

# Application Form

Casper College  
H. E. Stuckenhoff Department of Nursing  
Application for Admission

**Please include all application requirements with this form:  
Unofficial transcripts, TEAS test results, proof CNA State Licensure**

PLEASE TYPE OR PRINT LEGIBLY

Name: \_\_\_\_\_  
Last First Middle

Name: \_\_\_\_\_  
(Different from above that may appear on your records)

\_\_\_\_\_  
(Mailing Address) Street City State Zip

\_\_\_\_\_  
(Permanent Address) Street City State Zip

\_\_\_\_\_  
E-mail Address Home Phone Work Phone Cell Phone

High School: \_\_\_\_\_ Year Graduated: \_\_\_\_\_  
City State

College/s (including Casper College) and or other post high school education attended:

Previous degrees or certificates awarded: \_\_\_\_\_

Are you **currently enrolled** in any of the following pre-requisite courses?

\_\_\_\_\_ Human Anatomy (Zoo 2040 & Zoo 2041 or 2015 ) \_\_\_\_\_ Math 1400 \_\_\_\_\_ ENG 1010

\_\_\_\_\_ OnCourse (HMDV 1300) \_\_\_\_\_ Nursing Boot Camp (HLTK 1300)

Have you attended the Casper College Nursing Program previously? \_\_\_\_\_ Yes If yes, when? \_\_\_\_\_

Scanned to: [nina.stairs@caspercollege.edu](mailto:nina.stairs@caspercollege.edu) or  
Mail or deliver to: Lupe Kerr  
Academic Assistant  
Saunders Health Science Center, Room 202  
Casper College  
125 College Dr.  
Casper, WY 82601

My signature below confirms my intent to be considered as a qualified applicant and understanding the admission criteria provided within this guidebook. If admitted, I will attend the orientation scheduled prior to registration.

\_\_\_\_\_  
Date Signature

Casper College provides equal opportunity in education and employment — [caspercollege.edu/nondiscrimination](http://caspercollege.edu/nondiscrimination).