



# Cleveland State University

## School of Nursing

Dear Prospective Nursing Student:

Thank you for your interest in Cleveland State University and the School of Nursing. Enclosed is documentation about our BSN Program which includes an application packet, recommendation forms, a prerequisite course equivalency chart and an application submission checklist. Our Nursing Program begins in the Fall Semester of every year and we have two application deadlines: **January 1<sup>st</sup>** (early decision) and **March 1<sup>st</sup>**.

The Nursing Program at CSU is small and selective, providing students with the opportunity to work with a caring and supportive faculty. Acceptance into the Nursing Major involves the following steps:

1. Admission into Cleveland State University as a pre-Nursing student.
2. Completion of all prerequisite courses with a GPA of 2.75 or better. At least two science courses must be completed at the time you submit your application to the School of Nursing.\*
3. A grade point average (GPA) of 2.75 or above in the prerequisite courses and an overall GPA of 2.5 or above.\*
4. A School of Nursing Application and fee, two School of Nursing recommendation forms, a current resume, and official transcripts from all colleges/universities attended.

\*Early decision requires a prerequisite and a cumulative GPA of 3.25 or above **and** no prerequisite grades less than a B.

If you have not already applied to Cleveland State University as an undergraduate, please contact Campus411 at (216) 687-5411 or apply online at [www.csuohio.edu](http://www.csuohio.edu). You should submit your application to CSU at least six weeks prior to the School of Nursing Application deadline.

Students who are currently working toward completion of the prerequisite courses, and have any questions about the program, should feel free to contact us on our main line at (216) 687-3598. You will be directed to the appropriate advisor. Also, please visit our website for updated information and for our Advising and Information session schedule. Our website is <http://www.csuohio.edu/nursing>. If you are attending an Advising session or have an advising appointment scheduled, please bring copies of your transcripts from all universities you have attended.

Thank you for your interest in Cleveland State University and the School of Nursing. We look forward to working with you!

Attachments

**engagedlearning™**

Mailing Address: 2121 Euclid Avenue, JH 238 · Cleveland, Ohio 44115-2214

Campus Location: Julka Hall, Room 238 · 2485 Euclid Ave · Cleveland, Ohio

(216) 687-3598 · Fax (216) 687-3556

The following checklist is for **your information only** (do not submit with your application materials). Please read carefully to make sure you have met the admissions requirements for the Basic program and have submitted ALL application materials.

## Basic Program Application Submission Checklist

### ADMISSION REQUIREMENTS

- MINIMUM cumulative (averaged from all universities attended) GPA of 2.5
  - Acceptance to Cleveland State University with a major in pre-Nursing
  - If you attended another School of Nursing, you must provide a letter from the Director of the School stating that you left the School in good academic standing. Good standing includes academic standing (both Nursing course grades and GPA), clinical and lab performance, professional behavior/conduct, and whether you would be allowed to progress in that school's Nursing program if you were to stay there.
  - Completion of Prerequisite Courses (Minimum cumulative GPA of 2.75, at least a "C" in each class):
    - Anatomy/Physiology I
    - Anatomy/Physiology II
    - Chemistry I
    - Chemistry II
    - Microbiology
    - Principles of Psychology
    - College Level Mathematics
    - English 101(or 100) and 102
    - Applicants must be proficient in Microsoft Word, Excel & Power Point
- Grades for at least 2 of the 5 science courses must be posted on the transcript at the time of application
  - All of the prerequisites must be completed prior to starting the Nursing program
  - Only one science course may be repeated once for a better grade
  - Two or more failing prerequisite courses are not permitted (C-, D, and F constitute failing grades)
  - Science prerequisites may be no more than 10 years old at the application deadline

### APPLICATION MATERIALS-MUST RECEIVE ALL MATERIALS BY THE DEADLINE

- School of Nursing Application & \$25 Fee, Payable to Cleveland State University by check or money order
- Resume highlighting Professional and Academic Background
- Official transcripts & current schedules on file with the School of Nursing (Admissions does not forward to us; official transcripts are needed at the time of application)
- Submission 2 recommendations from professors, supervisors, or employers (**not** colleagues, coworkers, friends, or family). The forms are provided in the application packet.

