



APP# \_\_\_\_\_

Select the cohort for which you are applying. Only **ONE** cohort may be selected each application cycle

I am applying for the (Select **ONE** of the following)

<input type="checkbox"/> Fall 2026 – Spring 2028 Traditional Cohort, Eunice Campus	<input type="checkbox"/> Fall 2026 – Fall 2027 LPN-ASN Cohort, Lafayette Campus
<input type="checkbox"/> Fall 2026 – Fall 2027 Evening/Weekend Cohort, Lafayette Campus	

**GENERAL INFORMATION:** This application is for admission to the Nursing Program. By completing this application, you are seeking admission to the clinical portion of this program. All applications must be received by **March 1**. If you have any questions regarding this application, please call 337-550-1363 or email [kwalton@lsue.edu](mailto:kwalton@lsue.edu).

A Program Application Review and Q&A Zoom session will be held every Tuesday beginning on February 3. Register for a session at <https://lsue.zoom.us/meeting/register/xhAiOqeISYqct2g-XtMZxw>

## INSTRUCTIONS

1. Fill out the application in its entirety and return it to the Health Sciences office, T-104 by **March 1**. Mailed applications are accepted ONLY if you are NOT currently attending LSUE as a student and are unable to drop off the application in person. The application must arrive by **March 1** to be considered for the **Fall 2026** cohort. The mailing address is

Louisiana State University Eunice,  
Health Sciences & Business Technology  
PO BOX 1129  
Eunice, LA 70535

Include an unofficial copy of ALL transcripts from colleges/universities you have attended and have official copies submitted to LSUE Admissions before the deadline for applications. If you are currently enrolled in a university other than LSUE, provide an unofficial copy of the transcript to the Health Science Department **immediately** following the posting of final grades. Final grades must be received before the program selection date. Official transcripts must be received by LSUE Admission as soon as possible.

2. If you are not currently enrolled or taking classes at LSU Eunice, you must apply for general admission. Contact the Office of Admissions or register online at [www.lsue.edu](http://www.lsue.edu). Full admission to LSU Eunice must be completed prior to submitting an application to the nursing program. Applicants listed as "inactive" in Workday will not have their application considered for the term being sought. It is the applicant's responsibility to ensure their Workday status is active prior to the application deadline.

**NOTE:** There will be a \$25.00 general admission application fee. The application must be completed by **March 1**. The University will collect the \$25.00 fee. Do not submit the fee with your application materials.

3. Attach ALL supporting documents or this application will be rendered incomplete, and you will not be considered for admission.
4. Please review the information regarding Financial Aid.
5. All applicants must take the NLN NEX Assessment Examination. **To meet eligibility requirements, applicants must attain a minimum composite score of 150 and individual section scores of 40 on the entrance exam.** Please refer to the information included in this packet for registration information for the entrance examination. **The exam must be paid for AND scheduled by March 1.**

**PROVIDE PROOF OF PAYMENT FOR THE EXAM FROM THE NLN AND PROOF OF YOUR SCHEDULED EXAM FROM THE LSUE TESTING CENTER WITH YOUR APPLICATION.**

# LSUE

## NURSING PROGRAM APPLICATION

NOTE: The NLN NEX can be taken **ONCE** per application period. For reapplicants, previous NLN NEX scores will be accepted for 365 days from the date last taken to the date of this selection.

6. Attend the post-selection orientation session on Monday May 18 from 12p-3p on the Eunice Campus.
7. Successful completion of the following pre-requisite course is required by the end of **Spring 2026** to be eligible to apply for this selection.

ENG1001	English Composition	3 credit hours
ENG1002	English Composition	3 credit hours
MTH1015	Applied College Algebra	3 credit hours
PSYC2070	Development Psychology of the Life Span	3 credit hours
BIO1160 & 1161	Human Anatomy & Human Anatomy Lab	4 credit hours
BIOL2160 & 2161	Human Physiology & Human Physiology Lab	4 credit hours
BIOL1011 & 1012	Microbiology and Microbiology Lab	4 credit hours
NURS1000	Introduction to Nursing (Traditional Track ONLY)	1 credit hour

Additional general education courses are required to graduate from the program. Review the Nursing Program Curriculum in the LSUE catalog for a full list of courses needed to graduate.

