

Application for Admission

4918 Penn Street Philadelphia, PA 19124 Phone (215) 831-6740 x124 • Fax (215) 831-6732 http://www.AriaHealth.org/Nursing

Instructions

Please read all instructions and information before completing your application. The information you provide will help us to serve you better.

Submitting your application:

- 1. Complete and submit the application with a \$60 non-refundable check or money order payable to Aria Health School of Nursing.
- Read the enclosed information regarding entrance testing. Please send an email to <u>EntranceExam@AriaHealth.org</u> indicating your top 3 choices for a test date from the enclosed list. You will receive an automatic response via email with further instructions. Your test will not be scheduled until your application and application fee are received. The Admissions Office will make every effort to accommodate your first choice.
- 3. Type on a separate sheet of paper an essay of no less than 300 words on the following topic: What does nursing mean to you and why are you choosing it as your profession?
- 4. Send all official transcripts from high school, college(s), including nursing schools, directly to the Aria Health School of Nursing to the attention of the Admissions Office.
- 5. Forward two (2) recently dated professional or academic recommendation letter to Aria Health School of Nursing. They must be on letterhead and mailed directly to the Admissions Office from the person writing the letter. Recommendations from friends and family will not be accepted.
- 6. Optional interviews are available. Please contact the Admissions Office after Aria Health School of Nursing receives your transcripts, if you would like to schedule an interview. Interviews must be completed by the Paperwork Deadline.

Deadline Dates:

Applications are due 6 weeks before all paperwork is due. This will allow applicants and the admissions office ample time to schedule and complete all entrance testing and paperwork. Depending on the class for which student is applying, deadlines are as follows:

	Application Deadline	Paperwork Deadline
September Admissions	February 1	March 15
January Admissions	August 1	September 15

**It is the applicant's responsibility to have all required paperwork forwarded to Aria Health School of Nursing, as there will be no exceptions to these deadlines.

DISCLAIMER:

The Aria Health School of Nursing does not discriminate in its selection of students because of race, creed, color, national origin, religion, age, sex, marital status or physical handicap as required by federal law.

All documents submitted become the property of Aria Health School of Nursing and cannot be returned or transferred.

Biographic Information:

Please print or type		1			
Birth Date:	Social Security Nun				
(Optional)		(Optional)			
Name:					
Last	First	Middle			
Home Address:					
Home Address:	City or Town	State	Zip Code		
			P		
Home Telephone: ()	Cell Pho	one: ()			
Active E-Mail Address:					
An Active E-	mail address is required for will be provide.		oplication updates		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	nanent				
Citizen: Yes No Resi	dent: Yes <u>No</u>	Veteran: Ye	es No		
If you are not a U.S. Citizen, please present you.	r Green Card on your scheduled	l testing date.			
Ethnicity (Optional):	Caucasian	African Amer	rican/Black		
Hist	panic/Latino/Spanish	Asian or Pacit	Asian or Pacific Islander		
American India	an or Alaskan Native	Other (Specify)			
Marital Status (Optional): Single _	Married	Separated	Divorced		
Would your records be listed under any	name(s) other than your pr	acant last nama?	Ves No		
	• •				
If Yes, please indicate the name(s):					
Are you: First time Freshman	Transfer student				
Seeking Readmission					
Have you Previously applied to Aria He			te of		
Nursing or Frankford Hospital School o	f Nursing? No	Yes Appli	ication:		
What antry data are you applying for?	Spacify Vaar) Santa	mhar I	0011057		
What entry date are you applying for? (S	specify reary septe	ember: J			
How did you hear about Aria Health Scl	nool of Nursing?				
-	U				

ENTRANCE TESTING: Please refer to the Instructions page of this Application.

Previous Education:

High School			Address	Date of Graduation
Do you have a G.E.D?	Yes	No	Date Received:	State Awarded:

College or University Enrollment Record (including Nursing Programs) Please include a copy of any licensure you have acquired, ie. LPN, CNA.

School	Address	Dates Attended	Degree	Credits
School	Address	Dates Attended	Degree	Credits
School	Address	Dates Attended	Degree	Credits
School	Address	Dates Attended	Degree	Credits

Employment Information:

Please list all work experiences, including military service, beginning with the most recent. *Please use the back of this page, if necessary, to complete your employment information.*

From	То	Title or Position	Employer (Include address and phone number)		

Criminal Background Information:

Have you been convicted* of a crime, including felonies and misdemeanors (but excluding summary offenses such as speeding tickets), which has not been annulled, expunged, or sealed by a court? \Box Yes \Box No

Have you been convicted* of any crime associated with alcohol or drugs in any court? \Box Yes \Box No

*Convictions include a judgment, found guilty by a judge or jury, pleaded guilty or nolo contendere, received probation without verdict, disposition in lieu of trial, or ARD.

