

RN to BSN PROGRAM

Documentation for Georgia RN to BSN Articulation Plan

Each student in the RN to BSN program must complete either part A or part B of this form in order to be eligible for transfer of credit through the Georgia RN to BSN Articulation Agreement.

$Part\ A-To\ be\ completed\ by\ RN\ students\ who\ have\ graduated\ within\ 4\ years$

Student Name		_
(Please Print)		
I graduated from(Name of school)	on	and received the following
(Name of school)	(Date)	
degree or diploma		
A copy of the transcript indicating this degree	is on file in the Tanner F	Health System School of Nursing.
Signature		
Date signed		
Part B – To be completed by RN student w	no graduated more than	n 4 years ago.
Student Name		
Student Name(Please Print)		
I have practiced as a registered nurse for at lea	ast 1000 hours (approxim	nately 6 months) during the past three
years at		
(Name of Institution)		
This information can be verified by:		
Name and title		
Phone Number		
Signature	Date signed	