



Out of nursing for \_\_\_\_\_ years. RN Active license number and State issued \_\_\_\_\_

Other: \_\_\_\_\_

What role did you have during much of your nursing career and specialty area if applicable; i.e., med/surg, home health, psych, ICU, skilled nursing facility, ambulatory clinic?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you contacted the state board of nursing in which you wish to renew your license to see what requirements are needed for your situation?

Yes  No

What state do you plan to complete your clinical experience? \_\_\_\_\_

I have contacted my State Board of Nursing for details on reactivation and/or endorsement of RN license

Yes  No

List ALL of the states in which you have been licensed and indicate current status:

1. \_\_\_\_\_ active/inactive
2. \_\_\_\_\_ active/inactive
3. \_\_\_\_\_ active/inactive

✓ Attach verification of your nursing license. (Licensure Quick Confirm by accessing [www.nursys.com](http://www.nursys.com) or copy of your active or inactive license attached to this document)

I have reviewed the MEDSTAR: RN Refresher Online Program Overview located on the website

[www.msrnrefresher.com](http://www.msrnrefresher.com).

Yes  No

Please answer the following questions. If you answer “yes” to any of the questions, please provide a complete description of dates and circumstances on a separate piece of paper. You must attach supporting documents that are applicable.

Please feel free to contact Linda Rose, Executive Nursing Director to discuss further if needed (480-628-0937)

A. Have you ever been convicted, pled guilty or no contest, or received a suspended imposition of sentence for a felony or other criminal offense (excluding minor traffic violations)?

Yes  No

B. Is there any pending criminal prosecution against you which would constitute a felony?

Yes  No

C. Within the last three years, have you been treated for abuse or misuse of any alcohol or chemical substance to the extent that your ability to practice as a nursing student would be impaired?

Yes  No

D. Within the past three years, have you experienced a physical, emotional, or mental condition that has endangered the health or safety of persons entrusted in your care?

Yes  No

I understand that if I am convicted, plead guilty or no contest, or receive a suspended imposition of sentence for a felony or other criminal offense (excluding minor traffic violations) while in the A NEW DAY: RN Refresher Program, I will report the offense to the Executive Director of Nursing.

Grievance Policy: MEDSTAR: RN REFRESHER ONLINE PROGRAM, LLC. will make every attempt to investigate and resolve the issue as quickly as possible. See Student Handbook for complete policy.

Sandra Wyrick PhD, is your secondary contact person for programmatic questions/concerns in the absence of Linda Rose. [anewday.rnrefresher@gmail.com](mailto:anewday.rnrefresher@gmail.com)

I hereby verify that all of the information contained in this document is accurate and truthful to the best of my knowledge:

Signature \_\_\_\_\_

Date \_\_\_\_\_

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Tuition Payment: 2 Types of Programs: *please check your method of payment and program*



RN Refresher Online Program:

122hour Theory/Skills component & 160-hour Clinical Preceptorship component

\_\_\_\_\_ \$3100 Payable by Personal Check or Money Order

\_\_\_\_\_ \$3175 by Credit Card Visa \_\_\_\_\_ Master Card \_\_\_\_\_

Account Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

3 Digit Number on Back of Credit Card: \_\_\_\_\_

Name on the Credit Card: \_\_\_\_\_

Billing Address of Credit Card Holder: \_\_\_\_\_



NCLEX PREP RN Refresher Medical Surgical Review Program: 122-hour Theory/Skills component (utilized by students preparing for the NCLEX exam). Once the NCLEX is passed the student will move directly into the clinical portion of the program having completed the didactic portion in preparation for the NCLEX exam.

\_\_\_\_\_ \$3000 Payable by Certified Check or Money Order

\_\_\_\_\_ \$3075 by Credit Card Visa \_\_\_\_\_ Master Card \_\_\_\_\_

\_\_\_\_\_ \$ 100.00 due for 160 hours clinical placement post passing NCLEX

Account Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

3 Digit Number on Back of Credit Card: \_\_\_\_\_

Name on the Credit Card: \_\_\_\_\_

Billing Address of Credit Card Holder: \_\_\_\_\_

*The RN Refresher Medical-Surgical Review Program is intended for those who wish to study and review for their NCLEX exam and/or remediate on medical-surgical theory/skills only and does not include a clinical component.*

**\*\*\*\*Required Text Books, E-Learning Resources, and Skills Kit are additional cost and not part of the tuition fee.**

If you would like to add a Live Skills Demonstration Evaluation to the RN Refresher Online Program

please inform the Executive Director upon enrollment by selecting this box. Note: Additional \$350 fee will be applied to your tuition total. (available after 5/1/18)

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**Program Withdrawal**

A student who withdraws from the program for any reason will not be eligible for a Certificate of Program Completion and will not pass the course. Please notify the program executive director if you are withdrawing from the program. *Keep in mind you have 6 months to complete the didactic RNR Online program and 6 months to complete the clinical portion. Total time to complete program is one year from enrollment. Please notify the Director of the program if there are extenuating circumstances to lengthen this time.*

**Refunds for Withdrawal:** The application/tuition fee is non-refundable after 2 days of enrollment date. Refunds within the 2 days of enrollment will result in a 25% service fee of the full tuition price. Refund requests must be made via email within the 2-day timeframe to the Executive Nursing Director at [rose2000@cox.net](mailto:rose2000@cox.net) *This is to keep tuition fees down. We apologize for any inconvenience this may cause.*

By signing I understand and agree with the tuition payment, withdrawals, and refund policy as noted in this document:

\_\_\_\_\_

Student Signature

Print Student Name

Date

Thank you for completing the enrollment form. You will receive an email confirming your enrollment status in 2-3 business days  
*Please retain a copy of this document for your files*