Information for MTC LPN 2025-26 Program Applicants

We would like to thank you for your interest in our Practical Nursing Program! To ensure that all applicants receive full information about the program we require you to attend an Information Session. During this session you will receive full details about the program, the application process, and other necessary requirements.

INFORMATION SESSION SCHEDULE:

*	Tuesday, February 11, 2025	6:00 pm	PN 1 Classroom
*	Tuesday, March 4, 2025	5:00 pm	PN 1 Classroom
*	Tuesday, March 18, 2025	6:00 pm	PN 1 Classroom
*	Wednesday, April 16, 2025	1:00 pm	PN 1 Classroom
*	Tuesday, April 22, 2025	6:00 pm	PN 1 Classroom
*	Monday, May 12, 2025	4:00 pm	PN 1 Classroom
*	Wednesday, May 14, 2025	1:00 pm	PN 1 Classroom
*	Tuesday, May 20, 2025	5:00 pm	PN 1 Classroom
*	Tuesday, June 3, 2025	6:00 pm	PN 1 Classroom
*	Thursday, June 5, 2025	4:00 pm	PN 1 Classroom

LISTED BELOW ARE NECESSARY DETAILS CONCERNING THE SESSION PLEASE READ CAREFULLY!

- High School seniors are encouraged to bring a parent to the session
- Please make arrangements for childcare No children are allowed during the session
- The presentation will last approximately one hour
- You must return the attached form to reserve your spot
- If you are unable to make the session you chose, we ask that you call the office and reschedule BEFORE your chosen session

Applicants will be considered for admission by a committee of qualified MTC staff members and nursing instructors. Applicants will only be considered if all criteria have been met. Applicants are required to attend an Information Session as soon as possible to obtain details. Space in the program is limited, so applying early is recommended.

ALL APPLICANTS WILL BE NOTIFIED BY MAIL OF ADMITTANCE STATUS BY THE LAST WEEK OF JUNE.

We appreciate your patience during this lengthy process and ask that you refrain from calling the office to obtain your application status.

Thank you again for your interest in the Practical Nursing program at Massanutten Technical Center.

Stephanie Carpenter Health Occupations Director

Information Session Reservation Form

Please reserve a place for me to attend an Information Session on the date that I have chosen below.

Complete the information below and print clearly.

First Name	M.I	Last Name				
Maiden Name (If Applicable)						
Social Security Number						
Birth Date						
Address						
City/State/Zip						
Home Phone Number_						
Cell Phone Number	ll Phone NumberWork Number					
Email Address						
CURRENT HIGH SCHOOL STUDENTS ONLY:						
*High School		Current Grade				

PLEASE CIRCLE THE DATE/TIME YOU WISH TO ATTEND:

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* Thursday, June 5, 2025	4:00 pm	PN 1 Classroom

Please return your reservation form <u>in person</u>, to the office. At that time, we will provide you with further documents and information needed for the application process.

* Please Note: