



DOCTOR OF NURSING PRACTICE PROGRAM

Graduate Application and
Admission Information **2016**

College of
Health
Professions

PACE
UNIVERSITY

Work toward greatness.

APPLICATION INSTRUCTIONS FOR THE FALL 2016 COHORT GROUP

Please complete and mail your application to the Office of Graduate Admission. Be sure to sign the last page of the application and all additional papers. For more information, please contact nursing@pace.edu or call (914) 773-3552. To check the status of your application visit applicantportal.pace.edu

Office of Graduate Admission
Pace University
One Martine Avenue
White Plains, NY 10606-1932 USA

Phone: (914) 422-4283
Fax: (914) 422-4287
E-mail: graduateadmission@pace.edu

Please submit the following:

APPLICATION APPLICATION FEE	Applications may be printed or typed and must be accompanied by the nonrefundable application fee in the form of a check or money order in US dollars payable to Pace University.
RESUME	Please submit a resume that outlines your work history and professional experience.
PERSONAL STATEMENT	Send a two-page typewritten essay displaying to the members of the Graduate Admission Committee your exceptional conceptual skills and goals for completing the Doctor of Nursing Practice. It should: <ul style="list-style-type: none"> • Be submitted in Arial or Times New Roman, 12-pt font size, with one-inch margins, double-spaced. • Have the applicant's name and the title of her/his statement.
LETTERS OF RECOMMENDATION	Submit two letters of recommendation that describe your (advanced) clinical practice, potential for achievement in graduate study, and potential for professional achievement. The letters of recommendation should address your intellectual ability, how well you work with others, written and communication skills, maturity, initiative/independence, and creativity/originality.
OFFICIAL TRANSCRIPTS	Please arrange for an official transcript from each academic institution you have attended to be sent directly to the Office of Graduate Admission. Transcripts are considered official if they are sent directly from the academic institution(s) to Pace University, or if you submit them unopened and in the institution's original sealed envelope.
	Students must complete the FNP-DNP or AACNP-DNP program with a total of 1,000 supervised practice hours. The number of supervised master's advanced practice hours will be assessed, and if those hours plus the 450 supervised practice hours in the DNP program are less than 1,000 hours, plans will be made for accepted candidates to complete those hours within the DNP program.
ADMISSION CRITERIA	<ul style="list-style-type: none"> • Be a graduate of an accredited advanced practice nursing master's degree program • Have a minimum GPA of 3.3 in a master's degree program in nursing or equivalent professional experience • Be licensed as a registered nurse in New York State, state certified and board eligible as a Family Nurse Practitioner (FNP)* or Adult Acute Care Nurse Practitioner (AACNP) • No standardized admission test (GRE or Miller Analogy) required
APPLICATION DEADLINE	Admission to the DNP program is highly competitive. All applications must be completed and submitted by March 1, 2016 , for priority consideration for this cohort class of no more than 24 students. Applications received after March 1, 2016, until April 15, 2016**, will be considered on a space-available basis.

Note: All documents submitted in support of an application for admission become the permanent possession of Pace University and cannot be returned to the applicant or photocopied for the applicant. For your records, please make photocopies of all materials submitted, except for transcripts and recommendation forms, which must be received unopened, in the original, sealed envelopes.

**Although the Pace DNP program is designed for FNPs, we now have an option for adult, pediatric, geriatric, and women's health master's-prepared nurse practitioners who wish to obtain FNP certification as an FNP-DNP. If you are interested in this option, you will need to meet with the FNP-DNP program director who will conduct a gap analysis to determine what additional clinical courses will be required.*

*** Or until classes are filled.*

Are you a permanent resident of the United States? ☐ Yes ☐ No

 Accelerated Admission Day Event	 Financial Aid/Scholarship Offerings	 Recommendation from Current Pace Student
 Attended a Pace Information Session	 Information on Pace Website	 Recommendation from Pace Alumni
 Campus Location	 Online Chat with Department/Admissions	 Recommendation from Pace Faculty/Staff Member
 Career Services and Internship Program	 Phone or In-Person Meeting with Pace Admission Counselor	 Recommendation from Employer
 College or Professional Fair		 Tour of Pace University Campus
 Course Offerings	 School Publication Received in the Mail	 Attended a Special Event with Chosen Program

Institution Attended		Start Date (MM/YY)	End Date (MM/YY)	Date or Expected Date of Degree (MM/YY)	Degree Received:
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Have you ever been convicted of or plead guilty to a misdemeanor or felony? Yes No
If yes, please explain on a separate piece of paper (response required).

State	License Number	State	License Number
State	License Number		

CURRENT CERTIFICATION:

Are you currently a certified family nurse practitioner?

☐ Yes☐ No*

Are you currently a certified adult acute care nurse practitioner?

☐ Yes☐ No

If no, indicate nurse practitioner specialty _____

Please list all current certifications:

Certification _____ Certifying Organization _____ Certification Number _____

Certification _____ Certifying Organization _____ Certification Number _____

Certification _____ Certifying Organization _____ Certification Number _____

Certification _____ Certifying Organization _____ Certification Number _____

Certification _____ Certifying Organization _____ Certification Number _____

Certification _____ Certifying Organization _____ Certification Number _____

Please list the names of other DNP programs to which you are applying:

A personal statement, resume, and two recommendations are required. Please refer to page 1 of this booklet.

I certify that all of the information provided by me or on my behalf in support of my application for admission is complete and accurate. I acknowledge that I am obligated to supplement my application as soon as I know or reasonably should know if the information I have provided or that was provided on my behalf is inaccurate or incomplete. I also certify that the personal statement submitted in support of my application for admission is solely my own original work. I acknowledge that Pace University may, at its sole discretion, verify any information submitted in conjunction with my application. I acknowledge that if I omit relevant information or provide inaccurate information or information that is misleading, submit a personal statement that is not solely my own original work, or if I fail to supplement my application as required, Pace University may, at its sole discretion, deny my application for admission, rescind my admission, impose disciplinary sanctions against me, dismiss me from Pace University, and/or rescind any degrees or certificates awarded to me by Pace University.

I acknowledge that the application fee I have paid or will pay in the future is not refundable.

I acknowledge that I am bound by the policies, practices, and procedures of Pace University, whether published or unpublished, and I agree to comply with them.

Applicant's Signature _____

Date (MM/DD/YYYY) _____

Please print name _____

Non-Discrimination Statement

Pace University prohibits and will not tolerate discrimination or harassment in any of its programs or activities on the basis of sex, race, color, national origin, religion, creed, age, disability, citizenship, marital status, sexual orientation, genetic predisposition or carrier status, veteran status, or any other characteristic protected by law. Pace University's Affirmative Action Officer has been designated to handle inquiries regarding the University's non-discrimination and harassment policy and may be contacted at 156 William Street, New York, New York 10038, (212) 346-1310, or at Costello House, 861 Bedford Road, Pleasantville, New York 10570 (914) 773-3856.

Reasonable Accommodations

Pace University prohibits discrimination on the basis of disability and is committed to ensuring equal access to the application process for applicants with disabilities. An applicant who may require a reasonable accommodation in order to complete the application process should contact the Director of Disability Services on either the New York City (212) 346-1526 or Westchester Campus (914) 773-3710.

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FOR OFFICE USE ONLY

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APP REC DATE (MM/DD/YYYY)

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FEE REC DATE (MM/DD/YYYY)

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