

Bachelor of Science in Nursing Applicant Profile

Guidelines

- 1. Statements must be prepared in your own words without professional assistance.
- 2. Statements must be typed or word-processed, and may be single or double-spaced, 12 point font, Times New Roman or Arial.
- 3. Use only the space allocated for Parts A & B. Any additional pages **will be removed** before the application is read.
- 4. **Do not** append business cards, letters of reference, or a resume. Any attached material will be removed before the statement is read.
- 5. Staple the four pages of your Applicant Profile (i.e. Applicant Information, Personal Statement (A & B), Referee's Statement) together, with the Applicant Information on top.
- 6. Ensure that your completed form is <u>received</u> in the Office of the Registrar, University of Windsor, by 4:15 p.m. EST., March 1. **Faxed copies are not acceptable.**

Office of the Registrar, University of Windsor 401 Sunset Avenue Windsor, Ontario N9B 3P4

It is your responsibility to ensure that your application to the Faculty of Nursing is complete. Incomplete application packages will not be considered

Notice: Collection of Personal Information

Personal information on this form is collected under the authority of University of Windsor Act 1962, and University of Windsor, Senate By-Law 31. It is collected for the purpose of administering the university/student relationship including the processing of the Bachelor of Science in Nursing Applicant Profile. A detailed Notice of Disclosure can be found at: www.uwindsor.ca/fippa. Questions about the collection of this information can be directed to: Director of Registrar Services at 519-253-3000 or registrar@uwindsor.ca

This form has been adapted, in part, from the Profile used in the Faculty of Education



I. APPLICANT INFORMATION

Program(s) you are applying for:

• BScN Bachelor of Science in Nursing Program

Degree(s)/post secondary Diploma(s) **obtained** or programs in which you are **currently or previously enrolled**:

	Name of Institution	City, Country	Degree or Diploma	Discipline or Specialization	Year Granted	
1.						
2.						
3.						
4.						
Un	iversity of Windsor Stude	nt No. (if applic	able):			
Last Name:		Fir	First Name:			
Аp	plicant's Signature:			Date:		

II. PERSONAL STATEMENT

Part A

Please briefly list in <u>point form</u> the life experiences, health care related or community work/volunteerism that you identify as significant in preparing you to be a Registered Nurse. Include the duration, location, population, and nature of your responsibilities, etc.					

II. PERSONAL STATEMENT

Part B

In paragraph form, respond to the following questions (Do NOT exceed allocated space)

- What have you learned from your previous experiences?
- How have your background and experience influenced your decision to apply to a Nursing Program?
- What do you expect to gain from our Nursing Program?
- How do you see yourself contributing to the health /health care of individuals/communities?

Link your comments specifically to your experiences. Indicate how the knowledge you have gained through your experiences gives you particular insights into Nursing and health care.

Your specific comments should clearly reflect important abilities, which include, but are not limited to: critical thinking/collaborative and/or leadership qualities; a concern for equitable healthcare; and commitment to health promotion.

Please provide a referee NOT related to you who can attest to your skills or experience in at least some of the areas you have listed (e.g., employer, supervisor, academic referee etc.).

The signature of your referee must be included on this form or your Applicant Profile will not be read and will be considered incomplete.

Referees are frequently contacted by the Faculty of Nursing, University of Windsor, to verify the information you have provided in this Profile. Please be sure that your referee is aware of the date by which this statement must be returned to you. This completed form must be attached to your Applicant Profile at the same time you submit it to the University of Windsor. Letters of reference are **NOT** required and **will not** be taken into consideration if submitted.

2. To be completed by the Referee	
Referee's Name:	
Position:	
Address:	
Telephone: (W)	
Capacity in which the referee knows the ap	
• • • • • • • • • • • • • • • • • • • •	nents. To the best of my knowledge, these he applicant's background and experiences.
Signature of Referee:	Date:
Annlicant's Full Name	