



TROY UNIVERSITY  
 Family Nurse Practitioner  
 MSN-FNP  Certificate  
 Graduate Degree Plan and Progress Record/  
 Application for Admission to Candidacy  
 34 (Certificate) 47 (MSN-FNP) Semester Hour Program

Name \_\_\_\_\_ Student ID # \_\_\_\_\_ Campus \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Copy of transcript must be attached. May not use "Student Academic Credits" or "Academic Evaluation" report.

**DEGREE REQUIREMENTS:**

- |   |  |
|---|--|
| 1. GRE, or equivalent exam, test scores submitted         | 7. Overall GPA of 3.0                                      |
| 2. Official transcript of all academic work               | 8. Completion of research requirement with a "B" or better |
| 3. Unconditional Admission                                | 9. All credit earned within 8 years of graduation          |
| 4. 34 (certificate) 47 (MSN-FNP) semester hours of credit | 10. Admission to Candidacy                                 |
| 5. Meet residency requirements                            | 11. Successfully complete comprehensive exam/thesis        |
| 6. No more than two grades below "B"                      | 12. Intent to Graduate filed                               |

**A. REQUIRED CORE COURSES 6 – 7 Semester Hours**

COURSE NO	TITLE	HRS	GRADE	TERM/YR	TRANSFER CREDIT
NSG 5504	Theories in Nursing	2			
NSG 5505	Health Care Economics	2			
NSG 6660	Foundations of Advanced Practice	2			
**NSG 6659	Adaptation of FNP Role	1			

**B. RESEARCH – 7 Semester Hours**

COURSE NO	TITLE	HRS	GRADE	TERM/YR	TRANSFER CREDIT
NSG 6691	Research Methodology	3			
NSG 6692	Data Analysis Techniques	2			
NSG 6696	Scholarly Inquiry Practicum I	1			
NSG 6697	Scholarly Inquiry Practicum II	1			
<b>OPTIONAL:</b> NSG 6695	Thesis	4			

**C. NURSING SPECIALTY – 27 Semester Hours**

COURSE NO	TITLE	HRS	GRADE	TERM/YR	TRANSFER CREDIT
*NSG 5512	Advanced Health Assessment	3			
*NSG 5513	Advanced Health Assessment Preceptorship	3			
*NSG 6645	Family and Cultural Thesis	3			
*NSG 6649	Advanced Pharmacology	3			
*NSG 6665	Primary Care I	3			
*NSG 6666	Primary Care I Preceptorship	3			
*NSG 6667	Primary Care II	3			
*NSG 6668	Primary Care II Preceptorship	3			
*NSG 6671	Advanced Pathophysiology	3			

**D. FNP ROLE COURSES – 6 Semester Hours**

COURSE NO	TITLE	HRS	GRADE	TERM/YR	TRANSFER CREDIT
*NSG 6670	Role Synthesis Seminar	1			
*NSG 6680	FNP Internship	5			

**E. SYNTHESIS AND EVALUATION – 1 Semester Hour**

COURSE NO	TITLE	HRS	GRADE	TERM/YR	TRANSFER CREDIT
NSG 6655	Synthesis and Evaluation of Advanced Nursing Practice	1			

\*Required for certificate

\*\*Only required for certificate option

**ITEMS TO BE DISCUSSED**

- \_\_\_\_\_ 1. One term limit to have transcript(s) and test scores on file
- \_\_\_\_\_ 2. Temporary, Conditional, and Unconditional Admission
- \_\_\_\_\_ 3. Availability of faculty for academic advising
- \_\_\_\_\_ 4. Petition for transfer credit once unconditionally admitted
- \_\_\_\_\_ 5. Class Attendance
- \_\_\_\_\_ 6. Drop and Withdrawal procedures; deadline and consequences
- \_\_\_\_\_ 7. Petition for an Incomplete grade
- \_\_\_\_\_ 8. Student participation in course and Program Evaluation
- \_\_\_\_\_ 9. Other \_\_\_\_\_

Admission Status		
Type	Date	Initials
Conditional		
Unconditional		
Residency		
Test Score		
Comps		

STUDENT ACKNOWLEDGEMENT: I have read the current year's Graduate Catalog and acknowledge the contents and requirements of the above program. I have received academic advising from my Faculty Advisor.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Faculty Advisor \_\_\_\_\_ Date \_\_\_\_\_

STUDENT ACKNOWLEDGEMENT: I hereby apply for Admission to Candidacy.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

APPROVED: \_\_\_\_\_  
Chair/Associate Dean or Dean

Advisor \_\_\_\_\_ Date \_\_\_\_\_

CANDIDACY APPROVED: \_\_\_\_\_  
Dean, Graduate School

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 Pink – Campus/Branch file  
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