**Brunswick Community College**

**Application for Admission to the Nursing Programs**

**Application dates: December 1, 2017 – January 12, 2018**



Last Name: First Name: MI:

Mailing Address:

City: State: Zip Code:

Physical Address:

City: State: Zip Code:

Primary Phone: Secondary Phone: Date of Birth:

Campus Email: Personal Email:

Currently Enrolled at BCC: Yes No Last School Attended:

Previous Schools Attended (Please include all schools including high school):

Date of PAX Test Scores to be Used: CNA Expiration Date:

I am applying for admissions to the 2018 Nursing Programs offered at Brunswick Community College. By submitting this application, I agree that I have read the Associate Degree Nursing (ADN) and Practical Nursing (PN) Admission Brochures and acknowledge that I meet the requirements listed for entry into the programs. I further acknowledge that all information provided is true and that misrepresenting the truth can lead to dismissal from the program.

Signature: Date:

* Completed applications must be submitted electronically to Samantha Taylor at [taylors@brunswickcc.edu](mailto:taylors@brunswickcc.edu) to be considered for review into the programs. An electronic submission will constitute as your signature.
* Applicants must be admitted to BCC as a general student by 3pm, January 12, 2018.

***Students who have taken the NLN PAX examination more than once must state which test score (by date) they wish to use. If the exam was taken at a location other than BCC, it is the student’s responsibility to ensure that the scores are received by BCC.***

***Students must submit official transcripts from all institutions attended (including high school) prior to the application deadline to be considered for admission into the nursing programs.***