Please print

Name: ____________________________ Last First Middle Initial

Student ID#: _________________________

Address: __________________________ Apt. Number: ____________

City: ___________________________ State: ____________ Zip: ___________

Phone Number: ___________________ Cell Phone: ____________________

Email Address: __________________________

Student Selected Test Date(s):

☐ TUESDAY, APRIL 23, 2019 • 8:30 AM – 11:30 AM
☐ THURSDAY, APRIL 25, 2019 • NOON – 3:00 PM
☐ FRIDAY, APRIL 26, 2019 • 12:30 PM – 3:30 PM
☐ MONDAY, APRIL 29, 2019 • 5:30 PM – 8:30 PM
☐ WEDNESDAY, MAY 1, 2019 • 5:30 PM – 8:30 PM
☐ THURSDAY, MAY 2, 2019 • 2:00 PM – 5:00 PM
☐ MONDAY, MAY 6, 2019 • 2:00 PM – 5:00 PM
☐ MONDAY, MAY 6, 2019 • 5:30 PM – 8:30 PM
☐ WEDNESDAY, MAY 8, 2019 • 9:00 AM – NOON
☐ WEDNESDAY, MAY 8, 2019 • 1:00 PM – 4:00 PM
☐ FRIDAY, MAY 10, 2019 • 9:00 AM – NOON
☐ FRIDAY, MAY 10, 2019 • 1:00 PM – 4:00 PM
☐ MONDAY, MAY 13, 2019 • 10:00 AM – 1:00 PM

☐ MONDAY, MAY 13, 2019 • 2:00 PM – 5:00 PM
☐ MONDAY, MAY 13, 2019 • 6:00 PM – 9:00 PM
☐ TUESDAY, MAY 14, 2019 • 9:00 AM – NOON
☐ WEDNESDAY, MAY 15, 2019 • 9:00 AM – NOON
☐ WEDNESDAY, MAY 15, 2019 • 1:30 PM – 4:30 PM
☐ THURSDAY, MAY 16, 2019 • 4:00 PM – 7:00 PM
☐ FRIDAY, MAY 17, 2019 • 1:00 PM – 4:00 PM
☐ MONDAY, MAY 20, 2019 • 2:00 PM – 5:00 PM
☐ MONDAY, MAY 20, 2019 • 6:00 PM – 9:00 PM
☐ TUESDAY, MAY 21, 2019 • 3:30 PM – 6:30 PM
☐ WEDNESDAY, MAY 22, 2019 • 9:00 AM – NOON
☐ THURSDAY, MAY 23, 2019 • 9:00 AM – NOON

For College Use Only:

To be processed by the Nursing Advisor or Records Office to be eligible for application

Complete file in records office (Belmont College application, high school/GED transcript, placement test scores). Completion of all developmental education courses as specified by placement testing with a grade of C or better within the last five years for the 2019 nursing program entrance or three years or less for the 2020 fall entrance. Completion of the following preadmission courses with a grade of C or better or in progress:

• BIO2110 A&P I
• MAT1110 Allied Health Math
• PSY1120 General Psychology
• Verification of current registry status for Licensed Practical Nurse or Paramedic

College Authorization Stamp

Return this form with your $45.00 non-refundable fee to the Business Office to the testing date for consideration of admission for fall semester.

Student’s Signature: _____________________________ Date: ____________

☐ Cash, check, or money order received for $45.00 for Nursing Entrance Exam

Business Office Signature: _____________________________ Date Fee Received: ____________