

FIRST YEAR APPLICATION

January 2010

Dear Nursing Program Applicant:

Thank you for your interest in the nursing program at Treasure Valley Community College.

A career in nursing provides a stimulating blend of scientific knowledge with the caring of people. Although it is a very demanding and dynamic discipline requiring good academic and interpersonal skills, the rewards provide personal and professional satisfaction.

Since nursing is a demanding discipline, admission is selective, and enrollment is limited. Our selection process is based on a point system. Enclosed is the score sheet used in this process. The number of qualified applicants to be admitted is determined by several factors including budgetary restrictions, administrative decisions and faculty availability. We will be admitting approximately 28-30 students this year.

Information about the program, application instructions and forms are attached. Preadmission testing deadline and instructions are included. If you have any questions concerning the application process, please phone or e-mail the Nursing Department.

All applicants who have completed files will be notified in writing by May 15 concerning his/her acceptance into the Nursing program. Please do not phone the Nursing Department inquiring about your status in the program. The Department will be unable to give you this information over the phone.

We wish you well in pursuing your goal.

Sincerely,

Maureen McDonough RN, MS
Nursing Program Director
(541) 881-8822 Ext: 345
E-mail: mmcdonou@tvcc.cc

TREASURE VALLEY COMMUNITY COLLEGE
NURSING PROGRAM
ASSOCIATE OF APPLIED SCIENCE IN NURSING (AAS DEGREE)
(Practical Nursing Optional Exit)

APPLICATION INSTRUCTIONS 2010
PLEASE FOLLOW THESE DIRECTIONS

The following documents must be submitted (mailed or hand delivered)
to the TVCC Nursing Secretary's Office by
APRIL 13, 2010.

1. Completed Personal Data form (attached, page 3 & 4) for nursing program.
2. Nursing Program Regulations for Admission and Continued Participation Statement signed (attached, page 7).
3. Completed Conditions Affecting Licensure form (page 8).
4. Signed Authorization of Records form (attached, page 9).
5. Completed TVCC Application for Admission form (attached), if one has not been completed prior to now.
6. Official Transcripts from all colleges (other than TVCC) that you have attended.
If you have already sent official transcripts to the registrar, **you still are required to submit unofficial transcripts to the Nursing Department.**
7. Copy of TVCC Compass Placement score if Writing 121 has not been completed.
8. Copy of current Oregon or Idaho Nursing Assistant Certificate (if you are certified and wish to receive the 30 points)
OR
A copy of transcript or course completion document showing Nursing Assistant Course completion and confirmation of state testing dates (Oregon or Idaho only). If you do not have a current Nursing Assistant certificate and wish to be awarded the 30 points you need to have completed a Nursing Assistant course in Oregon or Idaho with documentation of course completion in your file by application deadline and have applied for the state certification exams. You must pass the exams and submit a copy of your certificate by September 1, 2010. If you fail to do this, the 30 points will be rescinded. This could mean that your total number of points are no longer high enough for you to be accepted into the program.
8. Copy of high school diploma (or transcript showing graduation date), high school equivalency, or GED. This is required regardless of college level work.

NOTE:

-MATH 95 (intermediate algebra) or higher must be completed and transcribed with a grade of "C" or above by the nursing application deadline in order to be considered for admission.

-If the applicant has not completed at least one anatomy and physiology (A&P) course and will be taking A&P at TVCC, she/he must complete Biology 101 and Chemistry 104 (prerequisites to A&P) prior to enrolling in A&P.