*It is your responsibility to make certain that your application is complete, that the School of Nursing has received all required application documents, and that you have been formally admitted to Cleveland State University. If you would like to verify that all of your School of Nursing application materials have been received, you may call 216-687-3598 and inquire. The School of Nursing does not contact applicants to inform them of the status of their applications.*

### PROGRAM INFORMATION

- 6 Semester Program (3 years). Beginning in Fall Semester, no Summer courses for Nursing. Schedule is full-time, primarily during the day, Monday - Friday, 7AM - 5PM, there are some evening clinicals. Must be FLEXIBLE
- Your complete file is evaluated by the admissions committee with particular attention paid to:
  - Undergraduate Degree GPA
  - Pre-requisite GPA
  - Professional Recommendations
  - Resume
  - Interview & Writing sample for selected candidates
- The accepted class size is 80 per year. Average prerequisite GPA is 3.44 and cumulative GPA is 3.36 for accepted applicants.

CLEVELAND STATE UNIVERSITY  
SCHOOL OF NURSING  
UNDERGRADUATE APPLICATION FOR ADMISSION

*Before submitting this application, you must:*

1. **Apply to Cleveland State University.**  
Applications can be obtained through the Office of Admissions (Euclid Commons Welcome Center, 216-687-5411) or you can apply online at [www.csuohio.edu](http://www.csuohio.edu). This should be completed no later than six weeks prior to the nursing application deadline. You must be admitted to Cleveland State University for the School of Nursing to review your application for admission to a nursing program.
2. **Be accepted into Cleveland State University as a pre-Nursing student.**  
New applicants to the University should check the appropriate box on the admissions application. You must forward official transcripts to the Admissions office when applying.
3. **Transcripts.**  
Official transcripts must be on file with the School of Nursing for all colleges and universities attended (**this is in addition to the transcripts you may have submitted to the Admissions Office**).
4. **Cumulative Grade-Point Average.**  
Have a cumulative grade-point average of at least 2.5 for the Accelerated, Basic and RN to BSN track.  
  
**Prerequisite Grade-Point Average.**  
Have a prerequisite grade-point average of at least 2.75 for the Accelerated, Basic, and RN to BSN track. (One Science course may be repeated one time)
5. **In-take Advising Session.**  
All interested applicants are urged to attend an Advising Session or speak with an advisor prior to starting the application process.
6. **School of Nursing Application.**  
Complete this application and return to the School of Nursing with a \$25 application fee. Only check and money orders are accepted, payable to CSU. The \$25 application fee is non-refundable.

**The following are additional requirements for various tracks within the nursing program:**

| Program             | References | Active Ohio RN License | Bachelor's Degree | Resume |
|---------------------|------------|------------------------|-------------------|--------|
| Accelerated Nursing | X          |                        | X                 | X      |
| Basic Nursing Track | X          |                        |                   | X      |
| RN to BSN Track     |            | X                      |                   | X      |

**Application Deadlines:**

| Program                   | Start Date                | Regular Admission Deadline | Early Admission Deadline |
|---------------------------|---------------------------|----------------------------|--------------------------|
| Accelerated Nursing Track | Spring Semester (January) | June 1 <sup>st</sup>       |                          |
| Basic Nursing Track       | Fall Semester             | March 1 <sup>st</sup>      | January 1 <sup>st</sup>  |
| RN to BSN Track           | Fall Semester             | July 1 <sup>st</sup>       |                          |

**The School of Nursing cannot process your application unless the requirements listed above have been met.**

*It is your responsibility to make certain that your application is complete, that the School of Nursing has received all required application documents, and that you have been formally admitted to Cleveland State University. If you would like to verify that all of your School of Nursing application materials have been received, you may call 216-687-3598 and inquire. The School of Nursing does not contact applicants to inform them of the status of their applications.*

Name: \_\_\_\_\_  
Last First Middle Maiden

Address: \_\_\_\_\_  
Street City State Zip Code

Telephone: (\_\_\_\_) \_\_\_\_\_ home (\_\_\_\_) \_\_\_\_\_ cell (\_\_\_\_) \_\_\_\_\_ work

