Student Profile

**Name**       **Date**

**Year graduated high school**       **Current Nursing course**

**Were you registered in another program before nursing? [ ]  No [ ]  Yes (which one?)**

Language

Mother tongue      Other languages spoken

Language of previous schooling

Fluency in oral English [ ]  poor [ ]  moderate [ ]  fluent

Fluency in written English [ ]  poor [ ]  moderate [ ]  fluent

Fluency in English listening skills [ ]  poor [ ]  moderate [ ]  fluent

Fluency in English reading skills [ ]  poor [ ]  moderate [ ]  fluent

Proficiency in Sciences

Previous studies (average mark)       Nursing Program (average mark)

Present course load

No. of courses

Other time commitments (hours/week)

Family       Work       Other

Personal experience related to test-taking

|  |
| --- |
| Describe briefly how you prepare for your nursing tests.      |

Rate your level of anxiety in regards to writing nursing tests.

Low [ ]  0 [ ]  1 [ ]  2 [ ]  3 [ ]  4 [ ]  5 [ ]  6 [ ]  7 [ ]  8 [ ]  9 [ ]  10 [ ]  High

Are you aware of the following college resources?

[ ]  Counselling [ ]  Financial aid [ ]  Learning Center [ ]  Tutor/Mentor [ ]  College Nurse

[ ]  Other

What factors do you think contributed to your test mark?

|  |
| --- |
|       |