

2020-21  
Wisconsin Indianhead Technical College  
Nursing-Associate Degree  
**Commitment to Enter ADN Program**

Name: First, Last, MI \_\_\_\_\_

Student ID Number: \_\_\_\_\_ Home Phone No. (\_\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_ Cell Phone No. (\_\_\_\_\_) \_\_\_\_\_

Permanent Address:  
Street/RFD/PO Box: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Mailing Address:  
Street/RFD/PO Box: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

I commit to enter the Associate Degree Nursing Program in the semester of \_\_\_\_\_

At the WITC \_\_\_\_\_ Campus.

If, after I have attended the ADN Program Orientation, I decide that I will not be able to begin the ADN core program, I understand that it is my responsibility to notify the **campus Admissions Advisor**. By notifying the campus Admissions Advisor of my desire to not enter the ADN program at the above-declared semester, I understand I will need to reapply during the next petition process.

Finally, I understand that I **must attend the mandatory orientation session** prior to the semester I begin the core ADN coursework, even if this means I will have attended multiple orientation sessions. Since the ADN program is constantly updating and revising program requirements, it is essential to attend the orientation for the class I will attend.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_