Email Address \_\_\_\_\_ CSU I.D. Number: \_\_\_\_\_

Have you ever attended CSU? \_\_\_Yes \_\_\_No Citizenship: \_\_\_U.S. \_\_\_Other

Have you ever applied to CSU's SON? \_\_\_Yes \_\_\_No If so, when? \_\_\_\_\_

Have you ever attended another School of Nursing? \_\_\_Yes \_\_\_No Are you an LPN? \_\_\_Yes \_\_\_No

**I am applying for initial licensure**

Accelerated Track, Spring 20\_\_  
(must have obtained a bachelor's degree)

Basic Nursing Track, Fall 20\_\_

**I am applying for BSN completion**

RN to BSN Track Fall, 20\_\_

Do you have a valid Ohio RN License?

Yes  No

**PLEASE NOTE:** The session for which you specify program entry should be the session by which you intend to have all prerequisite courses completed.

**The following questions bear upon your ability to take the National Council Licensure Examination (NCLEX) to become a registered nurse in the State of Ohio. The answers to these questions are not utilized to determine admission to the Nursing Program. Should you be admitted to the Nursing Program and you have answered "yes" to any of the questions, you will be advised of additional procedures. Please answer each question.**

1. Have you ever been convicted, adjudged guilty by a court, pled guilty or pled no contest to any felony? \_\_\_Y \_\_\_N
2. Have you ever been convicted, adjudged guilty by a court, pled guilty or pled no contest to any misdemeanor resulting from or related to the use of drugs? \_\_\_Y \_\_\_N
3. Has any State Board of Nursing denied you licensure or admission to a licensure examination? \_\_\_Y \_\_\_N
4. Have you ever received a reprimand, been placed on probation, or has your professional license been suspended or revoked? \_\_\_Y \_\_\_N

*Please Note: It is your responsibility to make certain that your application is complete, that the School of Nursing has received all required application documents, and that you have been formally admitted to Cleveland State University. If you would like to verify that all of your School of Nursing application materials have been received, you may call 216-687-3598 and inquire. The School of Nursing does not contact applicants to inform them of the status of their applications.*

I certify that the information provided herein is true and complete to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*For Office Use Only*

|                       |                          |                      |
|-----------------------|--------------------------|----------------------|
| Application Received  | Application Fee Received | Resume Received      |
| Application Complete? | References Received      | Transcripts Received |



CLEVELAND STATE UNIVERSITY

SCHOOL OF NURSING

**Recommendation Form for Basic Nursing Track Applicants**

To The Applicant:

Complete the following items on this form and forward it directly to a **professor, supervisor, or employer**. To expedite the processing of your application, you may wish to provide the respondent with a pre-addressed envelope. All recommendation forms must be returned to the school of nursing in a sealed envelope.

Name of Applicant

(Last)

(First)

(Middle or Maiden)

CSU ID:

**Family Privacy Act-Statement on Confidentiality of Recommendation:**

- I desire that this recommendation be accessible to me after final admission and matriculation under the provisions of the Family Privacy Act.
- I desire that this recommendation be considered as confidential and hereby waive my right of access to this form following final admission and matriculation.

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**To The Respondent:**

The above named person has made application for a traditional program of study leading to the BSN degree at Cleveland State University, and is requesting you to serve as a recommendation. Please comment on the following.

Circle the number (using the following scale) that represents the applicant's demonstration of the quality in relation to others with whom you have worked/supervised (in a classroom or work setting).

| 1    | 2             | 3       | 4             | 5         | N            |
|------|---------------|---------|---------------|-----------|--------------|
| Poor | Below Average | Average | Above Average | Excellent | Not Observed |

**Ability to work with others**

|  |   |   |   |   |   |   |
|--|---|---|---|---|---|---|
| <b>Communication</b> - Expresses ideas succinctly and logically in writing               | 1 | 2 | 3 | 4 | 5 | N |
| - Expresses ideas succinctly and logically when speaking                                 | 1 | 2 | 3 | 4 | 5 | N |
| <b>Cooperation</b> - Works collaboratively with peers and others.                        | 1 | 2 | 3 | 4 | 5 | N |
| <b>Work With Others</b> - Establishes effective interpersonal relationships with others. | 1 | 2 | 3 | 4 | 5 | N |
| <b>Work Under Stress</b> - Accomplishes goals in situations that are stressful.          | 1 | 2 | 3 | 4 | 5 | N |

