

## RN-to-BSN Program Application

*This application is provisional pending approval from the Southern Association of Colleges and Schools Commission on Colleges.*

Answer **ALL** questions. **Please type or print. Mail, email, or fax the application to the address found at the bottom of page 2.**

Name: \_\_\_\_\_  
                     First                                      Middle                                      Last                                      Maiden Name

Mailing Address: \_\_\_\_\_  
                                     Number & Street                                      City                                      State                                      Zip

Permanent Address (if different from above) \_\_\_\_\_

Texas County of Residence \_\_\_\_\_ Country of Citizenship \_\_\_\_\_

Country of Birth \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Weatherford College Student ID#: \_\_\_\_\_ E-mail address: \_\_\_\_\_

If Applicable

In case of emergency notify: \_\_\_\_\_  
   Name                                      Relationship

Address: \_\_\_\_\_ Phone \_\_\_\_\_  
                     Number and Street                                      City                                      State                                      Zip

Do you hold an unencumbered license to practice nursing as a Registered Nurse in Texas? Yes  No

### PROFESSIONAL LICENSES OR CERTIFICATION

Type	Issued By	Number	Date
_____	_____	_____	_____
_____	_____	_____	_____

### REFERENCES

Provide the contact information for one reference. The reference must be either a current employer or a former Nursing Instructor (in prelicensure RN program). An electronic form will be sent to the reference and must be completed online.

\_\_\_\_\_  
 Name                                      Employer or Faculty                                      email address                                      Phone number

**EDUCATION - List ALL Colleges and Universities Attended**

NAME OF SCHOOL**	LOCATION OF SCHOOL	DATES: FROM/TO	DIPLOMA/ DEGREE OR CERTIFICATE	MAJOR/MINOR
HIGH SCHOOL OR GED				
COLLEGE/UNIVERSITY				
COLLEGE/UNIVERSITY				
COLLEGE/UNIVERSITY				
TECHNICAL OR OTHER				

**\*\* The Weatherford College Registrar's Office must receive official transcript(s) before this application can be processed.**

**WORK EXPERIENCE**

**List current or most recent job:**

- Name of Company \_\_\_\_\_  
 Complete Address \_\_\_\_\_ Telephone No. \_\_\_\_\_  
 Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_  
 Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_ Nature of Job Duties \_\_\_\_\_  
 Starting Salary \_\_\_\_\_ Final Salary \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

**PLEASE READ AND SIGN THE FOLLOWING**

The Baccalaureate nursing program at Weatherford College at the Main Campus located in Weatherford, Texas is accredited by the:

Accreditation Commission for Education in Nursing (ACEN)  
 3390 Peachtree Road NE, Suite 1400  
 Atlanta, GA 30326 404-975-5000

The most recent accreditation decision made by the ACEN Board of Commissioners for the Baccalaureate nursing program is Initial Accreditation. View the public information disclosed by the ACEN regarding this program [here](#).

I hereby certify that the information contained in this application is true and complete to the best of my knowledge. I understand that any misrepresentation or falsification of information is cause for denial of admission or dismissal from the program.

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date

Weatherford College is an equal opportunity employer and does not discriminate on the basis of age, sex, race, color, religion, national origin, disability, veteran status, genetic information, sexual orientation or gender identity in the administration of its employment practices, educational or admission policies, scholarship or loan programs, athletic or other school-administered program.

**Please include all required paperwork with your application. Incomplete applications will not be accepted.**

Weatherford College  
 RN-to-BSN Program  
 225 College Park Drive  
 Weatherford, TX 76086  
 (817) 594-5471 or (800) 287-5471  
 Fax: (817) 598-6455  
 Email: bsn@wc.edu

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