First Name  Middle Name  Last Name  Maiden Name  
Street Address  City/Town  Province  Postal Code  
Phone Number  E-Mail Address (Compulsory)  Social Insurance Number  
Emergency Contact Person  Contact Number  

Prerequisite: Successful completion of A&P I - Please attach a copy of the Transcript with this Registration.

Cost of course - $500 (Successful completion of this course will provide a transfer credit for N209 Anatomy & Physiology offered in semester two of the PNP).

PAYMENT
The Centre for Nursing Studies accepts online payment by Visa and MasterCard. A non-refundable 1.75% convenience fee will be applied to credit cards. Online payments can be completed at https://payments.easternhealth.ca/Default

For payment by mail, please use:
Business Office
Centre for Nursing Studies
Southcott Hall
100 Forest Road
St. John's, NL A1A 1E5
Canada

For payment by E-Transfer, please send to:
bhaines@mun.ca

Please include what the e-transfer is for.

I hereby verify that the information given on this Registration Form is correct. I agree to be governed by the policies, rules, and regulations as set forth by the Centre for Nursing Studies.

Permission is granted to The Centre for Nursing Studies to: i) contact previous employers and/or educational institutions to obtain personal references, to verify educational background, and/or to provide the clinical preceptor with this information ii) provide verification of successful course completion to the licensing body and/or sponsoring agency.

Date  Signature of Student

FAX NUMBER:  709-777-8176  EMAIL:  leona.gosse@mun.ca

The Centre for Nursing Studies (CNS) acknowledges and respects the privacy of individuals. The personal information included on this form is collected under the authority of Sections 32 and 33 of the Access to Information and Protection of Privacy Act and will be used for processing your application, the administration of student records, and coordinating your academic program. Contact information may be shared with other agencies as it pertains solely to the administration of the program/course for which you have applied or as authorized by law. If you have any questions about the collection, use, or disclosure of information on this form, please email Catherine.e.rice@mun.ca.