

STUDENT APPLICATION FORM TWO

MS and Post-Masters Certificate in Midwifery

The Midwifery Institute of Philadelphia University
222 Hayward Hall
School House Lane & Henry Avenue
Philadelphia, PA 19144
Telephone: 215-951-2525 Fax: 215-951-2526

Please send all application documents to: Graduate Admissions, Philadelphia University, School House Lane & Henry Ave., Philadelphia, PA 19144

Name:

E-Mail Address:

Phone:

List any other names you have used, currently or in the past: _____

Are you currently applying to any other nurse-midwifery education programs: Yes No

If yes, please list the program/s: _____

Have you previously been a student in any other nurse-midwifery program? Yes No
If "Yes," please explain on a separate sheet of paper.

Have you ever been suspended, dismissed, or put on academic probation or warning at any school or college: Yes No If "Yes," please explain on a separate sheet of paper.

Have you ever received any disciplinary sanctions from a State Board? (including probation, suspension or revocation of a license, registration or certificate)
[Affirmative responses to these questions do not automatically disqualify you from admission.]
 Yes No If "Yes," please explain on a separate sheet of paper.

The following will be used only for demographic analysis:

1a. Size of your community (circle one) 5,000 or less 10,000 or less

between 10,001 and 50,000 50,001 or more (please list size) _____

1b. Name of the county you reside in: _____

2. Veteran/Military Status: _____

3. List any physical limitations you may have:

To download complete application materials from the Midwifery Institute website go to:
<https://www.philau.edu/midwifery/mscertapplymat.htm>

Statement of Application Integrity

I hereby certify that I have provided accurate information in this application. I authorize all persons or entities to provide any relevant information in their possession to The Midwifery Institute of Philadelphia University or its agent for use in considering me for admission or verifying my credentials for admission, and I expressly waive any required notice to me. I understand and agree that any misrepresentation or omission of facts in my application will justify the denial of admission, the cancellation of admission, or expulsion. This application is my own, honest statement to the Admissions Committee.

Signature: _____ Date: _____