MARGARET H. ROLLINS SCHOOL OF NURSING AT BEEBE HEALTHCARE

424 Savannah Road, Lewes, Delaware 19958 (302) 645-3251

Beebe Healthcare Margaret H. Rollins School of Nursing

APPLICATION FOR ADMISSION INSTRUCTIONS

- I. Complete (print or type) and return the following:
 - A. **Application for Admission;** and B. **Student Nurse Core Requirements Form** with the \$30.00 application fee to the Margaret H. Rollins School of Nursing.

Send to: Margaret H. Rollins School of Nursing 424 Savannah Road Lewes, DE 19958

- II. Official Transcripts:
 - A. Have an official transcript sent from your high school with the graduation date included or GED test results (if applicable).
 - B. Have official transcripts sent from each school you have attended since graduating from high school.
- III. Standardized testing (SAT) required unless you have:
 - ☐ College GPA 2.0 or greater with a minimum of 15 college credits earned
- IV. Processing your Application:

Your application will be processed when School of Nursing has received the following:

- A. Completed Application
- B. Signed Student Nurse Core Requirements Form
- C. Application Fee
- D. Official Transcripts

Your records will then be reviewed by the Admissions Committee. The Admissions Committee reviews applications every month. The application for those meeting criteria are accepted in the order in which the completed application is received. You will be notified in writing of the Committee's decision.

PLEASE READ THESE INSTRUCTIONS CAREFULLY!

FAILURE TO FOLLOW THESE INSTRUCTIONS WILL CAUSE A DELAY IN YOUR APPLICATION.

APPLICATION FOR ADMISSION

1.	Date:	_ 2. Social Security No.:	
3.	Name:	Maiden Name:	
4.	Address:		
5.	Email Address:		
6.	Telephone: Home ()	Work ()	
	Cell (

7.	Where do you plan to take the prerequisite college courses?					
8.	When do you plan to complete the college prerequisite courses?					
9.	Are you a U.S. Citizen: (Student on Visas are r			If not, do you have a Green Card?	Yes No	
10.	Have you ever been convicted of a crime?					
	No Yes (indicate crime and date)					
	The Nurse Practice Act, Title 24 Chapter 19 of Delaware Code (Section 1910) specifies that applicants for licensure to practice Nursing may be denied a license or the privilege of taking the licensure examination if they have been convicted of a crime. Personal concerns regarding this position should be directed to the Delaware Board of Nursing at (302) 744-4500 prior to completing this application.					
11.	Person to be notified in	=	-			
	Name:			Relationship:		
	Address: Telephone: ()					
	How did you hear about of the School of Nursing at Beebe Healthcare: Internet Employer Ad Friend Alumni High School Visitor Other (Please specify) Secondary Education:					
	List all high schools or				Diploma . CED	
	DATES FROM/TO	NAME of SC	LHUUL	CITY AND STATE	Diploma or GED	
\vdash						
14.	Post-secondary Educat	tion: List all formal ed	ucation bey	ond high school.		
	DATES FROM/TO	NAME of INSTI	TUTION	CITY AND STATE	CREDENTIALS EARNED MAJOR (DIPLOMA, CERTIFICATE, DEGREE, No. of CREDITS)	

DATES FROM/TO	NAME OF INSTITUTION	CITY AND STATE	(DIPLOMA, CERTIFICATE, DEGREE, No. of CREDITS)

ATES OF EMPLOYMENT FROM/TO	EMPLOYER	ADDRESS	POSITION/
		(1) your experience and activities	
what you most enjoy doing	g in your leisure time; (4) your reas	ve accomplished that have given yo sons for selecting nursing as a caree	
desiring to enter this school	ol; and (6) your plans and aspiratio	ons for the future.	

15. Have you taken or do you plan to take the SAT? Yes _____ Date _____ No _____

.8.	Student Certification:		
		n on this form to the best of my knowledge and belief is accurate and complete. I unders ed or if statements are falsified on this application, this will be considered sufficient cause	
	Date:	Signature:	
	Date	Jignutui C	

A check or money order in the amount of \$30.00 made payable to the Margaret H. Rollins School of Nursing must accompany this application. This fee is non-refundable.

The Margaret H. Rollins School of Nursing affords equal opportunity to all persons regardless of sex, race, religion, national origin or ancestry, sexual orientation, gender identity, age, or disability in the administration of its educational policies, admission policies, scholarship and loan programs, and other school-administered programs. Nursing students are required to have satisfactory background checks, drug screen, and meet the performance requirements as described on the Student Nurse Core Requirements Form.