8. **LPN-ASN Transition Program applicants** must hold a valid, unencumbered Louisiana LPN license and have at least **one year** of acute care experience by the time of selection. **NOTE:** Acute care experience is **defined** as direct patient care in settings such as hospitals, emergency rooms, urgent care centers, nursing home, and/or skilled nursing facilities, where patients receive treatment for acute and/or chronic conditions. Key responsibilities include monitoring vital signs, administering medications, assisting with ADLs, responding to changes in patient condition, and collaborating with healthcare teams.
9. Upon acceptance into the Nursing Program, a mandatory drug screen and background check (LSBN) will be required.
10. It is the right and privilege of a clinical site to request that a drug screen be performed prior to beginning (or at any time during) the clinical rotation in any facility. Failure to participate in any such drug screen is grounds for dismissal from the Nursing Program.
11. **Louisiana State Board of Nursing (LSBN) applications** will be processed electronically through their portal if you are accepted into the nursing program. Instructions for completing the application will be provided once final selections are made.

**Fingerprinting and Criminal Background Checks:** The LSBN application will be processed through their portal if you are accepted into the Nursing Program. Instructions regarding fingerprinting and the Criminal Background Check will be provided at the Nursing Selection Orientation session.

12. By signing below, I authorize Louisiana State University Eunice to obtain and utilize records of the Code of Conduct and policy violations as part of the selection process into the Nursing Program

**CERTIFICATION:** I certify that I have read this application and instructions and that to the best of my knowledge the information given is correct and complete. I understand that if any information is incorrect or false, my application will be invalid. I understand that before an application is considered, completed applications, fees, and all scholastic records must be on file at the LSUE Registrar's office and the Nursing office in the Division of Health Sciences and Business Technology.

Student Signature \_\_\_\_\_ Workday ID# \_\_\_\_\_ Date \_\_\_\_\_

**LSUE**  
NURSING PROGRAM APPLICATION

Name \_\_\_\_\_ Gender \_\_\_\_\_  M  F  
Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

List any other names under which your records may be filed \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Cell Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Personal email \_\_\_\_\_ School email \_\_\_\_\_

Marital Status  Single  Married  Separated  Divorced

Work Status  Full time  Part Time  None

Ethnicity \_\_\_\_\_ Age as of January 18, 2024 \_\_\_\_\_

<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> 17-20
<input type="checkbox"/> Asian	<input type="checkbox"/> 21-25
<input type="checkbox"/> Black/African American	<input type="checkbox"/> 26-30
<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> 31-40
<input type="checkbox"/> Native Hawaiian or Pacific Islander	<input type="checkbox"/> 41-50
<input type="checkbox"/> White/Caucasian	<input type="checkbox"/> 51-60
<input type="checkbox"/> Two or More Races	<input type="checkbox"/> 61 or older
<input type="checkbox"/> Other/Unknown	

PLEASE NOTE: Selection into the ASN or LPN-ASN program is done anonymously, with de-identified data (i.e. does not include names, location, credentials, etc.). The information requested above is for university purposes and is collected to assist in reporting data to the Accreditation Commission for Education in Nursing (ACEN).

Number of times you have previously applied to the LSUE Nursing Program \_\_\_\_\_

Are you currently enrolled in another college or university?  Yes  No

If yes, please specify institution \_\_\_\_\_

**ALL TRANSCRIPTS FROM OTHER COLLEGES/UNIVERSITIES MUST BE SENT TO HEALTH SCIENCE AS SOON AS POSSIBLE. OFFICIAL TRANSCRIPTS MUST BE ON FILE IN THE ADMISSIONS OFFICE.**

List all the colleges, universities, or hospital-based programs you have previously attended in chronological order. All institutions must be listed regardless of whether credit was earned or desired. Failure to indicate attendance at another institution may result in admission being denied or subsequent dismissal.

