

# APPLICATION FOR GRADUATE ADMISSION

MASTER OF SCIENCE IN NURSING



FORWARD, WITH CHRIST AT THE HELM

**BETHEL**  
**COLLEGE**  
INDIANA



# APPLICATION INSTRUCTIONS

## MASTER OF SCIENCE IN NURSING

### APPLICATION INSTRUCTIONS

Bethel College is looking for students who desire to obtain a Master of Science in Nursing with a vision for serving as educators of new or experienced nurses, or as administrators in the health care organization setting. We are interested in you as a person and as a nurse; therefore, we will consider both your academic record and your professional experiences in determining your qualification for admission.

### APPLICATION STEPS

In order to be considered for admission, you will need to furnish the following:

- Completed **application for admission** (with signature and date); this includes a nonrefundable **\$25.00 application fee**.
- **Official transcripts** from all undergraduate college or university course work and any graduate school where work was completed. Have transcripts sent to the office of graduate studies – nursing.
- **Completed reference forms** (enclosed) from three (3) nurse colleagues or supervisors from your clinical specialty area.
- **Interview** with the program advisor.

### CONTACT INFORMATION

If you have any questions about the application process or the MSN program, please contact the graduate studies office.



GRADUATE STUDIES – NURSING  
1001 WEST MCKINLEY AVENUE  
MISHAWAKA, IN 46545-5591

574.807.7660 • 866.449.3291  
FAX 574.807.7616

[gradstudy@BethelCollege.edu](mailto:gradstudy@BethelCollege.edu)  
[www.BethelCollege.edu](http://www.BethelCollege.edu)



## ACADEMIC HONORS

List any academic and nonacademic honors and distinctions you have received. *(Attach additional pages if necessary.)*

---

---

List any academic and/or professional works you have edited/published. *(Attach additional pages if necessary.)*

---

---

List community and nursing experiences in which you have been involved. *(Attach additional pages if necessary.)*

---

---

## WORK EXPERIENCE

Current employer \_\_\_\_\_

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
City State Zip Area Code Number

List previous work experience you have had in your clinical specialty area. *(Attach additional pages if necessary.)*

Employer	Dates employed	Position
_____	_____	_____
_____	_____	_____
_____	_____	_____

References should provide insight into your professional development over the past five years. List the names of three nurse colleagues/supervisors from whom you are requesting references.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Please indicate how you first learned about Bethel College's Master of Science in Nursing program.

---

## LIFESTYLE COVENANT

Bethel College respects your integrity as an individual. At the same time, your life is expected to be consistent with the ideals and purposes of a Christian community. Students are expected to reflect a positive lifestyle that is congruent with a Christian college setting in all matters of public conduct. Modesty and good taste are expected in student attire. The use of tobacco in any form is not permitted anywhere on the campus. Students are also advised to refrain from using any kind of habitual or harmful drugs including alcoholic beverages, and they are to refrain from using improper and inappropriate language. These standards apply to class activities, field trips and all other college-sponsored activities. Bethel College seeks to enroll students who are in agreement with the spirit and ideals of the college and who will have a positive influence on their fellow students.

## APPLICANT STATEMENT

I hereby apply for admission to Bethel College and I agree to abide by the rules and regulations of Bethel College. With this in mind, I realize that actions on my part that do not agree with the guidelines of conduct established by the college may result in forfeiture of any or all Bethel College sponsored scholarships. I hereby certify that all information provided on this application is correct. I understand that withholding information on my application for admission or giving false information may make me ineligible for admission to Bethel College or may subject me to later dismissal.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(To be signed by applicant)

Return this form to:

All application materials become the property of Bethel College. The Bethel College catalog is available at [www.BethelCollege.edu](http://www.BethelCollege.edu).



*Within the context of its religious principles, heritage and mission, Bethel College admits students of any race, national or ethnic origin, age or gender to its programs and activities. It does not discriminate in the administration of its educational policies, admission policies, scholarship and loan programs, athletic or other college-administered programs. The college makes every reasonable attempt to accommodate students with limiting physical impairment; however, each school reserves the right to examine applicants for suitability for the participation in the educational activities of its programs.*

GRADUATE STUDIES – NURSING  
1001 WEST MCKINLEY AVENUE  
MISHAWAKA, IN 46545-5591  
[www.BethelCollege.edu](http://www.BethelCollege.edu)