(Continued on next page)

Have you ever withdrawn an application for a professional license, had an application for a license denied or refused, or agreed not to reapply for a license in any state, territory, possession or country? A license includes a registration or certification? \Box Yes \Box No

Have you ever had a professional license suspended or revoked or otherwise been the subject of disciplinary action by any licensing authority in any state, territory, possession or country? □ Yes □ No

If "Yes," to any of the above please describe in full detail including date(s), location(s) and the nature of the offense(s): *Please use the back of this page, if necessary, to complete the above description.*

A conviction will not automatically result in your disqualification from admission; convictions will be considered only to the extent they relate to your qualification for admission. However, failure to disclose a conviction and/or mischaracterization of a conviction automatically will result in your ineligibility for admission (even if the conviction would not have barred your admission had it been properly disclosed).

Application Affidavit:

To the best of my knowledge and belief, this application contains no misrepresentation or falsification and information given by me is true and complete. Any misrepresentation of falsification will be grounds to deny admission or administrative dismissal from the school.



WWW.ARIAHEALTH.ORG/NURSING

Dear Applicant:

Aria Health School of Nursing requires applicants to take an entrance examination as part of the admissions process. The results of this entrance examination will be used in conjunction with other required academic information, reference letters and essay when being considered for admission to the Aria Health School of Nursing.

The test you will be taking is called The Test of Essential Academic Skills (TEAS). The TEAS is designed to predict the academic readiness of applicants prior to admission into a program of study in nursing. The four subtests are Math, Science, English, and Reading. The Admissions Committee at Aria Health School of Nursing has determined that candidates should have an "Adjusted Composite Score" score of 70% or higher, in order to be a viable candidate for admission. As stated above, this score is just one component in our decision making process. I highly recommend that you read more about this test by accessing ATI's website at <u>www.atitesting.com</u>. You can find information about how to purchase a study guide and practice tests on this site as well.

Testing dates are on the reverse side of this letter, as well as on the Aria Health School of Nursing website: <u>http://www.ariahealth.org/nursing</u>. You are responsible for sending an e-mail to indicate your top **3** choices for a test date from the enclosed list. You will receive an automatic e-mail confirming receipt of your requests with further instructions. Your test will not be scheduled until your application and application fee have been received. I will make every effort to give you your first choice; however this is dependent upon the number of candidates and availability of computer space.

- It is your responsibility to send an email to schedule your exam.
- If you need to reschedule your testing date for any reason, or you miss your scheduled testing date, you must notify me within 24 hours of your test. Failure to do so could reflect negatively on your application and may result in an incomplete application.
- We will NOT contact you to reschedule, it is your job to contact us to reschedule your test date.

Should you have any questions regarding this entrance examination or testing dates, you may contact me by phone at 215-831-6740 at ext. 121 or the Admissions office, at ext.124.

Sincerely,

Brian Greiman Computer Technologist <u>BGreiman@AriaHealth.org</u>

TEAS Test Schedule

Testing Dates for September 2010 Admittance			Testing Dates for January 2011 Admittance			
Febr	February, 2010			August, 2010		
Monday	1st	9AM to 1PM		Monday	2nd	9AM to 1PM
	8th	9AM to 1PM			16th	9AM to 1PM
	15th	9AM to 1PM			23rd	9AM to 1PM
	22nd	9AM to 1PM			30th	9AM to 1PM
Tuesday	2nd	9AM to 1PM		Tuesday	3rd	9AM to 1PM
	9th	9AM to 1PM			17th	9AM to 1PM
	16th	9AM to 1PM			24th	9AM to 1PM
	23rd	9AM to 1PM			31st	9AM to 1PM
Thursday	4th	9AM to 1PM		Wednesday	4th	9AM to 1PM
	11th	9AM to 1PM			18th	9AM to 1PM
	18th	9AM to 1PM			25th	9AM to 1PM
	25th	9AM to 1PM		Thursday	5th	9AM to 1PM
Friday	12th	9AM to 1PM			19th	9AM to 1PM
	19th	9AM to 1PM			26th	9AM to 1PM
Saturday	6th	9AM to 1PM		Friday	6th	9AM to 1PM
	27th	9AM to 1PM			20th	9AM to 1PM
March, 2010				September, 2010		
Monday	1st	9AM to 1PM		Wednesday	1st	9AM to 1PM
Tuesday	2nd	9AM to 1PM		Thursday	2nd	9AM to 1PM
Wednesday	3rd	9AM to 1PM		Friday	3rd	9AM to 1PM
Thursday	4th	9AM to 1PM				
Friday	5th	9AM to 1PM				