



NOTRE DAME OF MARYLAND UNIVERSITY

School of Nursing
Masters of Science in Nursing

(This application is to be used by students who completed the BSN at Notre Dame and wish to pursue the MSN.)

Application for: Fall Spring Year

Legal name: Last First Middle

Date of birth: (MM/DD/YR)

Social Security:

Permanent address:

City State Zip

Home phone:

Cell phone:

Email:

MSN Track: Education Administration Undecided

Last date of attendance at Notre Dame of Maryland:

List all Universities/Colleges attended post-BSN at Notre Dame:

Institution attended:

Dates of Attendance: # Credits earned

Will you be applying for financial aid: Yes No

I understand that Notre Dame operates on an honor system and I affirm my intent of academic honesty during my course of study (initial here).

Applicant Signature

Date