**Applicant Background Information**

# MASTER OF NURSING

Advanced Clinical-Nurse Practitioner Focus\*

(\*The Clinical-NP focus is only open to applicants with Nursing registration in Canada)

The information provided in this application is reviewed by the Faculty of Nursing Admissions Committee as part of the admissions selection process and all information will be held in confidence. Your responses will assist in the appraisal of your professional interests and career plans, and your fit with our faculty and programs. We are looking for clear and compelling articulation of links between past experience, motivation for graduate studies, & career plans.

**What are Reviewers looking for in your application?**

Many elements of the following document are closely aligned with the assessment form that will be used by application reviewers. As your completed application to the [MN Advanced Clinical-Nurse Practitioner] program is being assessed, the Admissions Review Committee is also considering whether the applicant has:

* a clear understanding of the NP role and responsibilities;
* indicators of a strong clinical background that are reflected in this background document and in reference letters;
* appropriate clinical experience in the applicant’s desired focus area (Neonatal, Adult, Family All Ages);
* Varied clinical experience that reflect somewhat diverse clinical capacity (not limited to one specialty/role focus);
* Roles that reflect full scope of RN practice role (Unfortunately, some roles which are labeled "RN" may not use optimize nursing knowledge and skills required);
* Overall quality of writing skills in preparation of the application
* Leadership involvement in professional roles, for example
	+ teaching, mentoring, preceptoring;
	+ clinical leadership roles including committee work;
	+ engagement in quality improvement or research projects, honors studies, or research assistantships;
	+ professional engagement in nursing and specialty organizations
	+ contributions to health and well-being through community organizations and volunteer activity

**Please answer all questions in this document and upload a pdf copy to your application.**

**NOTE:** Handwritten documents will not be accepted.

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| Applicant Name:  |  |

**Program Format:**

1. Choose one of Adult, Family/All Ages, Neonate
[ ]  Adult
[ ]  Family/All Ages
[ ]  Neonate
2. Choose course-based or thesis-based program
[ ]  MN (Crse)
[ ]  MN (Thes)
3. Choose one of full-time or part-time studies
[ ]  Part-time (PT)
[ ]  Full-time (FT)

Statistics and research courses should have been completed within the previous 6 years, and should have received a grade of at least B. Please indicate which courses from your previous studies meet the following requirements:

1. Undergraduate course in Statistics

Course #:

Course Name:

Final grade:

Year completed:

1. Undergraduate course in Research Methods:

Course #:

Course Name:

Final grade:

Year completed:

If the final grade was B or lower, or if it has been more than six years since these courses were completed, please indicate your plan to address this requirement. You may be required to remediate a deficiency in this area as a condition of admission:

**PROGRAM INFORMATION**

*Nurse Practitioner studies lead to eligibility to apply for licensure for entry to practice as an NP. To be eligible to apply for the Advanced Focus (Clinical NP), you must be a registered nurse in Alberta or in another Canadian jurisdiction (normally your home province) and have completed 4,500 hours of RN practice that is relevant to the area of focus that you have selected above.*

***Required clinical hours must be completed prior to program commencement.*** *Applicants interested in the Adult Area of focus should have current experience in adult nursing care, while applicants interested in Family/All Ages should have experience in both adult and child nursing care.*

1. If admitted, in which Canadian city are you planning to reside during your clinical placements for this program?

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| **Province** | **RN Registration #** | **Date when renewal is due?** |
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1. List all provinces where you currently hold active RN licensure and attach proof of registration:
2. Summarize your practice hours in the following table, or provide additional documentation verifying your clinical practice hours:

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| *(Add rows as needed)* |
| **Employer and setting****(e.g. RAH Emerg; Stollery outpatient clinic)** | **Dates** | **RN role****(staff nurse, educator, manager)** | **Nature of practice hours (adult, peds, community, acute care)** | **Number of hours** |
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By uploading this document to your application, you attest that the information that you have provided on this form is accurate and current.

