



<b>TENNESSEE STATE UNIVERSITY DIVISION OF NURSING BSN APPLICATION</b>
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The Nursing Programs at Tennessee State University (TSU) are limited enrollment programs based on faculty and clinical resources. Admission to the Bachelor of Science in Nursing Programs is competitive. Composition of each class reflects the diversity of the applicant pool. Information regarding the admission of applicants is available from the Division of Nursing and online at [www.tnstate.edu](http://www.tnstate.edu). An applicant does not have to be admitted to TSU prior to submission of an application however the applicant must be fully admitted to TSU in order to be offered admission to the BSN Program. Without exception, all general education/nursing prerequisite coursework must be completed by TSU Summer I Term. Only two courses can remain to be taken in TSU Summer I term. **The Overall GPA considered for the 2015 application is the overall GPA at the end of the fall semester 2014. Entering the applicant pool does not guarantee admission to the BSN Program.**

**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 #

TSU T # \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**List All Previous Institutions Attended: (Attach additional sheet(s) if needed) [include student copy of transcript for each previous institution with this application]**

\_\_\_\_\_  
                     Name of Institution                    Dates Attended \_\_\_\_\_                    Degree Earned \_\_\_\_\_

\_\_\_\_\_  
                     Name of Institution                    Dates Attended \_\_\_\_\_                    Degree Earned \_\_\_\_\_

**The Division of Nursing requires copies of the information listed below. Turn in ALL completed application materials TOGETHER, to the Division of Nursing, only when you meet ALL the admission requirements.**

Check one of the following categories:

I am applying to the Upper Division BSN Program \_\_\_\_\_ I am applying to the RN-BSN Completion Program \_\_\_\_\_

**Bachelor of Science Degree Program**

- Required **Minimum Overall GPA** for upper division BSN Program is 2.8  
**OR** Required Minimum overall GPA for RN-BSN Program is 2.5 overall \_\_\_\_\_
- **Copy** of BSN Pre-Nursing Exam Score Report with minimum score earned on each component and composite [**Exam not required for RN-BSN**] \_\_\_\_\_
- **Student Copy** of Previous College Transcripts from **each** College attended [transcript must be included from **each** school with recorded grades earned] \_\_\_\_\_
- Updated TSU Transcript **IF you are a current TSU student** \_\_\_\_\_
- If you **do not** have an RN license and have taken any nursing courses in another program, you must submit a letter of good standing from the Program Dean/Director and copies of nursing course syllabi \_\_\_\_\_
- If the required general education/pre-requisite courses are not yet completed, you must **submit a letter outlining your plan for completion of the courses by the end of Summer I term [no more than two courses can be taken in TSU Summer I term]** \_\_\_\_\_

**Additional information required for students who are Registered Nurses and you are applying to the RN-BSN Completion Program:**

Graduated from \_\_\_\_\_ Date Graduated \_\_\_\_\_  
 Name of Institution \_\_\_\_\_  
 Degree \_\_\_\_\_  
 Current Employment \_\_\_\_\_  
 Current RN License # \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Is your RN licensure unencumbered? \_\_\_\_\_ Yes \_\_\_\_\_ No Comments: \_\_\_\_\_  
 \_\_\_\_\_

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 \_\_\_\_\_ Age \_\_\_\_\_  
 Martial Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Widowed \_\_\_\_\_ Other \_\_\_\_\_  
 Head of Household \_\_\_\_\_ Number of Dependents \_\_\_\_\_

The Division of Nursing seeks to provide a reasonably safe environment for nursing students and their patients. A student may be required, during the course of the program, to demonstrate 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.

**Criminal background checks and drug screens may be a requirement for placement at some affiliated clinical sites. Based on the results of these checks and screenings, an affiliated clinical site may determine to not allow your presence at their facility. This could result in your inability to successfully complete the requirements of the nursing program. Additionally, a criminal background may preclude licensure or employment.**

**Certificate of Application:** I affirm, agree, and /or understand that all information provided on this form is true and accurate; any misrepresentation or omission of material facts may result in my dismissal from any of the nursing programs. I hereby authorize Tennessee State University or other state investigative agencies to make all necessary investigations concerning me, my work habits, character, or my action in any transaction. I authorize each educational institution or organization to provide all information that may be requested by TSU in connection with this application.

I understand it is my responsibility to submit all required application materials in one envelope by the designated program deadline date. I also understand it is my responsibility to follow up and make sure my application packet is complete/inclusive of all required materials, and to notify the nursing program office of any changes (address, email, phone, name change, etc.).

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**PLEASE SUBMIT YOUR APPLICATION MATERIAL TO THE DIVISION OF  
NURSING BSN PROGRAM WITH ALL THE REQUIRED INFORMATION  
BY MARCH 1st FOR FALL ADMISSION**

**Applicants must submit the complete packet of materials in ONE envelope. Incomplete packets will not be considered for admission to the program. Submit your completed application materials to:**

Tennessee State University  
BSN Program Director  
Division of Nursing – Frederick S. Humphries Building  
Baccalaureate Degree Admissions – Room 310  
3500 John A. Merritt Boulevard, Box 9590  
Nashville, Tennessee 37209-1561  
(615) 963-5273

**Publication #: TSU- 12- 0058 (A) – 2e – 13820 – Tennessee State University is an AA/EEO employer and does not discriminate on the basis of race, color, national origin, sex, disability or age in its program and activities. The following department has been designated to handle inquiries regarding the non-discrimination policies: Director of Equity, Diversity and Compliance, 3500 John A. Merritt Boulevard, Nashville, TN 37209, (615) 963-7435.**

Tennessee State University is committed to the education of a non-racially identifiable student body. Tennessee State University: A Tennessee Board of Regents Institution.

**STATEMENT OF AFFIRMATIVE ACTION**

Tennessee State University, in compliance with Title IV of the Civil Rights Act, of 1964 and Title IX of the Education Amendments of 1972, does not discriminate on this basis of race, color, national origin, or sex in any of its policies or procedures. In accordance with the American with Disabilities Act, person needing assistance with these materials may contact the Division of Nursing.