



**MASTER OF SCIENCE IN
NURSE ANESTHESIA**

**INSTRUCTIONS FOR
REQUIRED DOCUMENTATION
AND
APPLICATION FOR ADMISSION**

Webster University's Nurse Anesthesia Program enrolls a select group of candidates once a year, who begin the program in August. The postmark deadline for any applicant is November 1 for the following entering class.

INSTRUCTIONS FOR REQUIRED DOCUMENTATION

POSTMARK DEADLINE

NOVEMBER 1

Webster University's Nurse Anesthesia program enrolls a select group of candidates once a year in August. The postmark deadline for any applicant is November 1 for the following fall entering class.

Please detach this page for personal use to ensure that all required items are included in your application file. Every item on the following checklist must be submitted to be considered for an interview.

REQUIRED DOCUMENTS

- A completed Nurse Anesthesia program application.
- A nonrefundable \$50.00 application fee, in the form of a check or money order made payable to Webster University. Applicants may also pay by credit card by calling Office of Admission. Webster University graduates and students reapplying for the program are exempt from paying the application fee.
- A copy of your current nursing license. Reciprocity inquiries should be directed to: Missouri State Board of Nursing, P.O. Box 656, Jefferson City, MO 65102, (573) 751-0681.
- Official transcripts from EVERY college, university, and professional school you have attended. (Note: Courses listed on one transcript as transfer credit from another institution are not considered official documentation of that coursework.) All official transcripts in a language other than English must be certified and accompanied by a literal and certified English translation. A certified translation is prepared by a professional translation service or a qualified person other than the applicant and notarized with a statement of accuracy and fluency in both languages. Webster University graduates do not need to request their Webster University transcripts.
- A one-page cover letter explaining why you have chosen to pursue the nurse anesthesia field, including any relevant information you would like the Admissions Committee to know regarding your qualifications as an applicant.
- A current résumé describing professional education, experience, continuing education for the past 2 years, and any other supporting activities.
- Three letters of reference that provide an assessment of professional performance, continuing education, character traits, and knowledge of nurse anesthesia practice. Request one assessment from a CRNA whom you have shadowed, one from an immediate supervisor, and one from a professional.
- Current CCRN, ACLS and BLS certification required (with PALS certification strongly recommended). Expiration dates of November are considered current for the purposes of admission.
- Any additional supporting information you wish to include, such as copies of certifications, awards, honors, and/or publications within the past two years.
- A copy of your green card if you are a U.S. permanent resident.

Mail all documentation to the address at the bottom of the page.

ADMISSIONS QUALIFICATIONS

Because there are more applicants than available seats, the admissions process is competitive. Only the best qualified applicants will be interviewed. The Nurse Anesthesia Admissions Committee considers the following factors when selecting an applicant for an admissions interview:

- All applicants should hold a bachelor's degree in nursing or a related degree from a regionally accredited college or university. Applicants must have graduated from an accredited school of nursing. Students who completed their university education abroad must have earned an equivalent recognized baccalaureate degree, as determined by Webster University.
- Academic preparation in the basic sciences, i.e. chemistry, physics, and mathematics, is required.
- Qualified applicants should have a minimum cumulative grade point average (GPA) of 3.0 on a 4.0 scale for undergraduate studies or evidence of outstanding postgraduate academic achievement.

Note: The Admissions Committee reviews and evaluates all application materials when selecting qualified students for the nurse anesthesia program.

ADMISSIONS TIMELINE

- Applicants are encouraged to apply early. All applications and other required documentation must be postmarked by November 1. Applicants will be notified once their file is complete.
- The Admissions Committee will review all complete application files. All applicants will be notified by mid-December as to whether an interview has been granted. If an interview is granted, those applicants will be invited to the St. Louis campus in January. Those not granted an interview will have the opportunity to learn how to strengthen their application profile by meeting with current faculty.
- All interviewed applicants will be notified within one month if they are admitted, placed on alternate status, or denied admission. Those admitted must confirm their desire to accept the position within three weeks.
- Courses for the fall entering class will begin mid-August.

