

Step 4

Create a new password for the account. This, along with your email, will allow you to log into the system and access your application.

Set Password

To protect the security of your account, please specify a new password. The password must meet complexity requirements.

New Password	At least one letter
	📉 🔀 At least one capital letter
New Password (again)	🖗 🔀 🔀 At least one number
	🔀 Be at least 12 characters
	🔀 New passwords must match

Set Password



While not required to apply

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applications

Step 10

This is where you will designate your program of study. You should put:

- "Indiana State Online" "Nursing"
- "DNP Nursing Practice"
- Select New or Returning Graduate

	Social Security Number	
	Continue	
niversity		l .

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<u>Home</u> Personal Information Graduate Program of Study Academic History Additional Information <u>Military</u> Recommendations Signature Review and Submit

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Graduate Program of Study

Campus* Indiana State University Online	
Field of Interest*	
Program of Study* DNP - Nursing Practice	~
Term* Spring 2021 V	
Student type* New Graduate	

If you are physically outside the state of Indiana AND plan to apply for a fully online program, please review your st authorization status. If you reside outside the US or Canada, you are not eligible to apply for fully online programs.

Certain online programs may lead to licensure or certification in your state. In accordance with U.S. Department of Education 34 CFR Section 568.59 (c)(2) Individual Disclosures, if you elect to enroll in selected programs, you will be asked to acknowledge that you understand the program may not meet all the licensure or certification prerequisites in your state. To learn more visit: https://www.indstate.edu/acaamilabilitw

*Indicates a required field



This screen will only show any missing information in your application. It is IMPORTANT Academic History Additional Information Military Becommendationa Signature Review and Submit

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Section	Required Field or Error
Personal Information	Click here to complete your address.
Personal Information	Click here to enter emergency contact information.
Personal Information	Click here to enter your zip code.
Personal Information	Click here to select your gender.
Personal Information	Click here to tell us your cell phone number.
Personal Information	Click here to tell us your phone number.
Citizenship	Click here to tell us how long you have been a resident of your state.
Citizenship	Click here to tell us your county of legal residence.
Citizenship	Click here to tell us your state of legal residence.
Graduate Program of Study	Click here to select a program.
Graduate Program of Study	Click here to select a student type.
Graduate Program of Study	Click here to select a term.
Academic History	Click here to enter colleges/universities attended.
Academic History	Click here to enter level of study for colleges/universities attended.
Signature	Please complete prior to submission.

that everything is filled out and complete so we can review your application in a timely manner!

Save for Later

After submitting your form and paying the application fee, please submit all requisite program materials. This information is also available in the <u>How To Apply</u> document on the ISU DNP website.

Step 17

Questions regarding the admission process or requirements should be directed to ISU's School of Nursing Graduate Programs at

<u>isu-distancenursing@indstate.edu</u>

Materials Required:

- Transcripts for all undergraduate and graduate education
- CV/Resume
- Personal Statement
- Scholarly Writing Sample
- Verification of Unencumbered RN License
- Government-issued Photo ID