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Have you completed all the prerequisites for the Nursing Program?  Yes  No

Will you be complete with prerequisites in the Spring semester of the application period?  Yes  No

List all the courses in which you are currently enrolled \_\_\_\_\_

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#### **DOCUMENTATION OF HEALTHCARE RELATED OR FULL TIME WORK**

If applicable, please list and submit a letter from your employer (on company letterhead) stating the date of hire and daily responsibilities or tasks addressed to the Program Director. Note: Letters of recommendation will not be accepted or utilized.

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#### **DOCUMENTATION OF DEGREE/CERTIFICATE/LICENSURE**

Please list all applicable credentials and attach a copy of documentation to validate your credentials.

Professional Credentials: \_\_\_\_\_

Degree(s): \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

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Date Received: \_\_\_\_\_ Accepted: \_\_\_\_\_ Alt # \_\_\_\_\_



## NURSING PROGRAM SELECTION PROCESS ATTESTATION

I have been informed that:

1. Failure to follow instructions on the Nursing Program Application will not be considered.
2. To be considered by the Selection Committee, I must have applied to and been accepted by LSUE. Full admission to LSU Eunice must be completed **prior** to applying to the nursing program. Applicants listed as "inactive" in Workday will not have their application considered for the term being sought. It is the applicant's responsibility to ensure their Workday status is active prior to the application deadline.
3. I must have academic records from the current semester in the LSUE Office of Health Sciences and Business Technology in the health Technology Building prior to the meeting of the Selection Committee or my application will be considered incomplete.
4. Selection to the Nursing Program is competitive and I have read the selection criteria.
5. I am responsible for travel associated with clinical practice.
6. I may be assigned to any clinical affiliate contracted by the program. I understand that placement of my clinical assignment is based on availability of clinical sites, faculty resources, and the ability to meet course and program learning objectives. Assignments are tentative and subject to change at the discretion of the clinical agencies and/or assigned clinical faculty. Clinical placement may be up to an hour away from the home campus in which I attend. Clinicals are scheduled on days, evenings, nights, weekends, and/or on holidays. Clinical hours may consist of 6-, 8-, or 12-hour shifts. Clinical rotations are not altered for personal obligations including but not limited to current employment schedule, childcare, etc. Attending orientation at my assigned clinical education setting is required.
7. I am responsible for submitting specific immunization and health records. I am subject to a drug test and submitting a criminal background check form at my own expense.
8. I may obtain financial assistance from the Office of Financial Aid.
9. I understand the importance of attending professional meetings once selected into the program.
10. **LPN-ASN Transition Program applicants** must hold a valid, unencumbered Louisiana LPN license and have at least **one year** of acute care experience by the time of selection. **NOTE:** Acute care experience is **defined** as direct patient care in settings such as hospitals, emergency rooms, urgent care centers, nursing home, and/or skilled nursing facilities, where patients receive treatment for acute and/or chronic conditions. Key responsibilities include monitoring vital signs, administering medications, assisting with ADLs, responding to changes in patient condition, and collaborating with healthcare teams.

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Please print your name clearly

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Primary phone number

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Applicant's Signature

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Secondary phone number

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Date

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Personal E-mail address

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School E-mail address



**DIVISION OF HEALTH SCIENCES, BUSINESS TECHNOLOGY, PUBLIC SAFETY & PROTECTION  
AUTHORIZATION TO DISCLOSE CRIMINAL HISTORY RECORDS INFORMATION**

I give LOUISIANA STATE UNIVERSITY at EUNICE authorization to disclose all criminal history records information to selected health care agencies providing clinical nursing practice experiences required for completion of the ASN degree at LOUISIANA STATE UNIVERSITY EUNICE.

