

## 2008 Nurse Practitioner Pre-Admissions Worksheet SUNY Downstate Medical Center

**TO THE APPLICANT:** Complete this form in advance, and bring it with you to the information session, with copies of your unofficial transcripts from all colleges attended in the USA, and copies of your science course descriptions from your college catalog or a copy of your syllabus. Neatness and legibility will speed processing.

**Note:** Courses are categorized based on the departmental prefix on your transcript at the college where the course was taken.

Requirements	University/College	Dept. Name	Course No.	Course Name	Semester Credits	Letter Grade	Date Completed or Anticipated	Do Not Fill In These Two Columns	
<b>EXAMPLE</b> Completed Course	<b>American University</b>	<b>Bio</b>	<b>101</b>	<b>Biology I</b>	<b>4</b>	<b>A</b>	<b>Fall 2004</b>		
<b>EXAMPLE</b> Course in Progress	<b>National College</b>	<b>Bio</b>	<b>102</b>	<b>Biology II</b>	<b>4</b>		<b>Fall 2005</b>		
								<b>Admissions Verified</b>	<b>Program Verified</b>
Undergraduate Health/Physical Assessment Skills									
Statistics									
Nursing Research									

BS Nursing Degree Completed [  ]

BS Nursing Degree in Progress [  ] Expected Date of Graduation \_\_\_\_\_

**Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

10/2007

**Note:** The purpose of this form is for pre-admissions course advisement only, and does not guarantee admission to the program at a subsequent date. In addition, the course advisement is based on the accuracy of the information provided and in the supplemental materials provided by the applicant during the advisement session.