

**TRINITAS SCHOOL OF NURSING**  
**Consideration for NURE 130 Enrollment Form**

**IMPORTANT: Attach an unofficial copy of your Union County College transcript showing courses completed/transferred**

Please print clearly or type

APPLICANT INFORMATION									
Last Name			First			MI			
Street Address					Apartment/Unit #				
City			State		ZIP				
Phone			UCC Owl E-mail						
Semester Requested			Student ID No.			GPA			
Are you currently attending Union County College?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you attending another college?			YES <input type="checkbox"/>	NO <input type="checkbox"/>
If you are not currently attending Union County College, have you applied?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so,				

EDUCATION									
High School or GED					City/State				
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
College				City/State					
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
College				City/State					
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
Have you completed all ESL and developmental courses (i.e., ENG 089; MAT 016)						YES		NO	
CO-REQUISITES COURSES		SEMESTER COMPLETED		GRADE		CURRENTLY ENROLLED		TRANSFERRED	
ENG 101 or 112									
BIO 105									
CHE 114 (Catalog year 2014)									
CHE 105 (Catalog year prior to 2014)									

\*Grades of C or higher are required in all lab sciences

Have you ever been enrolled in NURE130?	(Please circle) Yes or No	Semester Completed: _____	Grade: _____
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Trinitas School of Nursing Information Session date of attendance:  <p style="text-align: center;"><b><i>All applicants must attend prior to submitting their NURE 130 Consideration Form</i></b></p>	
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DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge. If this consideration form leads to enrollment, I understand that false or misleading information in this form may result in my dismissal from the Program. I understand acceptance into NURE 130 does not guarantee enrollment into future clinical nursing courses. I understand an incomplete form will not be considered.	
Signature	Date