



# WILLIAM PENN UNIVERSITY

## APPLICATION FOR ADMISSION

### RN-BSN PROGRAM

RETURN TO: **WILLIAM PENN UNIVERSITY**  
 OFFICE OF ADMISSIONS  
 201 TRUEBLOOD AVE  
 OSKALOOSA, IA 52577

Please complete this form **fully** to be considered for admission to the RN-BSN program.  
**To complete your application**, please also submit official transcripts from all previously attended colleges.

Questions? Call the Office of Admissions at 1-800-779-7366 ext. 1

### APPLICANT

Legal Name \_\_\_\_\_  
Last (Enter name **exactly** as it appears on official documents.) First Middle Jr., etc.

Preferred name, if not first name (only one) \_\_\_\_\_ Former last name(s) \_\_\_\_\_

Birth Date \_\_\_\_\_  Female  Male U.S. Social Security Number, if any \_\_\_\_\_  
mm/dd/yyyy

Preferred telephone  Home  Cell Home (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_ Secondary E-mail \_\_\_\_\_

Permanent home address \_\_\_\_\_  
Number & Street Apartment #

\_\_\_\_\_  
City/Town County or Parish State/Province Country ZIP/Postal Code

Current address (if different from permanent) \_\_\_\_\_ Address valid until \_\_\_\_\_  
mm/dd/yyyy

### DEMOGRAPHICS

Marital Status  Single  Married  Divorced  Widowed  
 If married, spouse's name \_\_\_\_\_

Birthplace \_\_\_\_\_  
City/Town State/Province Country

Religious Affiliation \_\_\_\_\_  
(Optional)

1. Have you ever served in the U.S. Military?  Yes  No  
 If no, are you the dependent of someone who served?  Yes  No

2. If yes to either of the above, do you intend to apply for military or veteran's educational benefits?  Yes  No

If yes, what is your current military status (or the veteran's if you are a dependent)?  
 Active Duty  National Guard/Reserve  Veteran

Citizenship Status  U.S. Citizen  Other \_\_\_\_\_

1. Are you Hispanic/Latino or of Spanish origin?  
 Yes (If yes, please describe your background below)  No

2. Regardless of your answer to the prior question, please indicate how you identify yourself (check all that apply).  
 American Indian or Alaska Native  
 Asian  
 Black or African American  
 Native Hawaiian or Other Pacific Islander

### YOUR PLANS & STATUS

I will register for:  
 Fall 20\_\_\_\_  Spring 20\_\_\_\_

I wish to enroll at the following location:  
 Oskaloosa  Johnston  
 Southwestern Community College—Creston  
 Marshalltown Community College—Marshalltown  
 Online

Do you intend to apply for financial aid?  Yes  No

Do you intend to apply for tuition reimbursement from your current employer?  Yes  No  
 If so, please name employer \_\_\_\_\_

Professional Information  
 Iowa RN License Number \_\_\_\_\_  
 Current Employer \_\_\_\_\_

Housing Plan  Live on Campus  Commute  
 Commute - Live With Parents

Note: To be considered for grants or loans, you will need to complete the Free Application for Federal Student Aid. It is also available online at [www.fafsa.gov](http://www.fafsa.gov).

## EDUCATION

Please list all of your most recent **colleges with dates** attended (attach separate sheet if necessary):

School Name \_\_\_\_\_ City, State, Zip, Country \_\_\_\_\_ Dates Attended (mm/yyyy) \_\_\_\_\_

School Name \_\_\_\_\_ City, State, Zip, Country \_\_\_\_\_ Dates Attended (mm/yyyy) \_\_\_\_\_

School Name \_\_\_\_\_ City, State, Zip, Country \_\_\_\_\_ Dates Attended (mm/yyyy) \_\_\_\_\_

High School Graduation Date \_\_\_\_/\_\_\_\_/\_\_\_\_ OR GED Completion Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Please submit transcripts from each institution you've attended.

## REFERRAL

How did you hear about William Penn University?

- Newspaper     WPU Alumni \_\_\_\_\_    Internet:  Website    Facebook    Twitter  
 Television     WPU Coach/Director \_\_\_\_\_     Family Member \_\_\_\_\_  
 Radio     WPU Faculty/Staff \_\_\_\_\_     Friend \_\_\_\_\_  
 College Advisor     Other \_\_\_\_\_

## FAMILY

(If married or over 25 years old, please skip.)

### Parent 1

Mother    Father    Unknown  
Is Parent 1 living?    Yes    No

\_\_\_\_\_  
*Last*                      *First*                      *Middle*

Home address if different from yours

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

Phone  Home    Cell    Work (\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

WPU Graduate?    Yes    No   If yes, what year? \_\_\_\_\_

Other College Attended \_\_\_\_\_ Grad Year \_\_\_\_\_  
U.S. Veteran?    Yes    No

With whom do you make your permanent home?

Parent 1    Parent 2    Both    Legal Guardian    Other \_\_\_\_\_

Other family members who graduated from William Penn University and year: \_\_\_\_\_

### Parent 2

Mother    Father    Unknown  
Is Parent 2 living?    Yes    No

\_\_\_\_\_  
*Last*                      *First*                      *Middle*

Home address if different from yours

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

Phone  Home    Cell    Work (\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

WPU Graduate?    Yes    No   If yes, what year? \_\_\_\_\_

Other College Attended \_\_\_\_\_ Grad Year \_\_\_\_\_  
U.S. Veteran?    Yes    No

## SIGNATURE

If I am accepted by William Penn University, I understand that I will be expected to abide by all university rules and regulations. I acknowledge my responsibility for all financial obligations I incur while a student at William Penn University. I certify that all information in this application is complete and accurate. I understand that failure to report accurate and complete information may result in denial of admission or dismissal from the university. I understand that this application for admission to William Penn University and supporting documents will become permanent documents in my personal file. I authorize William Penn University to use my name and photo for public relation purposes, including advertising, promotional, press releases, social media and video usage, as deemed appropriate.

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

In accordance with the Clery Act, the university publishes an annual security report that contains statistics for the previous three years concerning reported crimes. A copy of the report is available by request and can be accessed at <https://www.wmpenn.edu/student-life/campus-security/>