

## SCHOOL OF NURSE ANESTHESIA

### Application Instructions

Please mail all of the required materials to:

**Program Director**  
**Yale New Haven Hospital School of Nurse Anesthesia**  
**1450 Chapel Street - MOB Suite 216**  
**New Haven, CT 06511-4405**  
**(203) 789-3351**

- 1) Complete pages one (1) through three (3) of the application form (choose **Entry to practice** or **Post Master's degree** application). Deadlines are as follows:
  - Entry to practice degree: **October 15**
  - Post-Master's completion: **January 1**
- 2) Attach a **non-refundable fee** of \$60.00 for processing of the application, payable to Yale New Haven Hospital.
- 3) Attach a copy of your RN license, BLS, ACLS and CCRN certification, PALS certification (if applicable) and current CV. For **post-Master's degree CRNA applicants**, verification of current NBCRNA certification and advanced practice licensure (if applicable) must be included.
- 4) Request that the transcripts from your nursing school and **all** other colleges, universities or programs attended be mailed directly to us. For **post-Master's degree CRNA applicants**, NBCRNA transcripts must also be mailed directly from the NBCRNA to the address above. **ALL transcripts must be official, sealed by the issuing institution. Transcripts issued to/submitted directly by the student will not be accepted.**
- 5) Request that the recommendation forms (**please submit exact forms supplied**) be sent to us directly from your current supervisor, dean of the school of nursing or director of the nurse anesthesia program from which you graduated, and an unrelated physician, professor or peer who has known you for three or more years and can speak to your work ethic, clinical acumen and skill. Additional letters of support may be submitted along with our recommendation forms.
- 6) Include a personal statement outlining your motivation to pursue the career of nurse anesthesia, aptitude for the sciences, commitment to pursue the doctoral degree and any other

attributes which you feel would support your candidacy for the program of study. *Limit your essay to a 400 words max.*

- 7) Please be sure to **sign** the application form on page 3 as provided.
- 8) Please sign and return the **transcript release form** with your application. Your transcripts will be forwarded to our university affiliate after review at YNHHSNA.
- 9) Request GRE results be sent directly to us. Our program code is **1420**.
- 10) International applicants must submit the following:
  - Official transcripts and records of undergraduate and graduate studies and any program attended – transcripts must be sent directly from all institutions attended.
  - If English is not the official language of the degree-granting institution, proof of competency in English, as indicated by the Test of English as a Foreign Language (TOEFL) with a score of no less than 550 (213 on the computer-based test).
  - Translation of academic records produced and verified by a U.S. academic credential evaluation agency such as WES.

**Please note:** Once all of the requested application items are received by the Yale New Haven Hospital School of Nurse Anesthesia, the applicant's eligibility for interview will be established. Eligible candidates will be invited for a personal interview. All interviews must be scheduled before **November 15<sup>th</sup>**.