9. SCORES from nursing PRE-ADMISSION test (National League for Nursing, PAX-RN). This is not the TVCC Compass Placement test. If you took the test in July or November or are taking the test this March at TVCC, a copy of your test results will be placed in your file. If taken during a prior year or in a location other than TVCC, you must submit a copy to the nursing department.
- Pre registration and PAYMENT of a nonrefundable fee of \$47.00 payable to TVCC by cashiers check or money order (NO cash or personal check) must be submitted at TVCC Nursing Ontario office by **February 18, 2010**. If you miss this deadline you will be unable to take the exam, which will render you ineligible for the nursing program. **Make the MONEY ORDER out to TVCC Nursing; send to TVCC Nursing Department, ATTN: Nancy Olson, 650 College Blvd, Ontario, OR 97914. Include your LEGIBLE and PRINTED Name, Address and Phone number. (DO NOT SEND TO ADMISSIONS, OR TO THE CALDWELL CAMPUS.)**
 - DATE of Exam is **Saturday, March 6, 2010, 9:00 am-1:00 pm** (location will be announced).
 - Content of test will cover reading comprehension, word knowledge, basic mathematics (basic arithmetic and algebraic concepts) and Science.
 - Results of the NLN test will be mailed directly to the applicant from the test company with one copy sent to TVCC, which will be placed in the applicant's file.
To be considered, minimum scores must be:
A 40th percentile in each area (verbal, math, science, composite) in any one column (DI, AD, or ALL). The composite score from the “ALL” column will be used for the “points”, provided the 40th percentile requirement has been met. Ignore the “score” column.
10. Letters from Director of nursing program and Instructor who directly supervised you if you attended and withdrew and/or received an unsatisfactory grade in nursing from any LPN/RN nursing program. These letters must verify applicants “good standing” in prior nursing program.

HAND DELIVER OR MAIL ABOVE DOCUMENTS TO:

TVCC Nursing Department
Attn: Nancy Olson
650 College Blvd.
Ontario, OR 97914

You will be notified in writing by May 14 regarding your status.

All of the above requirements must be in the applicant's file in the TVCC Nursing Department by April 13 to be considered as an applicant for admission. ONLY COMPLETED FILES WILL BE REVIEWED. It is the applicant's responsibility to see that the file is complete.

TREASURE VALLEY COMMUNITY COLLEGE
NURSING PROGRAM APPLICATION

PERSONAL DATA FORM
First Year Students

NAME _____
LAST FIRST MIDDLE

PREVIOUS NAMES _____
(List all previous names for identification on high school and college transcripts)

ADDRESS _____
ADDRESS CITY STATE ZIP

TELEPHONE _____

TVCC Student ID# _____ (if currently enrolled at TVCC)

List all colleges/universities attended (including TVCC):

MARK ONE OF THE OPTION'S BELOW:

- Prior to applying to the program I had my official transcripts sent to the TVCC registrar
You must also include these unofficial transcripts (other than TVCC) with your application
- I have submitted my official transcripts (other than TVCC) to the Nursing Department in my application.

NURSING ASSISTANT CERTIFICATION

I am currently certified as a nursing assistant in Oregon or Idaho Yes No

RESIDENCY

Residence is defined as a person's domicile, his/her true fixed and permanent home and place of habitation. It is the place where one intends to remain, and to which one expects to return when one leaves without intending to establish a new domicile elsewhere. Domicile is not established by mere attendance at the College.

If you believe that you qualify for the 10 points given to applicants "living in the community", reside in the TVCC taxing district and/or reside within a 30 air-mile radius of Ontario (your city of residence is used to determine the 30 mile radius), you must submit proof of physical residence by the following documents:

Utility receipts with your name and physical address listed showing proof of residence in the "community" for a 12 month period. Submit the following two receipts:

1. Utility receipts from January 2009 and January 2010
OR
2. Utility receipts from February 2009 and February 2010
OR
3. Utility receipts from March 2009 and March 2010.

If the applicant is a dependent and resides in the "community" with a parent(s), the following documentation must be provided:

1. Driver's license with physical residence listed
AND
2. A letter from the parent verifying your place of residence and dependent status.

The points for "living in the community" will not be given without this documentation.

If there appears to be an inconsistency, the nursing faculty will require further documentation.

All nursing department written communication will be mailed to the address listed.

PRINT NAME _____

SIGNATURE

DATE

TREASURE VALLEY COMMUNITY COLLEGE
NURSING PROGRAM APPLICATION

REGULATIONS FOR ADMISSION AND CONTINUED PARTICIPATION

These regulations describe requirements relating to admission to the nursing program and for continued participation in the program. Persons applying for admission are referred to as "applicants". Persons admitted to the program are referred to as "students".

