

Master of Nursing/Master of Science in Nursing Supplemental Application

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| Name  |  |
| Practice Areas of Interest  | A variety of clinical theory courses will be offered each year, contingent on faculty resources and student interest. Please indicate the clinical population(s) or nursing issues you wish to study.  |
| Program option (check one)  | <p>Nurse Practitioner <input type="checkbox"/></p> <p>Professional Stream <input type="checkbox"/></p> <p>Thesis <input type="checkbox"/></p> <p>Note: It is required that applicants for the Nurse Practitioner option complete full-time study when undertaking NURS5620.06, Advanced Practice Role Practicum</p>  |
| Current nursing registration  | <p>Please indicate where you are currently registered to practice nursing:</p> <p>Province/country:</p> <p>Year:</p> <p>Licence Number:</p>  |
| Reasons and objectives for graduate studies in nursing – on a separate page(s), address the following questions | <p>a) What are your short- and long-term goals?</p> <p>b) Describe an experience that you have had in your nursing practice in which you felt challenged in some way or that had meaning for you. Briefly describe the questions this experience raised for you and how you think graduate education will help or influence your response in a similar experience in future.</p> |