

APPLICANT PROFILE NP Program

1. Name		
2. Address		
3. Telephone: Home ()		
I. Present Position <u>:</u>		
5. Email		
6. Professional Experience: Include all Pr	ofessional Experience	
Agency	Clinical area	Years of employment
		_
		_
7. Please indicate whether you want to l	be a full or part-time student by ch	ecking the appropriate
box below.	,	
a. Full time		
b. Part-time		
8. Please indicate the program for whicha. Master of Science in Nursing/b. NP Primary Health Care (NP P	Primary Healthcare Nurse Practitic	oner (MScN/PHC NP)

Note: Graduate Diploma option is only for BScN (or equivalent nursing degree, e.g., BN, etc.) prepared RNs with a completed master's degree (nursing or health-related master's degree)

9. The University of Windsor's Faculty of Nursing values and is working towards becoming a more equitable, diverse, and inclusive institution for its students. Therefore, we recognize the following groups: Indigenous people, persons with disabilities, visible minorities, and sexual/gender minorities in our equity efforts. We invite you to disclose if you identify as a member of any of these groups.

☐ Yes	
☐ If yes, please list the group(s)	
□ No	
☐ Prefer not to disclose	
** You must also complete the NP Personal Essay Questions (see application instruction sheet).	
**Due to clinical placement requirements, all applicants must have COVID vaccinations	