

Admission Offer Acknowledgement Form

I declare that I have read the following two documents:

- Essential Requirements for Study in BScN Programs in Ontario (COUPN, 2019)
- College of Nurses Requisite Skills and Abilities for Nursing Practice (CNO, 2012)

Name (printed): _____

Signature: _____

Student #: _____

Date: _____

Please sign and return by mail, or email:

Nursing Admissions
1280 Main Street West,
HSC 2J36
Hamilton, ON L8S 4K1
bscnadm@mcmaster.ca

Due Date: Upon Accepting Admission Offer