

## 2024-2025 FNP Residency Program Application

**Application Instructions and Requirements** 

Application Details	
Application Deadline	Application will close on May 31, 2024 at 11:59pm PST
Application Website	https://ccalac.org/2024-2025-fnp-residency-program-application-2
For questions regarding submitting your application	Please e-mail Alexander Gil at agil@ccalac.org
Who can apply for the Residency Program?	The program is open to Family Nurse Practitioners (FNP) only. 2022 graduates (or later) from accredited U.S. schools may apply. Only applicants who successfully submit all of the program requirements below by the application deadline will be considered.
Tentative Program Timeline *(subject to change)	<ul> <li>May 31,2024: Application deadline</li> <li>June: Application review (those not selected to move forward will be notified via e-mail by 6/30/24)</li> <li>July: 1st interviews via Zoom (those not selected to move forward to 2nd interviews will be notified by 7/31/24)</li> <li>August: Health centers conduct 2nd interviews (in-person)</li> <li>September: Matching takes place. Final applicants selected. Offer Letters are signed and onboarding begins.</li> <li>October 14, 2024: Program begins</li> <li>October 17, 2025: Program ends</li> </ul>
Placement Preferences	Will applicants be able to request placement preferences? Yes, geographical preferences will be reviewed and considered during 1 <sup>st</sup> and 2 <sup>nd</sup> interviews. Preferences will be taken into account as much as possible, however the program cannot guarantee preferred placements and will do its best to accommodate everyone as much as possible.

APPLICATION REQUIREMENTS & SUBMISSION DETAILS * All documents submitted must be in PDF Format*	
Application Form (Complete online)	Submit on the CCALAC Website. Form will ask you for your name, e-mail, phone number, and demographic questions. The form will also be utilized for you to upload the documents below.
Submit the following (upload online):	If available, upload with your Application on the CCALAC Website
1) Proof of current RNP license and prescriptive authority in CA	• RNP License: If <u>not</u> available at time of application, you will need to provide before the start of the program (failure to submit will result in no longer being considered for the program).
2) Proof of current copy of malpractice insurance as RNP	<ul> <li>Malpractice Insurance is required before you begin working in the residency program. (Minimum of 1 million dollars per incident). We recommend you join American Association of Nurse Practitioners to receive the NSO discount (Nurses Service Organization). If not available at time of application, you will need to provide before starting at your placement site, no exceptions.</li> </ul>
3) Proof of National Certification or form confirming test date	• National Certification or form/document confirming upcoming <u>test date</u> .
Current and Updated Curriculum Vitae (CV)/Resume (upload online)	<ul> <li>Submit on the CCALAC Website along with your Application Form. Please make sure it includes at the minimum, the following:</li> <li>1. Education: List all colleges and universities attended, indicate degrees earned if applicable, beginning with most recent.</li> <li>2. Professional Work History</li> <li>3. Awards and Honors</li> </ul>
Personal Statement (upload online)	<ul> <li>Submit on the CCALAC website along with your Application Form.</li> <li>In 2 (two) doubled spaced pages or less (12 Font, Times New Roman), please submit responses to the following six questions below. This is an opportunity to reflect upon and communicate to us your personal statement of qualifications, interest, and motivation in acceptance to this residency. Essay format.</li> <li>1. What experiences have led you to choose nursing as a profession and the role of a Family Nurse Practitioner as a specialty practice?</li> </ul>

	<ol> <li>Explain your desired commitment to complete the residency program as scheduled.</li> </ol>
	3. What are the goals you are looking to accomplish during your residency? Please identify specific areas of interest by lifecycle, age or setting that you would like to develop an increased mastery, competency or confidence in.
	4. Tell us about the patient population you want to provide care for and why? Perhaps you can share about your past experience working with underserved and vulnerable populations.
	5. Where do you see yourself post-residency?
	6. What procedures do you need additional education/training in at this time?
Supplemental Questions (upload online)	Download word document and complete. Upload on the CCALAC website along with your Application Form. Make sure and PDF the word document.
Official Graduate School Transcript(s)	If <u>official transcripts</u> are available, please send to Alexander Gil at <u>agil@ccalac.org.</u> If official transcripts are not available at time of application submission, <u>you can</u> <u>upload Unofficial Transcripts along with your application form.</u>
Two letters of Recommendation (E-mail)	Please have 2 references submit via e-mail to Alexander Gil in PDF Format. The letters must come from the person writing it only. Please email to <u>agil@ccalac.org</u> by the application deadline of 5/31/24.
	• The letter should address how the writer knows you, your academic ability and the characteristics the writer feels qualify you for this program. <u>One letter must</u> <u>be from a FNP preceptor and the other from a FNP program faculty.</u>
Interview	Qualified applicants will be contacted for a 1 <sup>st</sup> interview via Zoom. Applicants who are not selected will be notified via e-mail by June 30, 2024.

## Complete Online and Upload by 5/31/24:

- 1) Online Application Form
- 2) Resume/Curriculum Vitae (CV)
- 3) Personal Statement
- 4) Proof of National Certification or form confirming test date
- 5) Unofficial Transcript (if official are not available). Official transcripts may be e-mail to <u>agil@ccalac.org</u>
   \*Proof of current RNP license and prescriptive authority in CA (Optional)
   \*Proof of current copy of malpractice insurance as RNP (Optional)

## E-mail to Alexander Gil at agil@ccalac.org by 5/31/24:

- 1) Official Transcripts (if available)
- 2) 2 Letters of Recommendation (direct from sender)