If you have any questions about the admissions process, please contact:

Webster University
Office of Admission
Re: M.S. in Nurse Anesthesia Program

470 E. Lockwood Avenue
St. Louis, MO 63119

Phone: (314) 246-7100 • (800) 753-6765 toll-free

Fax: (314) 246-7122

Email: gadmit@webster.edu
webster.edu/nap



MASTER OF SCIENCE IN NURSE ANESTHESIA
APPLICATION FOR ADMISSION

APPLICATION POSTMARK DEADLINE: NOVEMBER 1

Social Security Number Year Applying For, Fall

Name: Last First Middle Former Name(s)

Address: Number Street City State Zip Code

Telephone: Home Work Other

E-mail address:

U.S. Citizen? Yes No If no, country of citizenship: Name of Country Type of Visa

If a permanent resident, please attach a copy of your green card.

This section is optional; used for statistical purposes only: If a U.S. citizen or a U.S. permanent resident, provide your ethnic origin: Black, Non-Hispanic Origin, American Indian or Native Alaskan, Asian or Pacific Islander, Female, Male, Hispanic, White, Non-Hispanic Origin, Non-U.S. Citizen

Date of Birth: Month/Day/Year Place of Birth: City/State/Country

List all colleges/universities/postsecondary institutions/professional certificate programs attended. Submit official transcripts from ALL schools listed below.

Table with 5 columns: School, City/State, Dates attended, Credits earned, Degree Received. Multiple rows for listing educational institutions.

Have you previously attended Webster University? Yes No

If yes, when? Year Other last name under which your records may be listed

EMPLOYMENT EXPERIENCE

List acute care setting experiences in the past five years, most recent first:

Table with 4 columns: Employer, Department, City, State, Dates of Employment. 5 rows for listing work experience.

LICENSING INFORMATION

List all states in which you are or have been licensed as a Registered Nurse:

State	Active/Inactive License	Number
1. _____		
2. _____		
3. _____		
4. _____		

Has your professional license ever been revoked? Yes No
Have you ever been the subject of a Nursing Board disciplinary action? Yes No
Have you ever been refused a nursing license? Yes No
Have you ever been convicted of a felony? Yes No

Applicants who are accepted into the Webster University M.S. in Nurse Anesthesia Program must obtain a license in the State of Missouri by the time fall courses begin. The Webster University M.S. in Nurse Anesthesia Program requires proof of identification, and screening for both legal and illegal substances prior to enrollment.

AUTHORIZATION TO RELEASE CONFIDENTIAL INFORMATION

(Print legibly in black ink.)

I, _____, hereby authorize the _____ STATE BOARD OF NURSING to release any and all information
(name of state)
regarding my licensure and exam application status as a Licensed Practical Nurse/Registered Professional Nurse to Webster University and/or their representatives. This release authorizes the _____ State Board of Nursing to release the following information: my name, address, nursing
(name of state)
school name, graduation date, eligibility status, test appointment date, date exam was taken, whether or not I took the exam and my exam results, and any other appropriate information.

A copy of this authorization will be considered as effective and valid as the original.

Date _____ Applicant's Signature (must be signed) _____
Applicant's Printed Name _____
Applicant's Social Security Number _____

ADDITIONAL INFORMATION

This form must accompany your nonrefundable \$50.00 application fee, in the form of a check or money order made payable to Webster University. Applicants may also pay by credit card by calling Office of Admission. Webster University graduates and students reapplying for the program are exempt from paying the application fee.

Webster University adheres to the rules and regulations of the "Privacy Rights of Parents and Students" as stated in the United States Public Law 93-380 and adheres to the "Statement of Principles of Good Practice" of the National Association of College Admission Counselors. Webster University admits students of any race, sex, sexual orientation, color, creed, age, ethnic or national origin, or nondisqualifying handicap.

Webster University M.S. in Nurse Anesthesia is accredited by Council on Accreditation of Nurse Anesthesia Educational Programs (COA), 222 South Prospect Avenue, Suite 304, Park Ridge, Illinois 60068-4010.

Signature _____ Date _____

My signature on this form attests that the above information is true and accurate in paper, fax, and electronic form.

APPLICATION MATERIALS AND SUPPORTING DOCUMENTATION MUST BE POSTMARKED BY NOVEMBER 1:



Office of Admission
470 East Lockwood Avenue • St. Louis MO 63119-3141
1-800-753-6765 • gadmit@webster.edu • webster.edu/nap

It is the policy of Webster University not to discriminate in its educational programs, activities, or employment practices on the basis of race, sex, sexual orientation, color, creed, age, ethnic or national origin, or nondisqualifying handicap.