Montana State University- Bozeman  
College of Nursing  
Prospective Graduate Student Preliminary Application  
(Please Type or Print Clearly)

Master of Nursing (MN) Degree Option Sought:  
☐ Family Nurse Practitioner (FNP) Option  
☐ Adult Clinical Nurse Specialist (CNS) Option  
☐ Clinical Nurse Leader (CNL) Option  

Non Degree Option Sought:  
☐ Certificate in Nursing Education Option  
☐ Post-Master’s FNP Certificate Option (Part-time study only)  
☐ Post-Master’s CNS Option

Last Name   First Name  Maiden Name  GID # if former MSU student  
______________________________________________   _____________________________________________________

Present Street Address   Permanent Street Address  
______________________________________________   _____________________________________________________

City  State  Zip  City  State  Zip

Home or Cell Phone Number   Work Phone Number  
______________________________________________   _____________________________________________________

Please state how you learned about the College of Nursing:  
☐ Alumni  ☐ Internet  ☐ Pulse  ☐ Friend  
☐ Former Student  ☐ Café Grad School  ☐ Other (please specify)  
______________________________________________

Name of Nationally Accredited Baccalaureate Nursing Program   Name of Nationally Accredited Master’s Nursing Program  
______________________________________________   _____________________________________________________

Baccalaureate Degree in Nursing Earned   Date   Masters Degree in Nursing Earned/Emphasis   Date

City  State/Country  City  State/Country

Cumulative Undergraduate GPA*:  
(U.S. students only)  
Cumulative Graduate GPA*:  
(U.S. students only)  

Last 60 semester credits GPA, if not shown on transcript:  

* GPA = Grade Point Average  
A minimum 3.0 undergraduate or graduate GPA is required

International Students Only:

TOEFL Score**   Date Taken:  Class Rank out of:  

** Minimum TOEFL requirement = 580 or equivalent on computer based (CB) or Internet based (iBT) TOEFL  
OR a minimum band score of 7.0 required on the International English Language Testing System (IELTS)

CGFNS credentials evaluation required: see http://www.cgfns.org for information

(Continued on reverse side)
Do you meet the general clinical experience preference of one year as a registered nurse?  [ ] YES  [ ] NO

**Note:** No clinical experience restrictions for the CNS or CNL option; clinical experience **preferred** for the FNP option.

Do you have access to and the ability to use a computer with e-mail and Internet capabilities?  [ ] YES  [ ] NO

Do you have basic skill in computer word processing?  [ ] YES  [ ] NO  e-mail address: 

Have you completed a statistics course which includes inferential stats?  [ ] YES  [ ] NO

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<th>Course # and Title</th>
<th># of credits</th>
<th>Where</th>
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Have you completed a physical assessment course?  [ ] YES  [ ] NO

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Have you completed an undergraduate research course?  [ ] YES  [ ] NO

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Have you completed an undergraduate community health course?  [ ] YES  [ ] NO

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RN Licensure:

[ ] I am currently licensed to practice nursing in the state of Montana - License Number: 

[ ] I am eligible for licensure in the state of Montana.

**NOTE:** Students in the MSU College of Nursing Graduate Program must be licensed to practice nursing in the state of Montana. (Current Montana RN license verification will be done.)

The College of Nursing cannot guarantee the processing the official application received after **February 15** in time for admission the following fall semester. Class sizes are limited, and early application is encouraged.

**PLEASE RETURN COMPLETED APPLICATION TO:**
Associate Dean's Office  
Montana State University - Bozeman  
College of Nursing, Sherrick Hall  
P.O. Box 173560  
Bozeman, MT  59717-3560

If you have any questions regarding the application process contact Lynn Taylor at 406-994-3500 or e-mail: lynnt@montana.edu.