

ARKANSAS STATE UNIVERSITY- JONESBORO
COLLEGE OF NURSING AND HEALTH PROFESSIONS
DEPARTMENT OF HEALTH STUDIES

APPLICATION INFORMATION

THANK YOU FOR YOUR INTEREST IN A-STATE'S HEALTH STUDIES PROGRAM. PLEASE BE SURE THAT YOU HAVE COMPLETED EVERY STEP BELOW, AND THAT YOU HAVE ENCLOSED ALL DOCUMENTS BEFORE SUBMITTING YOUR APPLICATION. STUDENTS APPLYING TO THE HEALTH STUDIES PROGRAM MUST ALSO APPLY FOR ADMISSION TO ARKANSAS STATE UNIVERSITY. CONTACT THE OFFICE OF ADMISSIONS AND RECORDS, P. O. BOX 1630, STATE UNIVERSITY (JONESBORO), AR 72467 OR PHONE (870) 972-3024. IF YOUR CGPA IS BELOW 2.5, YOU ARE NOT ELIGIBLE FOR ADMISSION AT THIS TIME.

Application materials must be received by March 15 for consideration for fall semester admission. Letters of official admission into the BSHS Program will be mailed by April 1 for fall registration.

NOTES ON THE APPLICATION AND SELECTION PROCESS

- 01 The submitted application packet is to consist of a completed application form and college/university transcripts of all college work attempted.
- 02 Applications are not reviewed on a first come/first served basis.
- 03 The minimum cumulative grade point average (CGPA) for admission is 2.50.
- 04 Factors considered in the application process include the following:
 - A. Cumulative grade point average:
 - Worth up to 35 points of possible 100 points for BS in HS application.
 - B. Support course grades/Required Classes preadmission:
 - Worth up to 35 points of possible 100 points for BS in HS application
 - Support courses include Anatomy & Physiology I with Laboratory, Physical Science and Laboratory, College Algebra or Plane Trigonometry (for Professional Tack), Introduction to Psychology, Introduction to the U.S. Healthcare System.
 - Grade of A = 4 points, B = 3 points, C = 2 points for each support course
 - C. Completed writing skills assessment:
 - Worth up to 30 points of possible 100 points for BS in HS application.
 - **Will be scheduled prior to the application due date; to schedule your assessment please contact Ashley Walls at awalls@astate.edu or (870) 972-3713.**
- 05 Applications received after March 15th will not be accepted.
- 06 Completion of or current enrollment in all support courses with a grade of "C" or better.

07 Foreign-born applicants must submit test scores of English proficiency with their application. English proficiency documentation includes one of the following:

- A. Test of English as a Foreign Language (TOEFL) – minimum score of 83 on the preferred internet-based test (iBT), 570 on the paper-based test, or 213 on the computer-based test
- B. International English Language Testing System (IELTS) – minimum score of 6.5 and a spoken band score of 7
- C. Pearson Test of English Academic (PTE) – minimum score of 56

Only a completed application packet, consisting of the application form and transcripts of all college and/or high school work attempted, will be accepted for review. The application may be taken to Eugene W. Smith Hall - Room 101, or mailed to the following address:

Health Studies Department
College of Nursing and Health Professions
Arkansas State University - Jonesboro
Attention: BSHS Program Director
P. O. Box 910
State University, AR 72467

Arkansas State University is an equal opportunity institution and will not discriminate on the basis of race, color, religion, sex, national origin, age, impediment/disability, or unlawful factors in the admission and treatment of students.

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APPLICATION FORM

An application for admission to Arkansas State University - Jonesboro:

has been submitted OR

is being submitted to the Office of Admissions and Records, P.O. Box 1630, State University, AR 72467 (phone 870-972-3024).

Date of submission (month _____, day _____, year_____).

Current student of A-State Jonesboro

Name: _____
Last First Middle

A-State ID#: _____ - _____ - _____ Phone Number: _____
(current A-State Student)

Present Address: _____

_____ City State Zip

Permanent Address: _____
(if different)

_____ City State Zip

Notification of admission decision should be sent to (check one) _____ present address or _____ permanent address. If applicant does not indicate a choice, notification will be sent to the first address given.

Email: A-State: _____

Other: _____

High School/Home town: _____

List all colleges, universities or other secondary institutions attended since high school, credits earned, and degree(s) if applicable. Submit transcripts from each institution.

College/University	# Credits/Degree	Date Attended

Do you have proficiency in another language? No Spanish Other: _____

Were you born in a foreign country? Yes No If yes, what country? _____

All applicants, please respond to the following question:

Do you have work experience in a health care institution? If so, briefly describe:

All applicants, please read the following statement, sign, and date:

I hereby affirm that all information supplied on this application is complete and accurate. It is my understanding that I will not be considered for admission to this program until I have submitted all credentials specified.

Signature

Date

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