

Christine E Lynn College of Nursing Graduate Application

This application is for admission to all Graduate Nursing Programs offered in the Christine E. Lynn College of Nursing, make sure the program and campus you are applying for are indicated below.

Have you submitted your FAU Graduate Application to Graduate Admissions? Yes No

Program

Campus

MS	Boca Raton (All MS and PhD Programs)
RN to MS	Davie (MS Program with FNP Track only)
Dual Degree BS to MS	Treasure Coast (MS Program with FNP Track only)
BSN to PhD	Memorial Healthcare System, Hollywood
PhD (Must have MS in Nursing)	

Bridge Student **(For students with an RN and a Bachelor's degree in a field other than Nursing)**

Post MS Certificate **(For students with an MS degree in Nursing)**

Learned about the program I wish to be admitted to from:

- Decline to answer
- Nursing Spectrum
- Florida Nurse
- FAU Online information
- High School Counselor
- FAU recruitment activity
- Friend who attends College of Nursing or FAU
- Other (please tell us in space to right) If other please specify:

The following 2 questions are optional:

Ethnicity:

Gender:

Use the options below:

- White (non-hispanic) (W)
- Black (B)
- American Indian/Alaskan Native (I)
- Asian or pacific islander (A)
- Hispanic (H)
- Non resident Alien (X)

Application Deadlines for MS, and Post Master's Certificates

Starting Semester

Application Must be complete by

Fall	June 1st
Spring	October 1st
Summer	March 1st

Personal Information

Name (last, first, mi):

Current Address

Street 1:

Street 2:

City: State:

Zipcode:

County:

Email: (All correspondence will be sent to this email address until you are admitted to the University, then all emails will be sent to your fau email)

Home Phone:

Work Phone

Cell

Phone

Permanent Address

Street 1:

Street 2:

City: State:

Zipcode:

County:

Student ID:
only, no dashes)

If not accepted to FAU use SSN (**numbers**)

RN License Information:

License Number:

State of Issue:

Expiration Date: (mm/yyyy)

Academic Information:

For which year and semester do you seek admission:

Part Time or Full Time:

Date BSN Degree Received: (mm/yyyy):

BSN GPA:

BSN Institution:

Have you taken graduate courses at FAU? Yes No

Have you taken graduate courses at any other college or university? Yes No

Fill out this portion only if you have received a Baccalaureate degree in a field other than Nursing or a 2nd Baccalaureate Degree:

Date Baccalaureate Degree Received: (mm/yyyy)

Baccalaureate GPA

Field of Study for Baccalaureate Degree:

Institution of Baccalaureate Degree:

GRE Information: Date GRE Taken: (mm/yyyy):

Request GRE

Waiver GRE Scores: Verbal Quantitative

Fill out for MS Program only

Track of Study:

Choose From:

Family Nurse Practitioner

Adult Nurse Practitioner

Nursing Education

Clinical Nurse Leader

Nursing Administration

Gerontology Nurse Practitioner

Individual

Undecided

Have you taken a Statistics course? Yes No

Name of College/University where course was taken:

Have you taken a Baccalaureate Level Nursing Research course? Yes No

Name of College/University where course was taken:

Have you taken a Baccalaureate level Pharmacology course? Yes No

Name of College/University where course was taken:

Have you taken a Baccalaureate level Health Assessment (Modes of Helping) Course?

Yes No

Name of College/University where course was taken:

Fill out for Post MS Certificate Only

MSN Degree Date Received:

Track of study:
as MS Degree)

(Use same tracks

Fill out for PhD Program Only

MSN Degree Date Received:

MSN GPA:

Institution of MSN degree:

Please mail the completely filled out application to:

Graduate Programs
Christine E. Lynn College of Nursing
Florida Atlantic University
777 Glades Rd
NU 102
Boca Raton, FL 33431

or you can fax it to:
561-297-3652