



## RN-BSN Transcript Review Request

Transcript reviews will be completed and returned via email within 7-10 business days after receipt of request.

_____	_____	_____
First Name	Middle Name	Last Name
_____		
Prior Name(s), if applicable		
_____		
Email	Phone Number	

### Licensure

Do you have your ADN/RN License?    Yes    Currently Completing    No

\_\_\_\_\_

State(s) Licensed In

\_\_\_\_\_

Nursing School Name	City & State	Graduation Month & Year
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### Educational History

List any college(s) previously attended or currently attending.

In this section, share what college degrees/certificates you have received or anticipate receiving (if currently enrolled). If you have not received any degrees/certificates, enter N/A in the first box.

Degree	Date Awarded	College Name

### Next Steps

Email the completed form AND all transcripts to [rnbsn@washburn.edu](mailto:rnbsn@washburn.edu)

- For transcript review, transcripts can be official or unofficial.
- Official transcripts are those sent directly from the school to Washburn University and will be required if admitted.
- After your transcript review is returned to you via email, you will work with the School of Nursing to determine when and where you would like to complete prerequisite courses, if desired.
- An anticipated start date for the RN-BSN program will be determined.

**For Office Use Only:** Date Received \_\_\_\_\_ Date Transcript Review Sent to Student \_\_\_\_\_ Processed By \_\_\_\_\_