**Sensitivity To Others** - Is alert to and considerate of needs of clients and colleagues. .... 1 2 3 4 5 N

**Intellectual Ability**

**Intellectual Curiosity** - Raises meaningful questions and seeks answers. .... 1 2 3 4 5 N

**Innovativeness** - Moves beyond the obvious situations. .... 1 2 3 4 5 N

**Decision Making Ability** - Considers alternatives and consequences and takes action on decisions. .... 1 2 3 4 5 N

**Problem Solving Ability** - Uses a systematic approach to the identification and solution of intellectual problems. .... 1 2 3 4 5 N

**Employee Characteristics/Work Habits**

**Reliability** - Follows through on commitments. .... 1 2 3 4 5 N

**Accountability** - Accepts responsibility for own decisions and actions. .... 1 2 3 4 5 N

**Integrity** - Functions on the basis of accepted ethical standards. .... 1 2 3 4 5 N

**Flexibility** - Changes or modifies behavior when appropriate. .... 1 2 3 4 5 N

**Self-Direction** - Plans and executes actions independently. .... 1 2 3 4 5 N

**Toleration of Ambiguity** - Functions without a rigidly defined, externally imposed structure. .... 1 2 3 4 5 N

**Self-Confidence** - Carries out actions with assuredness. .... 1 2 3 4 5 N

**Realistic Self-Concept** - Sets expectations for self congruent with own capabilities. .... 1 2 3 4 5 N

Please include additional comments below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To be completed by the person serving as a recommendation:

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Length of time you have known applicant: From: \_\_\_\_\_ To: \_\_\_\_\_

Your relationship to the applicant: \_\_\_\_\_

Are you a registered nurse?  Yes  No

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for taking the time to complete this recommendation. Please return to:

School of Nursing  
**Attn: Basic Track References**  
Cleveland State University  
2121 Euclid Avenue, JH 238  
Cleveland, Ohio 44115-2214



CLEVELAND STATE UNIVERSITY

SCHOOL OF NURSING

Recommendation Form for Basic Nursing Track Applicants

To The Applicant:

Complete the following items on this form and forward it directly to a professor, supervisor, or employer. To expedite the processing of your application, you may wish to provide the respondent with a pre-addressed envelope. All recommendation forms must be returned to the school of nursing in a sealed envelope.

Name of Applicant

(Last)

(First)

(Middle or Maiden)

CSU ID:

Family Privacy Act-Statement on Confidentiality of Recommendation:

- I desire that this recommendation be accessible to me after final admission and matriculation under the provisions of the Family Privacy Act.
I desire that this recommendation be considered as confidential and hereby waive my right of access to this form following final admission and matriculation.

Applicant's Signature Date:

To The Respondent:

The above named person has made application for a traditional program of study leading to the BSN degree at Cleveland State University, and is requesting you to serve as a recommendation. Please comment on the following.

Circle the number (using the following scale) that represents the applicant's demonstration of the quality in relation to others with whom you have worked/supervised (in a classroom or work setting).

Scale table with columns: 1 Poor, 2 Below Average, 3 Average, 4 Above Average, 5 Excellent, N Not Observed

Ability to work with others

Table with 6 columns (1-5-N) and 4 rows of criteria: Communication, Cooperation, Work With Others, Work Under Stress

**Sensitivity To Others** - Is alert to and considerate of needs of clients and colleagues. .... 1 2 3 4 5 N

**Intellectual Ability**

**Intellectual Curiosity** - Raises meaningful questions and seeks answers. .... 1 2 3 4 5 N

**Innovativeness** - Moves beyond the obvious situations. .... 1 2 3 4 5 N

**Decision Making Ability** - Considers alternatives and consequences and takes action on decisions. .... 1 2 3 4 5 N

**Problem Solving Ability** - Uses a systematic approach to the identification and solution of intellectual problems. .... 1 2 3 4 5 N

