Dear Prospective Nursing Student:

The freshman-entry pathway is a program that admits a selective, highly qualified group of first time freshman attending CSU to be enrolled as freshman into the BSN major. These students take the same courses and follow the same curriculum plan as our current BSN majors and pre-majors. This program provides students the opportunity to be recognized as nursing majors while they are enrolled in their first year of non-nursing courses and these students are not required to re-apply to the School of Nursing for entrance into the major for their sophomore year courses.

The number of available spaces into the Freshman-Entry Pathway is limited. Admission requirements include:

1. First-time freshman
2. Minimum of 3.0 GPA in high school, with grades of B or better in biology and chemistry
3. 13 core units of college preparatory classes, including biology with lab, chemistry with lab.
4. Two School of Nursing Freshman-entry recommendation forms completed by a high-school counselor, teacher, or coach.
5. Application to the School of Nursing. Application deadline is November 15th during the high school senior year.
6. Scores of 21 or above on ACT; 1050 (1600 scale) or above on SAT or 1550 or above on SAT (2400 scale).

While CSU has a rolling admission policy, freshman entry students must apply by November 15 during the high school senior year.

For additional information, visit our website at http://www.csuohio.edu/nursing.

Thank you for your interest in Cleveland State University and the School of Nursing. We look forward to working with you!
Minimum Requirements for Freshman Entry Pathway into Nursing Program

1. First-time Freshman. Apply to Cleveland State University, School of Nursing. Contact Campus411 at (216) 687-5411 or apply online at www.csuohio.edu.

2. Minimum of 3.0 GPA in high school, with grades of B or better in biology and chemistry.

3. 13 core units of college preparatory classes, including biology with lab, chemistry with lab.

4. Two School of Nursing Freshman Entry Pathway recommendation forms completed by a high school teacher, counselor or coach.

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Name: __________________________________________________________

__________________________________________
Last               First               Middle

Address: __________________________________________________________

Street          City          State          Zip Code

Telephone: (_____) _________ Email:______________________________

CSU I.D. Number (if applicable):____________________________________

Citizenship: ____U.S. ____Other         Ohio Resident for past 5 years? ____Yes  ____No

I am applying for Freshman Entry Pathway into Nursing Program:

☐ Fall 20______ Track

The following questions bear upon your ability to take the National Council Licensure Examination (NCLEX) to become a registered nurse in the State of Ohio. The answers to these questions are not utilized to determine admission to the Nursing Program. Should you be admitted to the Nursing Program and you have answered “yes” to any of the questions, you will be advised of additional procedures. Please answer each question.

1. Have you ever been convicted, adjudged guilty by a court, pled guilty or pled no contest to any felony?  ____Y  ____N

2. Have you ever been convicted, adjudged guilty by a court, pled guilty or pled no contest to any misdemeanor resulting from or related to the use of drugs?  ____Y  ____N

3. Has any State Board of Nursing denied you licensure or admission to a licensure examination?  ____Y  ____N

4. Have you ever received a reprimand, been placed on probation, or has your professional license been suspended or revoked?  ____Y  ____N

Please Note: It is your responsibility to make certain that your application is complete, that the School of Nursing has received all required application documents, and that you have been formally admitted to Cleveland State University. If you would like to verify that all of your School of Nursing application materials have been received, you may call 216-687-3598 and inquire. The School of Nursing does not contact applicants to inform them of the status of their applications.

I certify that the information provided herein is true and complete to the best of my knowledge.

__________________________________________
Signature                       Date

Mailing Address: Cleveland State University * School of Nursing * 2121 Euclid Avenue JH 238 * Cleveland, Ohio 44115-2214
Recommendation Form for Freshman Entry Pathway into Nursing Program Applicants

To The Applicant:
Complete the following items on this form and forward it directly to a teacher, counselor, or coach. The person making your recommendation should not be a relative or someone who is not familiar with your academic work. To expedite the processing of your application, you may wish to provide the respondent with a pre-addressed envelope. All recommendation forms must be returned to the School of Nursing in a sealed envelope.

Name of Applicant

(Last) (First) (Middle or Maiden)

CSU ID:

Family Privacy Act-Statement on Confidentiality of Recommendation:

☐ I desire that this recommendation be accessible to me after final admission and matriculation under the provisions of the Family Privacy Act.

☐ I desire that this recommendation be considered as confidential and hereby waive my right of access to this form following final admission and matriculation.

Applicant’s Signature ____________________________________________________________________________ Date: ________________

To The Respondent:
The above named person has made application for early admission to a program of study leading to the BSN degree at Cleveland State University, and is requesting you to serve as a reference. Please comment on the following.

Circle the number (using the following scale) that represents the applicant’s demonstration of the quality in relation to others with whom you have worked/supervised (in a classroom or team setting).

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<td>Below Average</td>
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</tbody>
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Ability to work with others

Communication - Expresses ideas succinctly and logically in writing ............ 1 2 3 4 5 N
- Expresses ideas succinctly and logically when speaking.... 1 2 3 4 5 N

Cooperation - Works collaboratively with peers and others.......................... 1 2 3 4 5 N

Work With Others - Establishes effective interpersonal relationships with others. .......................................................... 1 2 3 4 5 N
### Work Under Stress
- Accomplishes goals in situations that are stressful

### Sensitivity To Others
- Is alert to and considerate of needs of others

### Intellectual Ability

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<tr>
<th>Characteristics</th>
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<th>Notes</th>
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### Student Characteristics/Work Habits

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Please include additional comments below:

____________________________________________________________________

____________________________________________________________________

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### To be completed by the person serving as a recommendation:

Name:  
Position:  
I have known the student from: ________________ to ________________

Your relationship to the applicant: ____________________________

Are you a relative of the applicant?  No □  Yes □  relationship _____________________________

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

School of Nursing  
Attn: Freshman Entry Pathway Recommendation  
Cleveland State University  
2121 Euclid Avenue, JH 238  
Cleveland, Ohio 44115-2214
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