

## Master Entry Professional Nursing (MEPN) Application

Last Name:	Firs	st Name:	MI:		Maiden Name:		
Mailing Street Address, including City, State Zip Code:							
Cell Phone:	Po	reanal Em	ail Addross				
Ceil Phone.		Personal Email Address:					
List which nursing cohort semester (summer or spri	ng) and year (XXXX) a	are you seeking admission to	o.* summe	er	Feb 1 application deadline		
			spring Sept 1 application dea				
WKU ID# (XXX-XX-XXXX):			WKU Email Address:				
Are you currently admitted to WKU?** YES NO		Are you an ROTC studen	t?	YES	NO		
Provide Bachelor's degree information as reflected on transcript. Must have a minimum degree GPA of 3.0 or above on a 4.0 scale to apply.		HESI Exam Must have a comprehensive HESI score of 80 or above to apply.					
Degree GPA:		Date HESI exam taken:					
Degree Type & Major:		Comprehensive HESI exa	Comprehensive HESI exam score:				
Date Degree Awarded:		Prerequisite Courses					
University:	For prereq courses not taken at WKU, provide higher ed institution, course number, course name, and indicate completed or IP below.						
If bachelor's degree is IP (in-progress), provide current GPA:		A&P I:					
		A&P II:					
		Human Nutrition:					
Select the statement below that is true.							
English is my first (native language).							
English is not my first language, but I attended 4 years of high school in an English speaking country and all courses were taught in English.							
My first language is NOT English and English is not the primary language of my high school. You are required to submit minimum TOEFL (Test of English as a Foreign Language) scores at the time of application. Failure to do so will result in dismissal from the program. Review the current MEPN Program Requirements section of the MEPN program webpage for TOEFL requirements and list TOFEL scores below:							
Nursing students are required to meet basic health requirements <b>prior to enrolling in clinical nursing courses.</b> This includes routine childhood immunizations, annual flu vaccinations, testing for communicable diseases including COVID, and random drug screening. <b>Clinical agency contracts do not permit students to waiver these requirements.</b> Have you reviewed the health and safety policies within the current MEPN Handbook and car you meet all requirements? YES NO							
After reviewing the Core Performance Standards for nursing students within the current MEPN Handbook, do you have <b>ANY</b> situation that would prevent you from being able to meet these standards? Failure to disclose inability to meet <i>Core Performance Standards</i> for nurses will result in dismissal from the program until/unless the issue can be resolved. YES <i>If yes, explain below.</i> NO							
Are you at a point in your life where you are able and willing to commit 40 hours per week to nursing course work for the next 6 semesters?							
YES NO							
<b>Nursing requires mandatory class and clinical attendance</b> . You will be assigned a failing grade if you miss 20% of the scheduled classes or clinical in a semester for <b>any</b> reason. While we try to keep all classes and clinicals on M-F between the hours of 6 am and 6pm, you may be required to attend class anytime between the hours of 5 am to 11 pm on any day of the week. Do you have <b>any</b> personal or other situation that would prevent you from being available to attend classes and clinical as assigned during the next two years? YES <i>If yes, explain below.</i> NO							
*NOTE: Students may be asked to participate in a p	preadmission interview	/ and/or testing.					

\*\*If you are currently enrolled at another institution, you must enclose your current class schedule with this application.

Last Name:	First N	lamai			
Last Name.	FISCN				
Have you ever been dismissed from a school or program of nursing? YES If yes, give dates, courses completed and reason for dismissal. NO					
Have you ever been convicted of a felony or a m	isdemeanor? YES If yes	e, explain below. NO			
Please note: KRS 314.031 (4) requires that all misdemeanor and felony convictions occurring in Kentucky or any other state, regardless of when they occurred, must be reported to the Kentucky Board of Nursing (KBN). For more information, please refer to the KBN brochure "Mandatory Reporting of Criminal Convictions" which is available on the KBN web site or you may call KBN at 502-429- 3300.					
This application will be considered incomplete w	ithout the full/legal signature of th	e emiliaent			
This application will be considered incomplete without the full/legal signature of the applicant.					
I have read the application procedures and understand that my application will not be considered if I do not meet MEPN program requirements.					
I hereby affirm that all information supplied in this application is complete and accurate. I understand that withholding or giving false information will make me ineligible for admission to the School of Nursing at Western Kentucky University.					
Signature and Date					
The information below is voluntary and for statistical purposes only; it is <b>not</b> used in the decision-making process.					
Male Female Birth Date (Month/	Day/Year)	Current age Ethnicity			
ACT English ACT Math A	ACT Reading ACT Scier	ice ACT Composite			

Once this 2-page application is completed, send application and all application materials listed on the MEPN program webpage as email attachments to <u>graduatenursing-mepn@wku.edu</u> by the application deadline date. In the subject line of the email, please type your last name and "MEPN application". If you do not receive a confirmation email within 5 business days after sending your application, please call 270-745-4392.