GRADUATE PROGRAM APPLICATION INSTRUCTIONS

Your application will be reviewed when all required documentation is received in the Admissions Office. Partially completed applications will not be processed.

To be considered for enrollment in graduate courses offered by Our Lady of the Lake College, the following information is required:

I. A completed application for admission and the $50.00 non-refundable application fee.

II. Official transcripts/GRE test scores:
   A. Official Transcripts
      • MSN Applicants - Provide official transcripts of all previous academic work attempted beyond high school. Transfer credit posted on records of other institutions is unacceptable.
      • MS in Nurse Anesthesia Applicants—Provide official transcripts of all previous academic work beyond high school. Transfer credit posted on records of other institutions is unacceptable.
      • PA Applicants – Provide official transcripts of all previous academic work attempted beyond high school. Transfer credit posted on records of other institutions is unacceptable. Provide a photo of yourself (passport size) and adhere to application at instructed area.
      • MHA Applicants- Provide official transcripts of all previous academic work attempted beyond high school. Transfer Credit posted on records of other institutions is unacceptable.

B. GRE Test Scores

   The GRE must have been taken within five years prior to the application date.

III. Graduate Program Reference Forms (PA & CRNA only)

   Three references are required to complete the application. (For the PA Program, references must include one from a licensed PA, a previous employer, and a past College professor or advisor.)

IV. Proof of Licensure (MSN and Nurse Anesthesia Applicants Only)

TEXTBOOKS:
Textbooks are available for purchase from the Chimes Medical Bookstore (currently located on campus).

IMMUNIZATION POLICY:
Upon acceptance, the applicant must submit proof of Measles, Mumps, Rubella, Meningitis Vaccine or waiver, Hepatitis B, Varicella, Tuberculosis, and Tetanus/Diphtheria immunization as described under the Immunization Policy (see enclosed form) with application.