I authorize Louisiana State University at Eunice to obtain and utilize records of the Code of Conduct and Policy violations as part of the selection process into the Nursing Program.

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Print Name

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Workday ID#

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Signature

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Date



**PLEASE KEEP THIS FOR YOUR RECORDS**

**DO NOT TURN IN WITH YOUR APPLICATION**

**IMPORTANT! PLEASE READ**

**ATTENTION APPLICANTS FOR CLINICAL PROGRAMS**

- You must complete the correct FAFSA for the year you wish to apply. (Example: If you are applying for the Spring 2025 class, you must file the 2024-2025 FAFSA form).
- If you are relying on financial aid to pay your fees, you are STRONGLY urged to complete your FAFSA and submit all requested documents by **March 1**. Failure to meet this deadline may require you to be responsible for ALL required fees (tuition, books, supplies, etc.).
- You must submit a Financial Aid Appeal (<https://www.lsue.edu/studentaffairs/finaidappeals.php>) if you have attempted over 123 hours which include any withdrawals (W), course failure (F), or academic bankruptcy. For more information go to <https://www.lsue.edu/studentaffairs/finaidappeals.php>
- You must be fully admitted to the University. You must submit to the LSU Eunice Office of Admission official transcripts from EVERY college or university at which you were previously enrolled.
- You must continue to check the status of your financial aid in your Workday account for current updates or notifications regarding your file.



### **Health Sciences Divisional Policy Updates (Effective 8/2024)**

Admission into any selective LSUE Health Science program (Nursing, Radiologic Technology, Respiratory Care, Diagnostic Medical Sonography, Surgical Technology) will be limited to two (2) admissions into any program in which the student has started the program but has unsuccessfully completed the program. This restriction applies to whether the student has voluntarily withdrawn from a program or has not met the required objectives necessary for program progression. This policy applies to students who have attempted the same program twice or who have attempted two different programs. This policy does not apply to students who have declined admission into a selective program after selection but before entering programmatic courses. Students wishing to apply for selection for a third entry and attempt in any selective LSUE Health Science program must wait a minimum of 5 years to reapply.

Students dismissed from any selective LSUE Health Science program for violations to the LSUE Student Code of Conduct or violations to any Program Policy(s) may not be allowed to reapply for selection into any selective LSUE Health Science program. A written request for appeal may be submitted to the Dean of Health Sciences, Business & Technology, and Public Protection and Safety for special consideration.

Transfer and re-entry students seeking selection into Health Science programs will have their transcripts evaluated for approved credit. The following guidelines will be applied to transfer and reentry credits for students seeking entry into one of the competitive Health Science programs:

- Math, Natural Science, and Medical Terminology courses must be less than 7 years of age at the time of re- entry or transfer.
- Courses other than Math, Natural Science, and Medical Terminology must be less than 10 years of age at the time of re-entry or transfer or have approval from the Dean of Health Sciences, Business & Technology, and Public Protection and Safety



### NLN NEX Instructions

ALL applicants are required to take the NLN NEX test. Please follow the instructions found in this application. Any questions about purchasing the exam or creating an account with NLN should be directed to NLN Assessment Services Monday-Friday 8am-5pm EST. 1-800-732-8656 Ext #2 or text 202-934-0801 to reach Customer Experience

#### HOW IS THE TEST GIVEN?

The test is a computerized examination, purchased through NLN and administered in the LSUE Testing Center, in the Library (100-C) on the LSUE campus. There will be no proctored testing from outside of the Testing Center. Students must purchase the exam through NLN as well as pay to reserve a test date with the Testing Center. There are three sections of the exam (Verbal, Math, and Science). You will have 60 minutes to complete each section.

