



Participation Agreement Form

School Information

School Name:*

My School is a member of the American Association of Colleges of Nursing (AACN)

My school's nursing programs are accredited by:*

- Accreditation Commission for Education in Nursing (ACEN)
- Accreditation Commission for Midwifery Education
- Commission on Collegiate Nursing Education (CCNE)
- Commission on Nursing Education Accreditation (CNEA)
- Council on Accreditation of Nurse Anesthesia Educational Programs
- None of the above, currently my institution's nursing programs are a "new applicant" or seeking accreditation from one of the agencies above

School Type:

Academic Health Center

Private without Academic Health Center

Public without Academic Health Center

Small/Liberal Arts

Community College

Street Address:*

City:*

State:*

Zip Code:*

Nursing School Website:

Contact Information:

Please indicate your institution's Primary Contacts. The Primary Contacts will be designated as the main administrators of NursingCAS and WebAdMIT for your institution and will receive all crucial communications. You can update these contacts at any time by reaching out to nursingcas@aacnnursing.org.

Primary Contact 1

Primary Contact 1 Name:*

Primary Contact 1 Email:*

Primary Contact 1 Title:*

Primary Contact 1 Phone:*

Primary Contact 2

Primary Contact 2 Name:*

Primary Contact 2 Email:*

Primary Contact 2 Title:*

Primary Contact 2 Phone:*

Program Information

NursingCAS programs are categorized on the application as undergraduate or graduate level. Please indicate below if your school plans to post undergraduate, graduate, or both undergraduate and graduate nursing program(s) on NursingCAS. If you aren't sure what a program might be categorized as, please refer to the [Glossary of Nursing Degrees](#) information on nursingcas.org for guidance.

Undergraduate Programs* Yes No

How many seats are available for your undergraduate programs?*

How many applications do you expect to receive to fill those undergraduate seats?*

Graduate Programs* Yes No

How many seats are available for your graduate programs?*

How many applications do you expect to receive to fill those graduate seats?*

From the options below, please select which program type(s) you plan to process applications for via NursingCAS. Select all that apply.*

Doctoral	Bachelor's	Associate	Non-Degree
Master's	2 nd Degree	Certificate	LPN/LVN

For which semester of student matriculation will you begin processing applications in NursingCAS?*

This refers to the term in which the students who apply through NursingCAS will begin your program - not when your application opens. For example, if students will start your program in August 2026, select "Fall 2026."

Fall 2026	Spring 2027	Fall 2027	Spring 2028
Winter 2027	Summer 2027	Winter 2028	

What software system(s) does your school use? Below are examples of student information systems, document imaging systems, CRM systems, etc.* Check all that apply.

- | | | |
|--|--|---|
| <input type="checkbox"/> Admissions Pros | <input type="checkbox"/> FireEngineRed | <input type="checkbox"/> Radius by CampusManagement |
| <input type="checkbox"/> AMP (Zap Solutions) | <input type="checkbox"/> Goldmine | <input type="checkbox"/> Salesforce |
| <input type="checkbox"/> Axiom | <input type="checkbox"/> Hobsons | <input type="checkbox"/> SAP |
| <input type="checkbox"/> Banner by Ellucian | <input type="checkbox"/> Homegrown | <input type="checkbox"/> Slate |
| <input type="checkbox"/> CampusNexus | <input type="checkbox"/> ImageNow (Perceptive now
Lexmark) | <input type="checkbox"/> Spectrum EMP |
| <input type="checkbox"/> CampusVue | <input type="checkbox"/> Integrated Student Information
System (ISIS) | <input type="checkbox"/> Symplicity (Ascend) |
| <input type="checkbox"/> Colleague by Ellucian | <input type="checkbox"/> Jenzabar | <input type="checkbox"/> Talisma |
| <input type="checkbox"/> CollegeNet | <input type="checkbox"/> Laserfiche | <input type="checkbox"/> TargetX |
| <input type="checkbox"/> Collegix | <input type="checkbox"/> Microsoft Access | <input type="checkbox"/> Unit4 |
| <input type="checkbox"/> Common Application | <input type="checkbox"/> Microsoft Dynamics CRM | <input type="checkbox"/> VZ Apply (Visual Zen) |
| <input type="checkbox"/> DocuShare | <input type="checkbox"/> OnBase | <input type="checkbox"/> Workday |
| <input type="checkbox"/> DocuXplorer | <input type="checkbox"/> Oracle | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> Ellucian (formerly DataTel) | <input type="checkbox"/> PeopleSoft | <input type="checkbox"/> Other (please indicate) |
| <input type="checkbox"/> EMAS Pro | <input type="checkbox"/> PowerCampus by Ellucian | |
| <input type="checkbox"/> Embark | | |
| <input type="checkbox"/> Empower | | |

Usage Information

What are your goals in joining NursingCAS?*

Will applicants be required to complete another application to the school in addition to the NursingCAS application (a two-step application process) to be considered for admission?*

NursingCAS refers to these types of applications as "supplemental" applications. You should select Yes if, for example, the applicant will be required to apply for general admission to the college or university via a central admissions office.