**BACKGROUND INFORMATION**

Please provide the following information pertaining to your academic and professional background and career goals with a response in each section

**½ page maximum for each section.** **Anything more than ½ page will not be read by the Admissions Review Committee.** **#1-6 below may be answered with bullet points.**

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*Start typing on the line for each section, the line will expand as you type*

1. **Previous education:**

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1. **Relevant professional employment experience**

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1. **Awards, scholarships and/or academic honors received**

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1. **Publications or presentations**

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1. **Community and Professional Memberships**

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1. **Continuing Education** (courses/workshops in past 5 years)

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1. **Career Plans** - *relevant work experience and how the MN program will advance your professional development and future clinical/professional career goals. Please comment on your reasons for pursuing the MN program at this time in your career and clearly explain the fit between the NP role and your career goals.*

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1. **Advanced Clinical – NP Focus of Study** - *Describe your rationale for pursuing Nurse Practitioner studies in your chosen stream (Adult, Family/All Ages, or Neonate)*

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1. **Course-Based** **Route** - *All master’s students complete either a thesis project or a capstone project as part of their program of studies. Please provide a rationale for your choice of a course-based route, as well as several faculty members whose research is of interest to you and why.*

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1. **Thesis-Based** **Route** - *All master’s students complete either a thesis project or a capstone project as part of their program of studies. Please provide a rationale for your choice of a thesis-based route. Describe your beginning ideas about plans for your thesis research, as well as several faculty members whose research is of interest to you and why.*

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1. **Research and Scholarly Activities** - *Identify and describe any research or scholarly activities (i.e. Research Assistant, research practicum, research project participation, quality improvement projects, practice guideline development), as well as products of these activities, i.e. reports with which you have been involved. (Do not repeat publications and/or presentations here; put under #4 above).*

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1. **Community and Professional Involvement -** *Describe how your community and professional involvement, over the past five years, demonstrates your professional leadership and commitment*

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1. **Diversity, Equity, and Inclusion (EDI) -** *The Faculty of Nursing and University of Alberta are committed to creating learning communities characterized by respect, equity, diversity, and inclusiveness. Describe your approach to understanding perspectives of other people from diverse backgrounds, activities taken for personal growth in this area, and how you have led or participated in EDI initiatives in your professional roles. Please articulate one of your EDI learning objectives during your future graduate studies*

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1. **Additional Comments** *Are there any other considerations or other information (including aspects related to EDI) that you would like to offer the Admissions Committee in their assessment of your unique background?*

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1. **Program Expectations** *What activities, skills, expertise and experiences do you expect to gain in this program?*

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1. **Academic Advisor -** *Based on the information that you provide in your application; successful applicants will be assigned an academic advisor following admission. Please identify 2-3 faculty members that you would be interested in working with and describe your rationale for selecting these individuals. (Please do not contact these individuals directly) Refer to website for faculty profiles:* [*https://www.ualberta.ca/nursing/programs/graduate-student-resources-and-services/finding-a-supervisor.html*](https://www.ualberta.ca/nursing/programs/graduate-student-resources-and-services/finding-a-supervisor.html)

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1. **Referees –** *is the anything that you would like us to know about the referees that you have chosen?*

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**CAN YOU SPARE A FEW MORE MINUTES?** Please assist us by answering the following questions:

How did you learn about our program? (Please check off as many items as are applicable.)

[ ] Advertisement in publication

[ ] Faculty of Nursing website

[ ] Social media

[ ] Word of mouth

[ ] Other

What factors were most significant in your decision to apply to our program?

[ ] Reputation of University

[ ] Reputation of MN program and Faculty members

[ ] Scholarship or potential funding

[ ] Program description/materials

[ ] Location

[ ] Other

The Faculty of Nursing, Graduate Studies Office would like to recognize the awards and accomplishments of graduate students. This is to highlight the hard work being done in the Faculty. It may also assist in recruiting potential graduate students. Under FOIPP regulations, the Faculty of Nursing seeks your permission to post the following information about you. Please check the appropriate boxes below. Note that you may ask, at any time, to have your information removed by contacting the Graduate Services Office.

Please indicate with a checkmark the items that you agree to have communicated:

[ ]  Your name

[ ]  Positive milestones (candidacy exams and thesis defenses passed

[ ]  Scholarships and honours awarded

[ ]  Your successful publications

[ ]  I do not wish to have any information about me communicated

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| --- | --- | --- | --- |
| Signature |  | Date |  |

Protection of Privacy - The personal information requested on this form is collected under the authority of Section 33 (c) of the *Alberta Freedom of Information and Protection of Privacy Act* and will be protected under Part 2 of that *Act*. It will be used for the purpose of highlighting awards and program accomplishments. Direct any questions about this collection to: FOIPP Liaison Officer: Telephone: (780) 492-7321; Faculty of Nursing, Level 3, Edmonton Clinic Health Academy, University of Alberta, Edmonton, Alberta, T6G 1C9