



a community and technical college

## Ridgewater College – Full Time Practical Nursing Application for Fall 2025

Full Name \_\_\_\_\_  
*First Middle Last Maiden*

Mailing Address \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address \_\_\_\_\_

Ridgewater Student ID No. \_\_\_\_\_ STAR ID: \_\_\_\_\_

(You must already be an accepted Ridgewater College student to apply)

Which campus are you applying to? Willmar only\_\_ Hutchinson only\_\_ Both \_\_

If you want to be considered for acceptance on BOTH campuses and your ranking would allow us to accept you to either campus – what is your preferred campus?

**Willmar or Hutchinson (please circle one only)**

Did you attend a Nursing Information Session (Must attend to apply) \_\_\_\_\_ (Yes or No)

Are you on the current on the Minnesota Nursing Assistant Registry? This is required and will be verified with the Minnesota Board of Health.

YES \_\_\_\_\_ NO \_\_\_\_\_

## Selection Criteria

GPA from the following courses is used in the ranking of PN applicants. Please list the information for the various courses:

	Institution	Semester	Year	Grade
PRNU 1617 <u>or</u> HLTH 1130				
Psychology 1310				
ENGL 1209 <u>or</u> ENGL 1210				
BIOL 1080 <u>or</u> BIOL 2100/BIOL 2110				

*I certify that the information given on this application form is accurate information. I understand that false or inaccurate information will void my application. I understand that I am applying for the Practical Nursing Program, which does not allow direct admittance to the RN program.*

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*Applicant signature*

*Date*

*Please keep a copy of this application for your records.*

SEND COMPLETED APPLICATIONS TO:

Ridgewater College  
Ellery Knight  
2101 15<sup>th</sup> Ave NW  
Willmar, MN 56201

Application questions can be directed to:

Ellery Knight – Willmar Campus – (320)222-6071 [ellery.knight@ridgewater.edu](mailto:ellery.knight@ridgewater.edu)