**A minimum composite score of 150 and individual section scores of 40 on the entrance exam must be achieved to be eligible to apply.**

#### HOW MUCH DOES THE TEST COST? (PRICES ARE SUBJECT TO CHANGE)

Exam Cost (NLN): \$52.50

Testing Center Fee: \$15.00

#### HOW DO I STUDY FOR THE TEST?

NEX study materials are available from the NLN at <https://www.nln.org/education/assessment-services/student-resources>

#### TESTING CENTER ADMISSION & REQUIREMENTS

Please report to the LSUE Library, Room 100-C, at least 15 minutes prior to your scheduled testing time. To maintain the integrity of the testing environment, please adhere to the following policies:

- **Punctuality: Late arrivals will not be permitted to test.** Students who miss their scheduled testing window will not be admitted to the Testing Center.
- **Rescheduling:** If you miss your test, you must contact and schedule an appointment with the Program Director(s) for each specific program to which you are applying for selection.
- **Required Materials:**
  - **Identification:** You must present a valid, physical photo ID. Digital IDs on phones are not acceptable.
  - Please bring two standard, sharpened, wooden (#2) pencils.
- **Prohibited Items:**
  - Cell Phones and electronic devices, including flash drives and smart devices
  - Mechanical Pencils, Pens, Notes, Books
  - Calculators
  - Smart watches/Smart glasses
  - Food beverages, gum, water bottles
  - Hats, caps, and other headgear
  - Carried-in clothing
  - Bags, backpacks, purses

**NOTE:** If you already have an account, begin with step 8 to purchase the NLN NEX Exam  
**DO NOT CREATE MULTIPLE ACCOUNTS**

NOTE: NLN Assessment Services has changed testing platform providers and is in the process of moving scores to [the new site](#). Students with previous NLN accounts will need to create a NEW account using the same email address as the old account in order to access scores.

#### HOW TO CREATE AN ACCOUNT WITH NLN

1. Navigate to the Assessment Services landing page: <https://www.nln.org/education/assessment-services>
2. Select the link **LOG IN TO THE STUDENT TESTING WEBSITE**
3. Select the **Sign-Up** link in the upper right corner.
4. Enter your name, email address, password, and institution
5. Click **Sign-Up**.

#### HOW TO PURCHASE THE NLN NEX EXAM

6. Log in to your student account at <https://nln.assess.com>
7. Select **STORE**
8. Ensure you have selected the correct exam and **Onsite**
9. Select **Learn More**
10. Select **Add to Cart**
11. Select **View Cart**
12. The NLN has a strict **NO REFUND** policy. Ensure you have chosen the correct exam BEFORE completing your checkout. Once a purchase is made, it is final. **NO REFUNDS**.
13. Select **Proceed to Checkout**
14. Select **Confirm Purchase**
15. Enter your **credit card information**
16. Select **Proceed to Checkout**
17. You will receive a “**Payment successful**” message indicating that you have made your purchase. A confirmation email and printable receipt.
18. Select “**Go to Purchases**” to view your exam registration.
19. Print a copy of your receipt to include with your application.
20. **The exam MUST be paid for AND scheduled by March 1 for the Spring administration and September 14 for the Fall administration.**
21. Continue with the instructions below to reserve your seat in the LSUE Testing Center.

**Proof of purchase of the NLN NEX Exam and email confirmation from the LSUE Testing Center of the scheduled exam is required at the time of application submission.**

#### HOW TO SCHEDULE WITH THE LSUE TESTING CENTER (SEATING IS LIMITED. PLEASE SCHEDULE EARLY FOR MORE OPTIONS)

Go to the LSUE Testing Center Website at <https://www.lsue.edu/testing-center/> to schedule and pay for the proctoring of the NLN NEX Exam.

