(Please type or print and submit with Application for Admission online) Supplementary Programme Information Faculty of Graduate Studies • Master of Science in Nursing NP Field

<u>THIS IS NOT AN APPLICATION FORM</u>. You must also complete the Faculty of Graduate Studies *Application for Graduate Admission* form to be considered for admission. The application is available at <u>www.futurestudents.yorku.ca/graduate</u>. Admission decisions are based on a comprehensive assessment of the following: personal statement, resume, references, and grade transcript. Meeting minimum admission requirements does not guarantee admission.

SURNAME:	FIRST NAME:
MAILING ADDRESS:	
TELEPHONE #:	E-MAIL ADDRESS:
PREVOUS YORK STUDENT # (if applicable):	
Please indicate which program you are applying for:	□ Full-time □ Part-time

1. Personal Statement (NP-PHC Field)

The personal statement is an important part of the screening of candidates for admission to the Ontario NP-PHC Program. The scores will be based on your ability to address the items in a comprehensive and personal matter. It is suggested that you will include examples of personal experience within your responses. Answers that are overly brief and very general will not be highly scored. Your written submission contributes strongly toward determining whether you are selected for admission to the Ontario NP-PHC Program.

INSTRUCTIONS

- Please answer the 4 questions below.
- Replies must be typed and not to exceed 4 pages of double-spaced, 12-point font print in total. Only the first 4 pages will be read. Replies to each question need not be of equal length.
- **A.** What is your motivation for wanting to become a Nurse Practitioner-Primary Health Care (NPPHC) rather than an NP-Adult or NP-Pediatrics?
- **B.** What professional and personal attributes do you bring to the NP-PHC role?
- **C.** Given that each course requires at least 15 hours preparation time per week in addition to course and clinical placement hours, please describe specific strategies you will use to meet the time demands of the program.
- D. Please describe Primary Health Care and how you understand the role of the NP-PHC.

2. Please list your 3 referees below and include their credentials, position, and contact information. We also request your permission to write to any or all of the referees for further information. (Please indicate whether you agree to this). \Box Yes \Box No

Academic Reference Letter: Please note that if you have been out of university for more than 10 years and are not able to get in touch with a professor who taught you in a theory-based course in BScN program, please indicate this on a separate sheet of paper and obtain another reference from an employer or someone who can write about your leadership.

Academic:	
Employer:	
Other:	

4. Certificate of Competence

Please attach a photocopy of current *Certificate of Competence* from the College of Nurses of Ontario. **This must be a copy of your most recent renewal, not your original certificate.**

5. Resumé

Please submit a resumé, along with your application. We are interested in your non-academic experience as well as your academic experience.

6. Understanding the role of the Nurse Practitioner in Ontario. We encourage applicants to have at least a baseline understand of the role of the Nurse Practitioner. Please discuss how you have acquired this knowledge (for example, spending time with an NP in practice).

7. Verification of Employment Hours form:

Evidence of the equivalence of 2 years of full-time nursing practice as a Registered Nurse following graduation (3640 hours within the past 5 years) using the attached employer-completed Verification of Employment Hours form. It is preferable that these hours are completed at the time of this application.

8. Understanding and agreeing to commitments within the program.

A. I understand that while the MScN courses are online, the NP program courses are in-person on site at York University. \Box Yes \Box No

B. I understand that all clinical placements in the NP program will be in the catchment of York University, and I will not necessarily have a choice in location, type of practice, of day/time of the week for my placements. □Yes □ No

C. I understand that I may need to make significant modifications to my work schedule in order to accommodate my classes, course requirements, and placements in the NP program. □Yes □ No Checklist: I have included or uploaded on MyFile:

□Personal statement □Resumé □CNO Certificate of Competence

Date_____Signature of Applicant_____

YOUR SIGNATURE INDICATES THAT THE INFORMATION ABOVE AND IN THE ACCOMPANYING DOCUMENTS IS ACCURATE AND CURRENT.

