



FRANCES PAYNE BOLTON
SCHOOL OF NURSING

CASE WESTERN RESERVE
UNIVERSITY

APPLICATION INSTRUCTIONS

Post-Master's Doctor of Nursing Practice

Applications for the Post-Master's DNP Program are reviewed year-round.

**Deadlines for eligibility to
begin coursework are:**

- June 1st for Fall semester
- October 1st for Spring semester
- March 1st for Summer semester

To complete the application process, please do the following:

<input type="checkbox"/>	<p>1. Complete Miller Analogies Test (MAT) or Graduate Record Examination (GRE) Have official scores sent to Case Western Reserve University, Nursing Department. MAT: www.milleranalogies.com or 1-800-622-3231; in Cleveland, call Case 216-368-1030 or CSU 216-687-2272. GRE: www.gre.org; in Cleveland, call Case 216-368-1030.</p> <ul style="list-style-type: none">• International applicants take the Test of English as a Foreign Language (TOEFL).
<input type="checkbox"/>	<p>2. Arrange for official transcripts from <u>each</u> post-secondary college/university/school of nursing attended to be sent to the address at the end of this section.</p>
<input type="checkbox"/>	<p>3. Other Credentials: For Practice Leadership Elective: evidence of Advanced Practice Certification or eligibility to obtain Advanced Practice Certification</p>
<input type="checkbox"/>	<p>4. Arrange for 3 recommendations We prefer that you seek academic references – persons in a position to speak to your ability to complete doctoral work. Complete the waiver section at the top of each Recommendation Form. Provide each person with the form and a stamped Case Western Reserve University return envelope.</p>

<input type="checkbox"/>	<p>5. Complete DNP application form</p> <p>Please remember to sign your application!</p> <p>NOTE: MOST APPLICANTS WILL NOT BE APPLYING FOR ADMISSION AS A MEMBER OF AN ESTABLISHED COHORT.</p>
<input type="checkbox"/>	<p>6. Provide the non-refundable \$75.00 application fee.</p> <p>Your check/money order should be made payable to Case Western Reserve University</p>
<input type="checkbox"/>	<p>7. Write an essay</p> <p>Respond in essay form to the 3 questions listed under <i>Statement of Research Interest</i> on the application. Each question should be answered in one typewritten or word-processed page or less.</p>
<input type="checkbox"/>	<p>8. Attach a resume or CV</p> <p>Include employment history, military service, community service, academic and professional awards, honors, fellowships, memberships and publications</p>

Please mail all required materials to the following address:

Donna Hassik
Case Western Reserve University
Frances Payne Bolton School of Nursing
Office of Student Services
10900 Euclid Avenue
Cleveland, Ohio 44106-4904

If you have questions:

Call 216-368-2529 or email us at admissionsfpb@case.edu.

All materials submitted become the property of the School of Nursing and cannot be returned to the applicant. Any information about race, ethnicity, gender, color, national origin, religion, age, marital status, physical or mental disabilities is confidential and not used as criteria for admission decisions.

Updated: 4/30/10



FRANCES PAYNE BOLTON
SCHOOL OF NURSING

CASE WESTERN RESERVE
UNIVERSITY

APPLICATION for ADMISSION Post-Master's Doctor of Nursing Practice

Practice Leadership Elective

Educational Leadership Elective

Date of Application: ____/____/20____

I am applying as a member of the cohort located at _____

To enter: August 20____ January 20____ May/June 20____

LEGAL NAME: _____ SSN: _____
Last Name First Name Middle Name

ADDRESS FOR ADMISSION MAILINGS:

Street _____ Apt. Number _____

City _____ State/Province _____ Country _____

Zip/Postal Code _____ Telephone (Home) _____ Telephone (Work) _____

County (if Ohio resident) _____ This address is effective until what date? _____

PERMANENT ADDRESS (if different from current address): _____

EMAIL ADDRESS: _____

DATE OF BIRTH: _____ GENDER: Male Female

ETHNICITY: (Optional information to be used for statistical purposes only)

1. Do you consider yourself to be Hispanic/Latino? Yes No

2. In addition, please select **one or more** of the following categories to describe yourself:

American Indian or Alaska Native Asian Black or African American

Native Hawaiian or Other Pacific Islander White

CITIZENSHIP: (Check appropriate boxes and complete relevant information.)

<input type="checkbox"/> I am a U.S. Citizen	<input type="checkbox"/> I am not a U.S. Citizen	<input type="checkbox"/> I need a Student Visa	<input type="checkbox"/> Country of Citizenship _____
<input type="checkbox"/> I have a U.S. Permanent Resident Visa		Alien Registration Number: _____	
Country of Birth: _____		I am already in the U.S. and entered on _____ (date)	
Visa Type: <input type="checkbox"/> F <input type="checkbox"/> J <input type="checkbox"/> Other (specify): _____		My I-94 expires on _____ (date)	

EDUCATION*: (List in chronological order all colleges and universities attended, including schools of nursing.)

