

If yes, explain briefly:

CRIMINAL BACKGROUND NOTICE

Accepted students must submit to a criminal history background checks and drug screenings (at the student's expense).

LPN LEARNING SURVEY

Do you have any experience in the health field? Yes No

If yes, what experience do you have?

How did you hear about this program?

Have you ever applied for this program before? _____ If yes, when? _____

Are there any obstacles you are concerned about that might hinder your success in this program if you are accepted? (Example: Transportation, Finances, Daycare, etc.)

ESSAY QUESTIONS

Please answer the following essay format questions. Your essays should be at least (3) three paragraphs in length each, typed, printed and attached to this application.

1. Why do you want to become a Licensed Practical Nurse?
2. What personal qualities or characteristics set you apart from other LPN applicants?

If you have any questions, please contact our office at: (973) 627-4601, Ext. 245.

Applicant's Signature

Date