BLESSING-RIEMAN
College of Nursing & Health Sciences

Application for Undergraduate Admission

Program Pathway: ☐ Quincy University ☐ Culver-Stockton College ☐ Direct Transfer ☐ Second Degree
Program Applying to: ☐ Diagnostic Medical Sonography ☐ Medical Laboratory Science ☐ Nursing
☐ Radiologic Science ☐ Respiratory Care ☐ RN-BSN (*Current RN's Only*) ☐ RRT-BSRT (*Current RRT's Only*)

Planned entrance date: ☐ Spring 20____ ☐ Summer 20____ ☐ Fall 20____

Full Legal Name:_____
First Middle Last Maiden

Preferred Name: _____

Social Security Number (optional) :_____ **Date of Birth**:_____
(SSN used for Financial Aid processing)

Permanent Address: _____

_____
City State Zip Code County

Cell Phone:( )_____ **Personal Email Address**:_____

Did you attend Explore Nursing/Explore Health Sciences camp? ☐ Yes ☐ No

I am a US citizen: ☐ YES ☐ NO **If no, country of citizenship**_____

What is your primary language? _____

Ethnicity (Optional): Please check all that apply.

☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American

☐ Hispanic or Latino ☐ Middle Eastern or North African ☐ Native Hawaiian or Pacific Islander

☐ White ☐ Prefer not to respond

Gender (at birth): ☐ Male ☐ Female **Gender Identity**: ☐ Male ☐ Female ☐ Non-Binary/Other

How did you hear about Blessing-Rieman College? _____

_____

List all high schools and colleges/universities attended: _____

_____

_____ _____
Signature Date