



OUR LADY OF LOURDES SCHOOL OF NURSING
1600 HADDON AVENUE, 5TH FLOOR PAVILION BUILDING
CAMDEN, NJ 08103

APPLICATION FOR ADMISSION

Our Lady of Lourdes School of Nursing does not discriminate in admissions or access to its program and activities on the basis of race/color, national origin, ethnicity, religion/creed, disability, age, marital status, sex, sexual orientation or veteran's status.

Our Lady of Lourdes School of Nursing is committed to complying with all state and federal laws prohibiting discrimination. Applicants to the School of Nursing must have the ability to satisfactorily meet the cognitive, physical and emotional requirements of the Nursing curriculum.

Date: ___/___/_____

PERSONAL INFORMATION:

Social Security Number: _____ Expected Start Year: _____

Camden County ID Number _____

(Last Name)

(First Name)

(Middle)

Previous Name (If Applicable)

Mailing Address:

(Street)

(City or Town)

(State)

(Zip Code)

(County)

Contact Information:

(Home Phone)

(Cell Phone)

(Work Phone)

(E-mail address)

U.S. Citizen: _____ Yes _____ No If No, are you a permanent resident? _____ Yes _____ No

Type of VISA _____ VISA Number _____

EMERGENCY CONTACT:

Name

Relationship

Phone Number

Cell Phone Number

Gender, Birth Date and Ethnicity

*Responses to Gender, Birth Date and Ethnicity and Race are voluntary and will be kept confidential. Failure to furnish this information will not adversely affect the status of this application.

Gender: M F Birth Date: ___/___/_____

Ethnicity/Race

- American Indian or Alaskan Native Asian or Pacific Islander
- Hispanic Black/Non-Hispanic White, Non-Hispanic
- Other/Unknown

ACADEMIC HISTORY: List all colleges, universities and institutions attended, including high school. List most recent first:

Name _____ Location _____ Degree _____ Dates _____

Name _____ Location _____ Degree _____ Dates _____

Name _____ Location _____ Degree _____ Dates _____

WORK HISTORY:

Veteran of the Armed Forces? Yes No

Occupation/Job Title	Employer	Start/End Dates

List any special recognitions/awards given for academic achievement:

How did you learn about Our Lady of Lourdes School of Nursing?

Have you previously applied to Our Lady of Lourdes School of Nursing:?

Yes No

Are you applying for readmission?

Yes No

Submit an essay explaining why you wish to enter the nursing profession. Describe some of the experiences that influenced your decision. Your essay should be a minimum of 100 words.

The following information must be mailed directly to:

*Coordinator of Enrollment Services
Our Lady of Lourdes School of Nursing
1600 Haddon Avenue
Camden, NJ 08103*

- Application Fee **\$55.00**. Check made payable to: Our Lady of Lourdes School of Nursing. Your application will not be processed without this fee.
- Official high school and/or GED transcripts
- Official transcripts from any and all previously attended colleges
- Official transcript of your ATI TEAS scores
- Two (2) letters of reference from a recent employer or instructor on official company/school stationery. If you attended another nursing program, at least one (1) letter must be from a nursing instructor who taught you in that program.
- Essay: “Why I Want to Enter the Nursing Profession”
- The “Abilities Considered Essential for Nursing Practice” form, signed and dated