|  |
| --- |
| James E. Van Zandt VA Medical Center2907 Pleasant Valley boulevardaltoona, pa 16602 |
| Primary CareNurse Practitioner Residency Application  |
| A picture containing logo  Description automatically generated  |
|   |
|  |
|  |

|  |
| --- |
| Please complete the application using Microsoft Word, print, and sign. Completed applications and CVs should be scanned and submitted as a PDF email attachment. Applicants are encouraged to keep a copy of the completed document for their own records. Incomplete applications will not be accepted or reviewed. Submit applications to Julia.Paronish-Ludwig@va.gov |

| Primary Care NP RESIDENCY APPLICATION  |
| --- |
| Applicant Information |
| Name: Click here to enter text. |
| Phone: Click here to enter text. |
| Current address: Click here to enter text. |
| City: Click here to enter text. | State: Click here to enter text. | ZIP Code: Click here to enter text. |
| Email: Click here to enter text. |
| Graduate Nursing education |
| School: Click here to enter text. |
| City: Click here to enter text. | State: Click here to enter text. |
| Dates attended: From Click here to enter a date. To Click here to enter a date. |
| Degree: Choose an item. | Honors/Awards: Click here to enter text. |
| Other graduate degrees/certificates: Click here to enter text. |
| undergraduate education |
| School: Click here to enter text. |
| City: Click here to enter text. | State: Click here to enter text. |
| Dates attended: From Click here to enter a date. To Click here to enter a date. |
| Degree: Click here to enter text. | Honors/Awards: Click here to enter text. |
|  |
| School: Click here to enter text. |
| City: Click here to enter text. | State: Click here to enter text. |
| Dates attended: From Click here to enter a date. To Click here to enter a date. |
| Degree: Click here to enter text. | Honors/Awards: Click here to enter text. |
| Veteran information |
| Are you a Veteran or do you have a significant Military Background? Choose an item. | If yes, please describe: Click here to enter text. |
| Are you a current or previous VA employee? Choose an item. | If yes, include dates and assignments. Click here to enter text. |
| VANAP-GE experience |
| Were you a PC-NP trainee or did you complete the majority of your graduate clinical experience at the VA? Choose an item. If so, what VA location? Click here to enter text. |
| Interest statement |
| Please provide interest statement (no more than one, double-spaced pages; can be completed on a separate page to include as a PDF attachment) and must clearly address the following:* Reasons for wanting to complete an NP residency versus securing employment
* Motivation for working with the Veteran population
* Level of commitment to a career in the VA Healthcare System

Click here to enter text. |
| Letters of reference |
| Please include three letters of reference (academic instructor, a preceptor and one from a place of employment/co-worker) which include the following:* A paragraph or sentence explaining how you know the applicant and the nature of your relationship with him/her.
* An honest evaluation of the applicants’ skills and accomplishments. Try to include specific examples.
* A statement or summary that explains why you would recommend the applicant for the PC-NPR Residency.

Letters must be *scanned and sent as a .PDF attachment with a handwritten signature* via email to: Julia.Paronish-Ludwig@va.gov |
| Curriculum Vitae |
| Please include a copy of your most recent CV. This should be included with submission of your completed application in PDF format. |
| Signature |
| I do hereby attest that the information in this document is true, accurate, and complete to the best of my knowledge and I understand that any falsification, omission, or concealment of material may result in my application not being considered for review.  |
| Signature: | Date: |