University/School, City/State	Dates Attended	Major	Degree	Graduation Date

*Arrange to have the Registrar of each institution send a transcript directly to the School of Nursing Office of Admissions. See address at the end of this application.

COURSES: (List below the courses that you are currently taking and courses you plan to complete prior to enrollment in the School of Nursing.)

University or College	Semester/Quarter & Year	Department Name	Course Number	Course Title	Credit Hours

LICENSURE INFORMATION: (Ohio licensure required prior to enrolling in clinical courses)

In which states are you currently licensed as a Registered Nurse?

STATE: _____ LICENSE NUMBER: _____

STATE: _____ LICENSE NUMBER: _____

List all current certifications:

Certification	Certifying Organization	Certification Number

Have you ever been convicted of a felony? Yes No

If yes, attach a description of the circumstances.

Please list the names of other schools of nursing to which you are applying:

REFERENCES: On the application instruction sheet, you are asked to submit references from three persons. Please list the name and position of each:

1. _____
2. _____
3. _____

TEST SCORES: (I have taken the following standardized test.)

GRE General Date: _____ Verbal: _____ Quantitative: _____ Analytical: _____

MAT (Miller Analogies) Date: _____ Score: _____

Test of English as a Foreign Language (TOEFL) Date: _____ Score: _____

If you have not yet taken the test required for your program of study, when do you plan to take the test?

GRE Date: _____

MAT Date: _____

TOEFL Date: _____

Do you wish to apply for financial aid? Yes No

Have you ever applied to the Frances Payne Bolton School of Nursing before? Yes No

If yes, date: _____

How did you hear about our programs? _____

Attach to your application the following items:

1. **Resume or CV**, which includes employment history, military service, community service, academic and professional awards, honors, fellowships, memberships, and publications.
2. **Statement of Research Interest:** Respond in essay form to the following questions. Each question should be answered in one word-processed or typewritten page or less.
 - a. Discuss your educational and professional goals, short and long term, and how the DNP program will help you reach these goals.
 - b. Discuss how you have helped to develop and disseminate knowledge in your past experience as a professional nurse.
 - c. Discuss the research focus that you would like to pursue for your DNP thesis work or Research Project and describe one researchable clinical problem in that focus area.

I hereby certify that the information I have provided in this application is accurate and complete. I understand that the misrepresentation or omission of facts is sufficient cause for denial or dismissal from the program if I am admitted.

Signature of Applicant: _____ Date: _____

All completed application materials should be returned to:

Case Western Reserve University
Frances Payne Bolton School of Nursing
Office of Student Services
10900 Euclid Avenue
Cleveland, Ohio 44106-4904

Updated 8/3/11



Recommendation Form: Doctor of Nursing Practice (DNP) Program

Section A: To be completed by the applicant

The Family Education Rights and Privacy Act of 1974 and its amendments guarantee students access to their educational records. Students may, however, waive their right of access to recommendations. The choice of the applicant regarding this recommendation is to be indicated below. Failure to sign will constitute acceptance of limited access.

- I do waive I do not waive my right to inspect the contents of the following recommendation.

Signed: _____ Date: _____

Name of Applicant: _____

Section B: Information for the person serving as the applicant's reference

Name: _____

Position: _____

Place of Employment: _____ Business Phone: _____

Length of time you have known applicant: From: _____ To: _____

Capacity in which you have known applicant (please check all that are applicable):

- | | |
|--|--|
| <input type="checkbox"/> Personally | <input type="checkbox"/> As a professional colleague |
| <input type="checkbox"/> As a student | <input type="checkbox"/> As an employee |
| <input type="checkbox"/> Only casually | <input type="checkbox"/> Other (please explain): _____ |

Place a check by one statement in each category that best represents this applicant.

1. Learning Skills

- Very slow to grasp subject/work requirements; memorizes with little understanding.
- Needs to exert extra effort to demonstrate minimal understanding of subject/work requirements.
- Is about average in understanding subject/work requirements.
- Quick to grasp subject/work requirements.
- Brilliant; one of 5% of persons who shine above all others in learning subject/work requirements.
- Not able to judge.

2. Intellectual Curiosity and Innovativeness

- A follower; accepts things as they are.
- Rarely asks meaningful questions or generates new ideas.
- Raises some questions and tries to set forth new ideas.
- Intellectually curious; frequently generates new ideas.
- Outstanding ability to generate new ideas; great intellectual curiosity.
- Not able to judge.

3. Written Communication Skills

- Unable to express ideas clearly in writing.
- Has some trouble with logical order and grammar/punctuation.
- Uses correct grammar and punctuation but has trouble with logical order.
- Expresses ideas logically and succinctly in writing most of the time.
- Outstanding in the written expression of ideas.
- Not able to judge.

4. Oral Communication Skills

- Inarticulate; ideas not presented clearly.
- Weak in oral skills including command of language and articulation.
- Articulates fairly well but order of ideas is not always logical.
- Good in articulating ideas clearly and logically.
- Very articulate; outstanding command of language.
- Not able to judge.

5. Self Management Skills

- Needs encouragement and structure to initiate and complete work.
- Initiates own activity but needs increased encouragement to complete work.
- Initiates own work but has difficulty accommodating feedback.
- Able to work independently while seeking and incorporating appropriate assistance; effectively accommodates feedback.
- Not able to judge.

6. Group Skills

- Never contributes toward group goals.
- Interferes with attainment of group goals.
- Has some difficulty as a member/leader of group.
- Often regarded as a constructive group member/leader by peers.
- Very effective as a leader/member in assisting group toward constructive goals.
- Not able to judge.

7. Reliability

- Neglects following through with obligations/appointments.
- Work is incomplete, carelessly done.
- Completes work carefully but with prodding.
- Meets obligations; independently most of the time.
- Thoroughly reliable; needs no supervision.
- Not able to judge.

8. Perseverance

- Gives up without trying.
- Becomes discouraged easily when working toward goals.
- Works on goals which are easily attainable but avoids difficult goals.
- Works toward most goals until achieved.
- Is always persistent in pursuing in all goals.
- Not able to judge.

9. Accountability

- Projects blame on others as reason for own actions.
- Gives excuses for own actions.
- In general accepts responsibility for own actions.
- Thoroughly accountable for own actions.
- Not able to judge.

10. Response to Stressful Situations

- Remains withdrawn, angry, confused, unrealistic, or depressed when under pressure.
- Has difficulty proceeding constructively.
- Tries to proceed constructively; occasionally is withdrawn or angry.
- Self-controlled, rarely loses temper or withdraws.
- Extremely well-balanced.
- Not able to judge.

11. Ability to Make Decisions

- Totally indecisive.
- Has difficulty analyzing problems and arriving at decisions.
- Analyzes a situation correctly but has difficulty deciding on a course of action.
- Generally competent in making decisions and taking action on them.
- Excellent in considering consequences of decisions and taking appropriate action.
- Not able to judge.

12. Toleration of Ambiguity

- Always requires excessive details of assignments/exams in order to meet supervisor/instructor assignments.
- Is uncomfortable in less structured situations; seeks guidance inappropriately.
- Attempts to function with less structure and seeks guidance appropriately.
- Usually can function comfortably in less structured situations.
- Functions very effectively and comfortably without a rigidly defined, externally imposed structure.
- Not able to judge.

My overall evaluation of this person as an applicant is:

- Strongly Recommend
- Recommend
- Recommend with Reservation
- Do Not Recommend
- Undecided

(Briefly explain any decision besides "Strongly Recommend.")

Other additional comments may be appended. Thank you.

Signature: _____ Date: _____

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

Office of Admissions
 School of Nursing
 Case Western Reserve University
 10900 Euclid Avenue
 Cleveland, Ohio 44106-4904



Recommendation Form: Doctor of Nursing Practice (DNP) Program

Section A: To be completed by the applicant

The Family Education Rights and Privacy Act of 1974 and its amendments guarantee students access to their educational records. Students may, however, waive their right of access to recommendations. The choice of the applicant regarding this recommendation is to be indicated below. Failure to sign will constitute acceptance of limited access.

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Name of Applicant: _____

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Name: _____

Position: _____

Place of Employment: _____ Business Phone: _____

Length of time you have known applicant: From: _____ To: _____

Capacity in which you have known applicant (please check all that are applicable):

- | | |
|--|--|
| <input type="checkbox"/> Personally | <input type="checkbox"/> As a professional colleague |
| <input type="checkbox"/> As a student | <input type="checkbox"/> As an employee |
| <input type="checkbox"/> Only casually | <input type="checkbox"/> Other (please explain): _____ |

Place a check by one statement in each category that best represents this applicant.

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- Quick to grasp subject/work requirements.
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- Not able to judge.

2. Intellectual Curiosity and Innovativeness

- A follower; accepts things as they are.
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- Intellectually curious; frequently generates new ideas.
- Outstanding ability to generate new ideas; great intellectual curiosity.
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3. Written Communication Skills

- Unable to express ideas clearly in writing.
- Has some trouble with logical order and grammar/punctuation.
- Uses correct grammar and punctuation but has trouble with logical order.
- Expresses ideas logically and succinctly in writing most of the time.
- Outstanding in the written expression of ideas.
- Not able to judge.

4. Oral Communication Skills

- Inarticulate; ideas not presented clearly.
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- Needs encouragement and structure to initiate and complete work.
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- Initiates own work but has difficulty accommodating feedback.
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- Not able to judge.

6. Group Skills

- Never contributes toward group goals.
- Interferes with attainment of group goals.
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- Neglects following through with obligations/appointments.
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