



Have you ever been on probation or suspended from any educational institution for academic or disciplinary reasons?  
\_\_\_\_\_yes \_\_\_\_\_no If yes, use separate sheet and explain fully.

Have you ever been accepted and/or dismissed from any certificate granting program (i.e. nurse anesthesia, nurse practitioner, etc.)?  
\_\_\_\_\_yes \_\_\_\_\_no If yes, use separate sheet and fully explain.

Date MAT Exam taken or scheduled: \_\_\_\_\_

Nursing experience:

<i>From</i>	<i>To</i>	<i>Clinical Area</i>	<i>Position</i>
<u>Current:</u>	_____	_____	_____

<u>Prior:</u>	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Certifications and professional organizations:  
\_\_\_\_\_  
\_\_\_\_\_

Underserved population:  
What type of patients do you intend to serve after you graduate:  
\_\_\_\_\_all private  
\_\_\_\_\_medically underserved (needy)  
\_\_\_\_\_mixture of both

Is your home community considered to be “medically underserved”?  
\_\_\_\_\_yes  
\_\_\_\_\_no  
\_\_\_\_\_do not know

Are you planning to return to your home community after graduation?  
\_\_\_\_\_yes  
\_\_\_\_\_no  
\_\_\_\_\_do not know

I understand that completion of this application does not constitute admission to the UTC Graduate School or the UTC School of Nursing M.S.N. program. I understand that admission to the Graduate School does not imply admission to the M.S.N. program. I understand that I cannot register for or attend nursing classes until official approval is received from the Graduate School and the School of Nursing. I certify that the information given in this application is true and complete. I am aware that falsifying information will result in my dismissal from UTC.

\_\_\_\_\_  
Signature Date