

# Geisinger Health System/Bloomsburg University of PA Nurse Anesthesia Program

## Anesthesia Nursing Clinical Experience Form

*Please type or print clearly.*

Applicant's Name: \_\_\_\_\_  
First
Middle
Last

**Baccalaureate Degree:** Applicants must possess a Bachelor's degree with a major in nursing from a program accredited by the American Association of Colleges of Nursing-Commission on Collegiate Nursing Education (AACN-CCNE) or the Accreditation Commission for Education in Nursing (ACEN). Please complete the requested information below.

EDUCATION (as applicable)		
SOURCE	INSTITUTION NAME	OVERALL GPA
Associate Degree in Nursing		
Bachelor of Science in Nursing		
Other - Associate Degree		
Other - Bachelor Degree		
Master's Degree		

**Critical Care Nursing Experience:** At least one (1) year of **recent** full-time critical care nursing experience (post-ADN or post-BSN) as a RN is required to be completed prior to July 1<sup>st</sup> in the year of program application.

CRITICAL CARE NURSING			
EMPLOYER NAME, CITY, STATE	CRITICAL CARE TYPE	DATES EMPLOYED IN CRITICAL CARE AREA	MONTHS CRITICAL CARE

CRITICAL CARE NURSING SUMMARY	
TOTAL MONTHS (FULL-TIME) CRITICAL CARE EXPERIENCE AT JULY 1 <sup>ST</sup> APPLICATION DEADLINE	

**Licensure to Practice Professional Nursing as a RN:** Applicants must provide proof for fulfillment of the legal requirements to practice professional nursing (RN) in Pennsylvania or another state. At enrollment each student is required to provide evidence of current and valid licensure as a professional Registered Nurse in Pennsylvania.

NURSING LICENSURE (as applicable per state)		
STATE	ACTIVE OR INACTIVE	IF ACTIVE, LICENSE NUMBER

QUESTIONS	YES	NO
Have you ever had a nursing license suspended or revoked?		
Have you ever been the subject of a Nursing Board disciplinary action?		
Have you ever been refused a nursing license?		

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_