Under “Testing” select “Schedule an Exam”

22. Choose a group: select “LSUE Student”
23. Choose a group: select “NEX (Nursing Entrance Exam)”
24. Choose an exam: select “NEX” (\$15.00)
25. Choose a date: Choose the same date that you purchased (see your NEX receipt)
26. Choose a time: Choose the same time that you purchased (see your NEX receipt)
27. Name, Email, LSUE Student ID Number, Phone Number
28. Agree to the Exam Guidelines Acknowledgement
29. Add to cart
30. Check out to complete the registration process. Make sure you receive an email confirmation of your appointment
31. Print one copy of your receipt to include with your application

You must have created an account with NLN and **purchased the exam BEFORE scheduling** with the Testing Center.

**If you do not schedule your exam for the same day and time that you purchased on the NEX site, your registration will be deleted, and fees will be forfeited.**

# **LSUE**

## **NURSING PROGRAM APPLICATION**

### **FOR YOUR INFORMATION ONLY**

**Louisiana State Board of Nursing**  
17373 Perkins Road, Baton Rouge, LA 70810  
Telephone: 225-755-7500 [www.lsbn.state.la.us](http://www.lsbn.state.la.us)

### **FINGERPRINT INSTRUCTIONS FOR CRIMINAL BACKGROUND CHECK (CBC)**

**DO NOT COMPLETE THIS PROCESS UNTIL AFTER YOU ARE SELECTED INTO THE NURSING PROGRAM AND YOU COMPLETE YOUR APPLICATION IN THE LSBN PORTAL**

#### **LSBN BACKGROUND CHECK PROCEDURES FOR APPLICANTS**

As of November 1, 2024, the Louisiana State Board of Nursing will be using a new statewide applicant processing system for criminal background checks. As a part of the new process, applicants will be required to schedule a fingerprint appointment at a location of their choice with the Identogo/Idemia company.

##### **For in-state applicants**

1. To do this, please go to <https://uenroll.identogo.com/> use the following unique service code **27N3YH** which allows the system to identify which agency is requesting the background check. You must enter this code when registering. If you do not do so you will not be able to proceed. You are requesting a state and federal background check.
2. Select “Schedule or manage an appointment.” Make an appointment at an office location and time that is convenient for you. This is a very simple process where you enter basic information and then select a date, time, and location for your appointment.
3. When you go to an Identogo office, your identity will be verified and your prints obtained via the Livescan technology.
4. You will pay Identogo directly for this service. Applicants may pay by credit/debit card, check or money order. Checks can be made out to either IDEMIA or IDENTOGO.
5. Once you have completed the appointment, the fingerprints are electronically submitted to LSP and the background check will be processed.
6. LSP will send the results via a secure interface within approximately 3 days.
7. The fee for State and Federal Livescan will be \$60.75.
8. Occasionally the fingerprints do not go through well and are rejected by the FBI and LSP's system. If this occurs, you will receive an email from identogo/idemia letting you know that you must reschedule an appointment and be fingerprinted again. You must use the link provided in the email to reschedule another appointment to avoid being charged again for the fingerprinting service.
9. A list of identification documents is provided on page 3 of these materials.

This new system is easy to use, but if you have any questions, you can call Identogo for assistance or to schedule an appointment at 1-844-539-5543, 6:00 am – 6:00 pm.

##### ***Livescan fingerprinting***





### APPLICATION CHECKLIST

All program applications must be submitted to LSUE Health Science, T-104, by **March 1**. Incomplete applications will not be considered for selection.

Completed applications must include the following:

- A completed program application form
- Documentation of healthcare related or full-time work
- Documentation of your healthcare degree (if applicable)
- Nursing Program Selection Attestation
- Proof of purchase for the NLN NEX exam
- Proof of your scheduled exam from the LSUE Testing Center

**\*\*Important Notes\*\***

- If you are not currently enrolled at LSUE, you must apply for general admission to the university. Full admission to LSU Eunice must be completed prior to applying to the nursing program. Applicants listed as "inactive" in Workday will not have their application considered for the term being sought. It is the applicant's responsibility to ensure their Workday status is active prior to the application deadline.
- If you are currently enrolled at a university other than LSUE, you must send a copy of your transcripts immediately after your final grades are posted.