State University
School of Nursing Weekend/Evening Program
ATTN: Ms. Kathy Gretton Program Coordinator
330 10th Avenue North, Box 144
Nashville, TN 37203-3401

Tennessee State University Is An Affirmative Action Institution