Yes

No

Unsure

If Yes, why do you use an additional method?

Applicants are required to apply to the university/school for general admission in addition to the nursing program

Applicants are required to apply through a state university system application to be considered for general admission to the university or college in addition to the nursing program

The NursingCAS application does not collect all the information my program needs

In order to capture the supplemental/school specific fee

Other

If Other, please explain.

Will you charge a school-specific (supplemental) application fee in addition to the NursingCAS fee?*

Note: NursingCAS does NOT process supplemental fees on behalf of the school.

Yes

No

Unsure

If Yes, please input the dollar amount of your supplemental application fee:.

Additional Information

How did you learn about NursingCAS? Select all that apply.

AACN's website	Newsletter	Student
Conference	Colleague	News
Site visit	Dean	Open House
Presentation	Use another CAS	Other (please indicate)
Webinar	Referral	
Email	Applicant	

If Other, please explain.

Agreement

Please read and accept the NursingCAS [Policies](#) and Participation [Terms](#).

Participation Agreement:*

I understand that by submitting this form I am committing to have applicants apply through NursingCAS to my school's nursing program(s). I have read and I am agreeing to the terms outlined in the [Participation Agreement](#). The NursingCAS staff reserves the right to deactivate your listing on the application, restrict your access to the system, and withdraw your school from participation should we find that you are in violation of the Usage Policy or the NursingCAS Exclusivity Requirement.

I understand

NursingCAS Exclusivity Requirement*

As defined, the exclusivity requirement stipulates that for all programs included in NursingCAS, all initial applications to those programs must be submitted through NursingCAS. Schools may not offer the option to submit an institutional application for the same program-seeking applicants through NursingCAS. However, schools may choose to ask students to submit a second, supplemental application in addition to the NursingCAS application. Additional information is available at [NursingCAS Exclusivity Requirement](#).

I understand

Usage Policy:*

I understand that by submitting this form I am agreeing to the [NursingCAS Usage Policy](#). Full access to "In Progress" applicant data is viewable to users in WebAdMIT. It is permissible to export the NursingCAS applicant data into your internal university systems for the purpose of recruitment efforts and admissions workflow processes ONLY. NursingCAS prohibits any college or university from making an offer to an applicant before they have submitted their application through NursingCAS. Applicants generated to your program via NursingCAS are required to submit their application via NursingCAS should they wish to be considered for admission. The NursingCAS staff reserves the right to deactivate your listing on the application, restrict your access to the system, and withdraw your school from participation should we find that you are in violation of this usage agreement.

I understand

Accreditation Policy:*

I understand that by submitting this form I confirm that my program(s) are accredited as outlined below. Programs that are eligible to participate are those that grant RN diplomas, 2nd degree, associate, certificate/non-degree, bachelor’s, master’s, or doctoral degrees in nursing. Programs must have or must be seeking accreditation from the Commission on Collegiate Nursing Education (CCNE), the Accreditation Commission for Education in Nursing (ACEN), the Commission for Nursing Education Accreditation (CNEA), the Council on Accreditation of Nurse Anesthesia Educational Programs (COA), or the Accreditation Commission for Midwifery Education (ACME). Programs must notify the NursingCAS team of all accreditation status changes within 1 week via nursingcas@aacnnursing.org. NursingCAS programs which lose accreditation are responsible for notifying applicants immediately of the status change and refunding NursingCAS fees to applicants. NursingCAS will not be responsible for refunding fees to these applicants. If a program has new applicant status or is currently seeking accreditation from CCNE, ACEN, CNEA, COA, or ACME then AACN will decide whether or not and at what point that program will be eligible to participate in NursingCAS. Participation is open to non-AACN member schools.

I understand

Withdrawal Policy:*

I understand that schools reserve the right to withdraw participation from NursingCAS for any or all program(s) posted on NursingCAS. I understand if my school decides to voluntarily withdraw from NursingCAS, the primary contact from my school must sign and date a [NursingCAS Voluntary Withdrawal Form](#) and complete an exit survey. I understand that NursingCAS, Liaison International, and AACN are not responsible for refunding applicant fees. Schools should refund applicants their applicant fees in this scenario. You will need to notify AACN's Director of Application Services, Taylor Jaczko, at tjaczko@aacnnursing.org. of your decision. I understand that schools cannot officially withdraw from NursingCAS until they complete a posted program's application cycle, once the deadline arrives, schools can then deactivate their program listing should they choose to withdraw and will continue to have access to any submitted applications via WebAdMIT, the admissions software for NursingCAS.

I understand

Background Questions Policy:*

I acknowledge that my program is responsible for the content collected within custom questions on the NursingCAS application. I understand it is the responsibility of each school to work with their internal legal counsel annually to determine if/how they should collect applicant background information (or other sensitive information) per individual state laws. I further understand that Liaison International and the American Association of Colleges of Nursing will not be responsible for ensuring the legality of any questions or content added by NursingCAS participating programs. Content within custom questions is the responsibility of each institution. Additional information is available at [Background Questions Policy](#).

I understand

Submitter Contact Name:

First Last

Submitter Title:

Submitter Email:

Signature:

Date:
