

	RN	1-B	SN	Ap	plic	cati	on
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Please check the boxes as you complete the following:

- ☐ Application form on pages 1 and 2
- ☐ Scholarship application on page 3
- ☐ Link to youtube video pasted onto page 4
- ☐ Current resume attached starting on page 5

Once complete, please email this entire document to srapoza@columbiabasin.edu

Questions? Contact Sarah Rapoza at srapoza@columbiabasin.edu



RN-BSN Program Application

Demographic Information	n				
Last Name	First	Middle	CBC Stu	CBC Student ID Number	
Previous Name(s)					
Address	(City	State	Zip	
Preferred Phone Number	Alternate P	Alternate Phone Number E-mail Address			
Employer (if applicable)					
Please indicate the quarter you բ	olan to start: □ SPRING	□ FALL Year:_			
Prior Education					
High School:					
Name of School	City	Sta	te Gr	aduation Date	
G.E.D.: If high school equivalency was o	btained through G.E.D., st	ate where and when	tests were taken		
Location		Date			
Associate Degree School of Nu	rsing:				
Name of School Graduation Date	City	State			

Other Colleges/Universities Attended:

Name of College /	Location	Dates	Program or Course of	
University	(City/State)	Attended	Study	Degree Earned

Registered Nurse Licensure Do you hold a Washington State RN License (circle one): Yes No If you answered yes, please provide the following: ____ License Number **Expiration Date** If you answered no, please indicate the state(s) in which you have RN licensure: I have applied for RN licensure in Washington State (circle one): Yes No I certify that the above information is accurate and complete. **Applicant Signature** Date Please send your completed and signed application, video link and current resume to: srapoza@columbiabasin.edu Questions? Contact Sarah Rapoza at srapoza@columbiabasin.edu **For Official Use Only**

Admission Index Score: ___

Evaluator Signature

WA State RN License Verified: □Yes □No.

Columbia Basin College complies with the spirit and letter of state and federal laws, regulations and executive orders pertaining to civil rights, Title IX, equal opportunity and affirmative action. CBC does not discriminate on the basis of race, color, creed, religion, national or ethnic origin, parental status or families with children, marital status, sex (gender), sexual orientation, gender identity or expression, age, genetic information, honorably discharged veteran or military status, or the presence of any sensory, mental, or physical disability, or the use of a trained dog guide or service animal (allowed by law) by a person with a disability, or any other prohibited basis in its educational programs or employment. Questions or complaints may be referred to the Vice President for Human Resources & Legal Affairs and CBC's Title IX/EEO Coordinator at (509) 542-5548. Individuals with disabilities are encouraged to participate in all college sponsored events and programs. If you have a disability, and require an accommodation, please contact CBC Disability Support Services at (509) 542-4412 or the Washington Relay Service at 711 or 1-800-833-6384. This notice is available in alternative media by request.

Cumulative GPA in ADN Courses: ___

Date



RN-BSN Student Scholarships:

Please complete the following application for supp	oort by the CBC Foundation.
Name:	
Student ID (if available):	
	rrently enrolled as a sophomore in the ADN ncurrent Enrollment program starting winter
[] Current RN-BSN student	
[] NEW applicant for the RN-BSN program	
Write a short paragraph indicating your plans for full-time or part-time? If you have already started, study? Provide information regarding financial ne	are you on-track with your current plan of
Signature:	Date:



Instructions for your 2-3 minute video essay:

 Using recording software of your choice (i.e., Screencast-O-Matic, Panopto, Quicktime, etc), please record a 2-3 minute video of yourself answering one of the following questions.

Choose one of the following two question prompts to respond to:

- Give an example of an important goal you set for yourself. Did you accomplish that goal? How did you ensure you accomplished it? If you did not accomplish it, what types of barriers did you face and what did you learn from this experience? Looking back on the original goal, would you have made any changes knowing what you know now?
- What is an example of a unique life experience or circumstance you have faced that you believe helped you be a stronger, more competent nurse? What did you learn from this experience?
- 2. After you have recorded your video, upload it to youtube using the following instructions:

To upload a video to YouTube:

- Sign into YouTube or create an account.
- o Click the Upload button at the top of the screen. (Create a video or post)
- o Change the privacy settings to Unlisted.
- o Select the video to be uploaded.
- 3. After the video is uploaded, copy and paste the video URL HERE:

(Copy/paste your resume starting at the top of this page. If you have trouble with formatting, include a copy of your resume as a separate document when you submit your application.)