

Doctor of Nursing Practice Applicant Writing Sample

Applicant Name (First and Last Name): _____

Applicant Email: _____

Directions: Complete the following prompt and return to the Graduate School either via email as a saved .pdf attachment to gradschl@up.edu or as a printed document via mail to the address listed above in the right hand corner. Please be sure this completed form is included in your email or mail. For any program specific questions, please contact Becca Fischer via email at fischer@up.edu or by phone at 503.943.7423.

- ***If you are currently a nurse practitioner, please respond to the following: Please describe (1) Your understanding of what the doctorate of nursing practice education will add to your current nurse practitioner role (provide examples) and (2) Your understanding of integrative health and how it blends with your nurse practitioner role (provide examples).***
- ***If you are not currently a nurse practitioner, please respond to the following: Please describe (1) Your understanding of the family nurse practitioner role and why you are interested in this role, (2) Your perception of what the doctorate of nursing practice education adds to advanced practice nursing, and (3) Your understanding of integrative health and how it blends with the nurse practitioner role.***