

- Have you previously applied to the Division/Department of Nursing Education program at KWU?
Yes _____ No _____ If Yes, when? _____

For which degree? _____ADN _____BSN _____RN - BSN

- If currently attending college(s), list the courses in which **you are enrolled**. Use additional paper if necessary.

College	Course Number	Course Name	Credit Hours	Semester/Year

- List additional courses you **plan to take prior to beginning nursing courses at KWU**. Use additional paper if necessary. Students are expected to complete all Liberal Studies and Support Courses prior to enrolling in fall nursing courses.

College	Course Number	Course Name	Credit Hours	Semester/Year

- Please **review and consider** the information below and the attached *Functional Abilities List*.

The Division/Department of Nursing Education at Kansas Wesleyan University is accredited by the National League for Nursing Accrediting Commission, 3343 Peachtree Road NE, Suite 850, Atlanta, Georgia 30326, Phone: 404-975-5000, Fax: 404-975-5020, nlnac.org and is approved by the Kansas State Board of Nursing, Landon State Office Building, 900 SW Jackson, Suite 1051, Topeka, Kansas 66612-1230, Phone: 785-296-4929, Fax: 785-296-3929, ksbn.org.

PLEASE NOTE:

The Division/Department of Nursing Education has a rolling admission deadline; however, admission decisions are normally made for applicants to the nursing program during the spring semester, for fall admission of the same year. The Division/Department of Nursing Education office will notify students in writing of acceptance into the nursing program.

Be advised that nursing licenses may be denied or disciplined by the Kansas State Board of Nursing (KSBN). Possible grounds for such action may include being guilty of a felony, being guilty of a misdemeanor that involves an illegal drug offense if the KSBN determines that such a person has not been sufficiently rehabilitated to warrant the public trust. Also considered are patterns of practice and other behaviors exhibiting an apparent incapacity to practice nursing. The KSBN will deny licensure in Kansas to an individual who has been convicted of a felony crime against a person. All criminal history must be revealed to and will be evaluated by the KSBN **before** licensure is granted or denied. KSBN will require fingerprinting in order to conduct background checks with the Kansas/Federal Bureau of Investigation (KBI/FBI).

I certify that, to the best of my knowledge, all information submitted in this application is true and correct. I understand that failure to present accurate information may render this application null and void. I also understand that the information I have provided may be used for statistical purposes by other authorized offices and agencies. If accepted to Kansas Wesleyan University and the Division/Department of Nursing Education, I agree to abide by the regulations of the institution and will support the values stated in the Mission of KWU.

Signature of applicant: _____ Date: _____

**KANSAS WESLEYAN UNIVERSITY
DIVISION/DEPARTMENT OF NURSING EDUCATION
FUNCTIONAL ABILITIES**

The Division/Department of Nursing Education requires each student to be able to regularly perform the following activities:

Stand for long periods of time

Work at a fast pace for long periods of time

Lift heavy objects (50 pounds or more) three or more times a day

Speak clearly and distinctly

Respond appropriately to stressful situations (physically, emotionally, and mentally)

Communicate effectively with patients, patients' families, physicians, and staff

Hear vital signs with stethoscope to assess blood pressure, heart rate, lung, vascular and abdominal sounds and hear telephone

Hear the patient calling for help

Hear beepers, alarms, etc., requiring quick responses

Read very fine or small print on medication containers

See nurse call/emergency light

Visually assess the patient appropriately

Read physician's orders

Read monitors and other equipment

Demonstrate manual dexterity to don sterile gloves and gown

Demonstrate manual dexterity to prepare medications aseptically (i.e. intravenous (IV), Oral (PO), intramuscular (IM)).

Demonstrate manual dexterity using sterile technique (i.e. insert catheters, IV needles, etc.)

Demonstrate ability to utilize equipment needed to carry out patient care

For English Not as Primary Language or International students, see University requirements in current KWU Academic Catalog.

When English is not considered the applicant's primary language the following minimum Test of English as a Foreign Language (TOEFL) Internet-Based Test (iBT) score must be attained. Each area must meet the minimum requirement.

Writing= 20

Speaking=20

Reading=19

Listening=20

Students not meeting the minimum requirement in any area are not eligible for admission to the nursing program. For information and application for TOEFL contact:
TOEFL Educational Testing Service
PO Box 6151
Princeton, New Jersey 08541-6154
606-771-7760
<http://www.toefl.org>

If you believe you may not be able to perform any of these activities **please circle the number of the activities which you may not be able to perform**. The Admission and Progress Committee will consult with you to evaluate the extent of the deficit.

Your signature below indicates that you have read and understand the “Functional Abilities” requirements.

Print Name _____ Signature _____

Date Signed _____