1. Academic requirements for admission include: (a) a high school diploma, high school equivalency, or GED; (b) satisfactory scores on entrance exam administered by the program.
2. Continuation in the program requires successful completion of all required courses with a grade of "Satisfactory", "C" or above. Students must complete required general education courses in the sequence listed in the curriculum guide or before. A student must complete all first year nursing courses with a "B" average and receive a 2.70 in general education courses in order to progress to the second year of the nursing program.
3. A physical examination and medical history are required to be submitted by September 1 for persons admitted to first year.
 - A. Applicants and students must demonstrate a personal history compatible with obtaining a license to practice Nursing in Oregon. Admission to and graduation from the nursing program does not assure eligibility for licensure. The Oregon State Board of Nursing (OSBN) makes the determination about eligibility for licensure. The OSBN may not license persons with certain criminal convictions or with a major mental or physical illness that could affect ability to practice safely. Applicants or students with questions about licensing regulations may want to call the OSBN at (971) 673-0685.
 - B. Students admitted into the program will be required to pass a criminal background check (at the student's expense). Final acceptance is contingent upon passing the criminal background check. If a student is arrested during the time he/she is enrolled in the nursing program, he/she must notify the Nursing Director of the arrest. The student's status in the program will be reviewed by the Nursing Director. A possible outcome of the review may be the student's inability to continue in the program.
 - C. Students admitted into the program will be required to have a physical examination indicating physical and mental health sufficient to complete the program and function as a nurse (see "Essential Nursing Functions", page 10-11). Current immunizations are also required.
 - D. A student admitted to the program with a history of substance abuse with subsequent treatment will be monitored throughout the program for observation of substance abuse. Random drug testing may be required.
 - E. Any student whose behavior indicates use of alcohol and/or drugs will be required to undergo urine and blood testing to detect the presence of alcohol and/or drugs. Results must be provided to the Nursing Program Director at the student's expense. A positive test will result in immediate dismissal from the program.
 - F. Any student with a chronic or recurring illness (physical or mental) may be asked to provide a physician's statement indicating the student's prognosis and treatment plan. A student shall comply with the provisions of the treatment plan in order to progress in the program. Behaviors indicating inability of the student to satisfactorily complete requirements of the nursing program and behaviors that jeopardize patient safety will cause the student to be denied progression in the program.

- G. Students admitted into the program are required to submit the following by September 1, 2010:
1. A completed physical examination form;
 2. Results of a current TB screening test;
 3. Tetanus immunization within the past 10 years;
 4. Documentation of immunity to measles (both rubeola and rubella) and hepatitis B (if a student has not had the three hepatitis B immunizations, he/she must have had a minimum of one immunization prior to the first day of class.)
 5. Documentation of current CPR (Healthcare Provider Level) certification.
 6. Documentation of personal health/accident insurance coverage.

***TB and CPR reports are current if they are dated after December 1, 2009.**

STUDENTS WHO DO NOT SUBMIT ALL DOCUMENTS WILL NOT BE ALLOWED TO BEGIN NURS 101, AND AN ALTERNATE WILL BE ACCEPTED.

4. Any applicant whose certificate to perform duties as a Nursing Assistant or license to practice nursing, at any level, in any state has been suspended or revoked will be denied admission to the program.
5. Every nursing program applicant and student must answer questions to determine if there is a personal history of a 1) conviction for a criminal offense, or 2) physical or mental health problems that might interfere with the requirements of nursing practice. Failure to provide truthful and complete answers to these questions will result in denial of admission for applicants and dismissal for students.
6. Nursing students have a \$2000/year clinical fee which will be assessed over fall, winter and spring quarters both years, and a \$500/year simulation fee which is assessed both fall quarters.
7. Nursing courses for first year students begin in September. BIOL 231 and BIOL 232 (A&P) must be completed satisfactorily (a grade of "C" or above) before fall quarter enrollment in nursing courses. Please note the prerequisites for A&P. Students should also have completed BIOL233 since it may not be offered fall quarter.

TREASURE VALLEY COMMUNITY COLLEGE
NURSING PROGRAM APPLICATION

AGREEMENT OF REGULATIONS FOR ADMISSION AND CONTINUED PARTICIPATION

I hereby state that I:

- (a) Have read and have a copy of the Nursing Program Regulation for Admission and Continued Participation.

- (b) Have asked nursing faculty/ staff to clarify any questions about the regulations that are unclear to me, and understand its contents and provisions.

- (c) Agree to comply with the Nursing Program Regulation/Requirements for Admission and Continued Participation and the procedures provided therein.

- (d) Understand that final acceptance into the nursing program is contingent upon passing a physical and a criminal background check which I will be required to obtain at my expense.

Date _____

Print Name _____

Signature _____

CONDITIONS AFFECTING LICENSURE

Please complete and submit this form. Attach additional pages if needed. The Oregon State Board of Nursing may rule on questions that will be asked when you apply for licensure.

