

**Mississippi University for Women
College of Nursing and Health Sciences
Baccalaureate Program**

The following documents will be required after acceptance into the RN to BSN Program. Wait until you've been sent this information by the RN to BSN office.

REQUIRED DOCUMENTS
<ul style="list-style-type: none"> • Proof of RN licensure from the Board of Nursing website in Mississippi or a multistate license from a compact state. (Part-time students may obtain nursing license during the first summer semester.)
<ul style="list-style-type: none"> • Copy of valid CPR card
<ul style="list-style-type: none"> • Verification of present employment as an RN. If unemployed put N/A.
<ul style="list-style-type: none"> • Copy of valid health insurance card.
<ul style="list-style-type: none"> • Copy of valid auto insurance card.
<ul style="list-style-type: none"> • Copy of a valid/unexpired official photo ID (driver's license, state ID, passport).
<ul style="list-style-type: none"> • Annual TB skin test within 365 days of the start of the program. *If longer than 365, a 2 step is required
<ul style="list-style-type: none"> • Proof of <u>3</u> Hepatitis B vaccines
<ul style="list-style-type: none"> • Copy of immunization record that includes two MMRs or proof of serological immunities
<ul style="list-style-type: none"> • Proof of Tetanus Toxoid within the last 10 years of the start of the program and a prior Tdap
<ul style="list-style-type: none"> • Varicella Vaccine 2 injections a minimum of 28 days apart or proof by Titer of disease immunity.
<ul style="list-style-type: none"> • Proof of Flu vaccine will be requested in the fall
<ul style="list-style-type: none"> • Copy of ACT score, if not already sent
<ul style="list-style-type: none"> • Background check results run through Mississippi University for Women ID Services* – No exceptions.
<ul style="list-style-type: none"> • Documentation of current Urine or Serum Drug Screen (minimum of 7 panel) dated program entry year*
<ul style="list-style-type: none"> • Documentation of annual health examination dated program entry year*