**Employee Characteristics/Work Habits**

**Reliability** - Follows through on commitments. .... 1 2 3 4 5 N

**Accountability** - Accepts responsibility for own decisions and actions. .... 1 2 3 4 5 N

**Integrity** - Functions on the basis of accepted ethical standards. .... 1 2 3 4 5 N

**Flexibility** - Changes or modifies behavior when appropriate. .... 1 2 3 4 5 N

**Self-Direction** - Plans and executes actions independently. .... 1 2 3 4 5 N

**Toleration of Ambiguity** - Functions without a rigidly defined, externally imposed structure. .... 1 2 3 4 5 N

**Self-Confidence** - Carries out actions with assuredness. .... 1 2 3 4 5 N

**Realistic Self-Concept** - Sets expectations for self congruent with own capabilities. .... 1 2 3 4 5 N

Please include additional comments below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To be completed by the person serving as a recommendation:

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Length of time you have known applicant: From: \_\_\_\_\_ To: \_\_\_\_\_

Your relationship to the applicant: \_\_\_\_\_

Are you a registered nurse?  Yes  No

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for taking the time to complete this recommendation. Please return to:

School of Nursing  
**Attn: Basic Track Recommendations**  
Cleveland State University  
2121 Euclid Avenue, JH 238  
Cleveland, Ohio 44115-2214

**Cleveland State University  
School of Nursing  
Nursing Prerequisite Course Equivalents  
For Cleveland-area Community Colleges**

| <b>Course Name</b>                                | <b>Minimum # of Credit Hours</b> | <b>Cuyahoga Community College</b>   | <b>Lakeland Community College</b> | <b>Lorain County Community College</b> |
|---|----------------------------------|-------------------------------------|-----------------------------------|--|
| Anatomy & Physiology I (with Lab)                 | 4                                | BIO 2331*                           | BIOL 2210                         | BIOG 121                               |
| Anatomy & Physiology II (with Lab)                | 4                                | BIO 2341*                           | BIOL 2220                         | BIOG 122                               |
| Chemistry I (with Lab)<br>•Must be same sequence  | 4                                | CHEM 1010<br>or<br>CHEM 1300w/130L  | CHEM 1100<br>or<br>CHEM 1500      | CHMY 161<br>or<br>CHMY 171             |
| Chemistry II (with Lab)<br>•Must be same sequence | 4                                | CHEM 1020<br>or<br>CHEM 1310 w/131L | CHEM 1150<br>or<br>CHEM 1600      | CHMY 162<br>or<br>CHMY 172             |
| Microbiology (with Lab)                           | 4                                | BIO 2500                            | BIOL 2700                         | BIOG 251                               |
| General Psychology                                | 3                                | PSY 1010                            | PSYC 1500                         | PSYH 151                               |
| Statistics<br>•ABSN & RNBSN only                  | 3                                | MATH 1410 &<br>MATH 1420 **         | MATH 1550                         | MTHM 168                               |
| Ethics<br>•ABSN only                              | 3                                | PHIL 2020<br>or<br>PHIL 2050        | PHIL 2700                         | PHLY 161<br>Or<br>PHLY165              |
| Freshman English<br>•Basic & RNBSN only           | 6-7                              | ENG 1010<br>&<br>ENG 1020           | ENG 1110<br>&<br>ENG 1120         | ENG 161<br>&<br>ENG 162                |
| College-level Mathematics<br>•Basic only          | 3-4                              | See CSU's Transfer Guide for CCC    | See CSU's Transfer Guide for LCC  | See CSU's Transfer Guide for LCCC      |

\* Prior to Fall 2011, these were BIO 2330 & BIO 2340. Please contact CCC for assistance if you did not finish both courses in the sequence before Fall 2011.

\*\* For BSN students starting the Statistics sequence at CCC in Fall 2010 or later, only MATH 1410 is required. Students who started the sequence prior to Fall 2010 must complete both MATH 1410 & 1420 in order to meet the Statistics requirement.

**For Basic BSN and Accelerated BSN students, effective Fall 2012, science prerequisites may be no more than ten (10) years old at the application deadline.**

For more information about Cleveland State University's Nursing Programs, please visit our website:  
<http://www.csuohio.edu/nursing/>