1. Have you ever suffered from or had treatment for drug or alcohol problems? If yes, please describe, including your current recovery status.
2. Are you currently or have you ever been licensed or certified to practice nursing as an RN, LPN, or Nurse's Aide in Oregon or another state? Please describe.
3. If yes, were you ever the subject of a disciplinary action by the state agency in charge of licensure? What was the outcome?
4. Have you been arrested, charged with, entered a plea of guilty, nolo contendere, or convicted of or been sentenced for any criminal offense, including driving under the influence in any state? If yes, please attach detailed information.
5. Have any disciplinary actions been taken against your nursing assistant certification/nursing license?
6. Are any disciplinary actions pending against your nursing assistant certification/nursing license?
7. Do you have a physical, mental or emotional condition that might effect your ability to practice nursing?

PRINT NAME _____

Signature

Date

TREASURE VALLEY COMMUNITY COLLEGE
NURSING PROGRAM APPLICATION

AUTHORIZATION OF RECORDS

I authorize Treasure Valley Community College to inquire as to my records or personal references of any or all persons, agencies, and of former employers with no liability arising there-from.

Signature

Date

ESSENTIAL FUNCTIONS:

The practice of Nursing requires the following functional abilities:

Gross Motor/Physical Endurance:

Sufficient physical endurance, strength and mobility to perform required client care activities in a safe and effective manner for the entire length of the clinical experience.

Examples of relevant activities:

- Working 8 or 12-hour shifts, days, evenings or nights, weekends, holidays.
- Standing, walking, bending, squatting, lifting or moving clients or objects weighing 25 to 50 pounds or more.
- Able to ambulate up minimum of four flights of stairs.

Fine Motor:

Sufficient to perform manual psychomotor skills integral to patient care.

Examples of relevant activities:

- Manipulate small equipment and containers (i.e. syringes, vials, ampules, and medication packages) to administer medications.

Visual Ability:

Sufficient to independently assess patients and their environments.

Examples of relevant activities:

- Detect changes in skin color or condition.
- Collect data from recording equipment and measurement devices used in patient care.
- Detect a fire in a patient area and initiate emergency action.
- Draw up the correct quantity of medication into a syringe.

Hearing Ability:

Sufficient to physical monitoring and assessment of client health care needs.

Examples of relevant activities:

- Hear faint body sounds (i.e. blood pressure sounds, assess placement of tubes).
- Hear auditory alarms (i.e. monitors, fire alarms, call bells).
- Hear normal speaking level sounds (i.e. person-to-person reports).

Olfactory Ability:

Sufficient to detect significant environment and client odors.

Example of relevant activity:

- Detect odors from client and environment.

Tactile Ability:

Sufficient to independently assess patients and to implement the nursing care plans that are developed from such assessments.

Examples of relevant activities:

- Detect changes in skin temperature.
- Detect unsafe temperature levels in heat-producing devices used in patient care.
- Detect anatomical abnormalities (i.e. subcutaneous crepitus, edema, or infiltrated intravenous fluid).
- Detect vibrations.

Communication Ability:

Sufficient ability to speak, comprehend, read, and write (print and cursive) in English at a level that meets the need for accurate, clear, and effective communication.

Examples of relevant activities:

- Give clear oral reports.
- Direct activities of others by providing clear written and oral instructions to others.
- Influence people's actions.
- Be able to communicate effectively on the telephone.
- Legibly convey information through writing.

Reading Ability:

Sufficient to comprehend the written word.

Examples of relevant activities:

- Read graphs (i.e. vital signs sheets).
- Read and understand English printed and hand written documents.

Math Ability:

Sufficient to do accurate computations.

Examples of relevant activities:

- Read measurement marks.
- Count rates.
- Read digital displays.
- Tell and measure time (i.e. count duration of contractions, etc.).
- Accurately calculate medication dosages.
- Accurately calculate intake and output.

Critical Thinking Ability:

Sufficient to collect, analyze, integrate, and generalize information and knowledge to make clinical judgements and management decisions that promote positive patient outcomes.

Examples of relevant activities:

- Evaluate outcomes.
- Transfer knowledge from one situation to another.
- Process information.
- Prioritize tasks.
- Use long and short term memory.
- Problem solve.

