

PRE-REQUISITE COURSEWORK (CONTINUED)

COURSE	SEMESTER HOURS	DATE COMPLETED	LOCATION TAKEN	GRADE
SOCIOLOGY				
INTRO TO PSYCHOLOGY				
LIFESPAN DEVELOPMENT				
UNIVERSITY CORE:				
PHIL/ETHICS/RELI				
ENGAGEMENT				
ENGAGEMENT				
AESTHETIC APPRECIATION				
GLOBAL PERSPECTIVE				
GLOBAL PERSPECTIVE				



In order for the application process to be complete, we must have the following:
A completed application and a \$50 non-refundable application fee.
The application fee may be paid by check, money order, or credit card.

CASH WILL NOT BE ACCEPTED.

NAME OF THE CREDIT CARD HOLDER (Print)		RELATIONSHIP TO STUDENT	
ADDRESS		CITY / STATE	ZIP CODE
CREDIT CARD #: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
<input type="checkbox"/> VISA <input type="checkbox"/> MASTER CARD <input type="checkbox"/> DISCOVER (Check one)		EXPIRATION DATE	SECURITY CODE

CERTIFICATION I understand that failure to submit complete official transcripts from all high schools, colleges and universities attended may result in the denial of this application or my subsequent dismissal from Schreiner University. (Please note that students who are currently enrolled at Schreiner University should already have official transcripts on file in the registrar's office and are not required to re-submit their official transcripts!) If applicable, I hereby authorize my high school to send the information required for completion of this application to the Schreiner University Admission Office. I certify that to the best of my knowledge, all statements I have made in this application are complete and true.

Signature of Applicant _____
Date

Schreiner University subscribes to the principles and laws of the state of Texas and the federal government, including applicable executive orders pertaining to civil rights. All rights, privileges and activities of this institution are made available without regard to race, creed, color, sex or national origin.

BACHELOR OF SCIENCE IN NURSING APPLICATION



Dr. Julie Lindsay,
Director of Nursing
jlindsay@schreiner.edu
830-792-7406
\$50 Application Fee

Schreiner University
LEARNING BY HEART™
2100 Memorial Boulevard
Kerrville, Texas 78028-5697
www.schreiner.edu

PERSONAL INFORMATION			
FIRST	MIDDLE	LAST	
MAILING ADDRESS		CITY	STATE ZIP
COUNTY OF RESIDENCE		E-MAIL ADDRESS	
HOME PHONE NUMBER		CELL PHONE NUMBER	
SOCIAL SECURITY NUMBER		GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
Are you a U.S. citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO	If no, country of citizenship?	DATE OF BIRTH	PLACE OF BIRTH

If you are a permanent resident alien, supply our office with a copy of your visa front and back. If you are a permanent resident alien what type of visa do you have? Student visa Other visa (please list)

EMERGENCY CONTACT			
NAME	HOME PHONE	CELL PHONE	RELATIONSHIP
PLACE OF EMPLOYMENT		WORK PHONE	
PRIMARY CARE PHYSICIAN		TELEPHONE NUMBER	
ALLERGIES		MEDICATIONS	

MILITARY SERVICE	
<input type="checkbox"/> NONE <input type="checkbox"/> ACTIVE <input type="checkbox"/> RETIRED <input type="checkbox"/> VETERAN	YEARS OF SERVICE
DUTIES	TYPE OF DISCHARGE

ACADEMIC BACKGROUND			
NAME OF HIGH SCHOOL	GRADUATION DATE	<input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	
CITY	STATE	TELEPHONE NUMBER	

Have you completed any advanced placement tests? <input type="checkbox"/> YES <input type="checkbox"/> NO (May attach additional list if necessary)	SUBJECT	SCORE	CURRENT OVERALL GPA	CURRENT MATH AND SCIENCE GPA
	ATI TEAS-V <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE COMPLETED	SCORE	

LIST OF SCHOOLS ATTENDED

COLLEGE / UNIVERSITY	CITY / STATE	DATE ENROLLED
COLLEGE / UNIVERSITY	CITY / STATE	DATE ENROLLED
COLLEGE / UNIVERSITY	CITY / STATE	DATE ENROLLED

FORMER SCHREINER STUDENTS

If you or a family member have previously attended Schreiner University, give dates of attendance:

OPTIONAL INFORMATION

RELIGIOUS OR DENOMINATION PREFERENCE	NAME OF CHURCH / SYNAGOGUE / MOSQUE
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EXTRACURRICULAR ACTIVITIES

You may attach a resume with additional information. Please describe any non-classroom activities in which you have participated. List all involvements such as service clubs, internships, sports, music, drama, community organizations, church groups, etc. (May attach additional list if necessary.)

CLUBS OR ORGANIZATIONS

COMMUNITY OR VOLUNTEER SERVICE

HONORS AND AWARDS

HOBBIES, TALENTS, OR OTHER INTEREST

SUMMER ACTIVITIES

EMPLOYMENT HISTORY

(Begin with your most current employer. You may attach a resume for additional information.)

EMPLOYER	POSITION	ADDRESS
DATE EMPLOYED	DUTIES	
SUPERVISOR	SUPERVISOR'S POSITION	TELEPHONE NUMBER
REASON FOR LEAVING		

EMPLOYMENT HISTORY

EMPLOYER	POSITION	ADDRESS
DATE EMPLOYED	DUTIES	
SUPERVISOR	SUPERVISOR'S POSITION	TELEPHONE NUMBER
REASON FOR LEAVING		

EMPLOYER	POSITION	ADDRESS
DATE EMPLOYED	DUTIES	
SUPERVISOR	SUPERVISOR'S POSITION	TELEPHONE NUMBER
REASON FOR LEAVING		

EMPLOYER	POSITION	ADDRESS
DATE EMPLOYED	DUTIES	
SUPERVISOR	SUPERVISOR'S POSITION	TELEPHONE NUMBER
REASON FOR LEAVING		

PRE-REQUISITE COURSEWORK

COURSE	SEMESTER HOURS	DATE COMPLETED	LOCATION TAKEN	GRADE
COLLEGE ALGEBRA OR HIGHER				
STATISTICS				
ANATOMY & PHYS I WITH LAB				
ANATOMY & PHYS II WITH LAB				
MICROBIOLOGY WITH LAB				
GEN CHEMISTRY WITH LAB				
NUTRITION IN HEALTHCARE				
ENGLISH COMPOSITION I				
ENGLISH COMPOSITON II				
ADVANCED COMPOSITION				
INTERDISCIPLINARY STUDIES				