



**Nursing Program Admission Application  
for New Students**

www.columbiastate.edu/nursing  
(931) 540-2600 or (931) 540-2599

**IMPORTANT APPLICATION NOTICE:** Nursing applications are accepted from August 1 through 31 for admission consideration for the spring semester and February 1 through 28 for fall semester. Both early and late applications will be rejected and returned electronically to the original sender. Only completed applications with the attached transcripts (official or unofficial) received electronically by the Nursing Office by 4 pm on the last working day of the applicable month are considered.

Date: \_\_\_\_\_ SS or Student ID # \_\_\_\_\_

Name: \_\_\_\_\_  
Last (PLEASE PRINT) First Initial or Maiden

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_

Cell Phone: ( ) \_\_\_\_\_ Other Phone: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

**In order to be considered for the Nursing Program, you must first:**

1. Be currently enrolled in the college or have all required application material submitted to the admissions office.
2. Complete all required Learning Support classes.
3. Maintain GPA of 2.75 or higher.

**Once requirements have been met, APPLICANT MUST submit application packet that includes:**

1. **ACT/SAT score (minimum 19).** A composite score below 19 will be considered if all required Learning Support courses are completed or there is transferrable college level English and Math credit on a college transcript. It is strongly recommended the applicant take the ACT to attempt a higher score for greater competitive status.
2. **Transcripts from all colleges** attended including Columbia State. (Must be attached with the nursing application.)  
*Please note: the Admission's and Record's, office at Columbia State cannot duplicate records/transcripts.*

Only completed applications with the attached transcripts (official or unofficial) received by the Nursing Office electronically by 4 pm on the last working day of the applicable month are considered. Incomplete applications will not be processed.

I affirm that all information on the application is accurate to the best of my knowledge. Incorrect or incomplete information will make me ineligible for consideration. All requested information must be submitted by the time this application is processed. I must maintain my grade point average at or above 2.75. I understand that, once admitted to the Nursing Program, I have to submit to a criminal background check, drug screen and meet all health requirements for admission to nursing. I am aware that in order to be eligible to take the licensure exam after graduation, I must verify that I am either: 1) a U.S. citizen, 2) a "qualified alien", or 3) a nonimmigrant who meets 8 U.S.C. 1621 requirements.

Applicants must provide all names that transcripts may appear under. Applicants are responsible for notifying the Nursing Program office of any changes in name, mailing address, phone number, etc., in order to facilitate contact.

Applications, transcripts of all prior college work including Columbia State, and copies of ACT/SAT scores must be sent as attachments to a single email to: NursingApp@columbiastate.edu. Faxed applications are not acceptable.

\_\_\_\_\_  
Applicant Signature (*ink only*)

\_\_\_\_\_  
Date

