MONTACHUSETT REGIONAL VOCATIONAL TECHNICAL SCHOOL
PRACTICAL NURSING PROGRAM
1050 Westminster Street
Fitchburg, MA 01420
978-345-9200 ext. 5108

2027 - 2028 APPLICATION FOR ADMISSION

Process for Application for Admission to the PN Program
DUE NO LATER THAN 3:00 P.M. ON MAY 3, 2027

Complete this application form and submit with a **non-refundable $50 application fee**. Include a current Resume.
PERSONAL CHECKS NOT ACCEPTED

Successfully complete and request submission of the required TEAS entrance exam with Monty Tech criteria scores between 8/1/26-5/3/27.

Have three (3) reference forms completed and sent directly to the school, Attn: Practical Nursing Program.

Official sealed transcript from High School or U.S. HS Equivalency Credentials mailed directly to Monty Tech.
If high school education is from outside the U.S., please reference the accredited services listed on our website montytech.net/LPN for foreign ed verification.
This may take up to 30 days--please start this process early!
All transcripts are to be sent to the Attn: Practical Nursing Program by May 3, 2027

An interview with PN Faculty will be scheduled only after all of the above requirements have been met and all paperwork received. All interviews should be completed by June 4, 2027.

It is the responsibility of the applicant to determine that the application process is complete.

Part I: General Information: *Please print clearly.*

Name _____
(Last name) (First name) (Middle initial)

Other last name under which records may appear _____

Address _____

City, State, Zip Code _____

Mailing address (if different from above)
_____

Phone _____

Email _____

AHA BLS CPR certification: yes_____ no _____ Expiration date _____

(Please complete. "See Attached" is not acceptable)

High School (where obtained)_____

High School Equivalent _____

Post High School (Colleges or Post Secondary Schools attended):

(please list, including dates attended and request an **OFFICIAL** College transcript sent to PN Program):

Part II: Please complete your work and personal experiences:

Current employer:

What is/are your responsibilities?

Past employment: Please list your past work experiences. Include the employer's name, your responsibilities, and length of time employed:

Community or other volunteer activities:

Part III: In the space below, in 250 words or less, please discuss what being a nurse means to YOU and how you plan to uphold the values of caring, accountability and professional behaviors.

Admission policy for the postsecondary practical nursing program can be found on the Montachusett Reg Voc Tech School website www.montytech.net/LPN

Part IV: References

Please list the names, addresses, and phone numbers of three (3) people who will provide a reference for you. One must be a current or past employer; **none** may be friends or family members.

Provide these people with a hard copy of the reference form (available online) on which you have written your name. Ask them to return it, signed and dated, directly to the Practical Nursing Program prior to May 3, 2027.

Applications will not be considered complete without all three reference forms being submitted.

Name:

Address: Phone:

Name:

Address: Phone:

Name:

Address: Phone:

To the best of my knowledge, I have completed this application accurately and truthfully.

Date Signature of applicant

Electronic Signatures are NOT acceptable

Optional information: This information will not be used as a condition of admission. It is used for Equal Opportunity purposes only. Please check:

African American/Black_____American Indian or Alaskan Native_____Asian_____Hispanic or Latino_____
Multi-Race, non-Hispanic or Latino_____Native Hawaiian or Pacific Islander _____Unknown_____White____
Sex: Male_____ Female_____ non-binary_____ Other_____

Montachusett Regional admits students and makes available to them its advantages, privileges and courses of study without regard to race, ethnicity, color, sex, gender identity, sexual orientation, religion, national origin, or disability.

Website