Emotional Stability:

Sufficient to assume responsibility/accountability for actions.

Examples of relevant activities:

- Establish therapeutic relationships and communicate in a supportive manner.
- Deal with the unexpected (i.e. client becoming critical, crisis).
- Handle strong emotions.
- Adapt to changing environment/stress.
- Focus attention on task.
- Monitor own emotions and be able to keep emotional control.

Interpersonal Skills:

Sufficient to interact with individuals, families and groups respecting social, cultural and spiritual diversity.

Examples of relevant activities:

- Negotiate interpersonal conflict.
- Establish positive rapport with clients, co-workers, and faculty.
- Interact with others effectively.

TREASURE VALLEY COLLEGE
NURSING PROGRAM

APPLICATION FILE CHECK LIST

FOR YOUR INFORMATION ONLY

DO NOT SUBMIT

	DATE IN FILE
1. Completed Personal Data Form. (Page 3-4)	
2. Signed nursing department agreement of "Regulations for Admission and Continued Participation" Form. (Page 7)	
3. Completed and signed Conditions Affecting Licensure Form (page 8)	
4. Authorization of Records Signed. (Page 9)	
5. TVCC Application for admission, if not previously on file (last page)	
6. Official Transcripts from all colleges (other than TVCC) that you have attended. List any previous names:	
7. Copy of TVCC Compass Placement score if WR 121 has not been completed.	
8. Copy of current CNA certificate (if applicable) or transcript/completion document of NA course with documentation of state testing dates.	
9. High School Transcripts (even if you have had College courses)/Diploma/High School Equivalency/GED. (List any previous name you had for identification of transcript)	
10. Pre-Admission Test Scores; National League for Nursing (PAX-RN) (Not College Compass Test). See Application Instructions for minimum scores. (This test is given in March.) If you took the test in July or November or are taking the test in March, a copy of your results will be sent to TVCC by the National League for Nursing. If taken during a prior year or in a location other than TVCC, please arrange to have a copy in your file.	
11. Letter from Director <u>and</u> direct supervising Instructor from any prior LPN or RN school of nursing verifying good standing (i.e. if you withdrew from another school of nursing). Have letters sent directly to the TVCC Nursing Department.	

NOTE:

- Completion of MATH 95 or higher with a grade of "C" or above.
- If applicant has not completed at least one anatomy and physiology (A&P) course and will be taking A&P at TVCC, she/he must complete Biology 101 and Chemistry 104 (prerequisites to A&P) prior to enrollment in A&P.



1ST YEAR!!!

HAVE YOU
REGISTERED
FOR THE
ENTRANCE EXAM
(PAX TEST)?

REGISTRATION
AND MONEY ORDER DUE
FEBRUARY 18TH, 2010.

TEST DATE:
MARCH 6TH, 2010

PLEASE COMPLETE EVERY ITEM - LEAVE NOTHING BLANK

_____ Last Name	_____ First Name	_____ M.I.
_____ Permanent Physical Address	_____ City	_____ State
_____ Mailing Address (if different than above)	_____ City	_____ State
_____ Telephone	_____ E-mail Address	
_____ Social Security Number	_____ Date of Birth	

Gender: __ Male __ Female	Citizenship: __ U.S. Citizen/Permanent resident of Oregon __ U.S. Citizen/NOT residing in Oregon __ International Student	U.S. Veteran? __ Yes __ No
-------------------------------------	---	--------------------------------------

***Ethnic Identity:**
 __ American Indian / Alaskan Native
 __ Black/African American
 __ Asian / Pacific Islander
 __ Latino / Hispanic
 __ White-Non-Hispanic
 __ Other

Is English your second language? __ Yes __ No	Are you the first person in your family household to attend college? __ Yes __ No
---	---

Current Employment:
 __ Employed 35 hours/week or more
 __ Employed less than 35 hours/week
 __ Retired
 __ Not Employed

High school completed:
 __ Still in high school
 __ High School Diploma
 __ GED
 __ CIM
 __ Proficiency exam
 __ Home school
 __ High School Diploma from a community college
 __ External diploma program

Primary reason for attending TVCC:
 __ Take transferrable classes
 __ Learn job skills
 __ Improve job skills
 __ Explore Career/Academics
 __ Take Classes to earn HS diploma/GED
 __ Improve reading/writing/math skills
 __ Learn English Language
 __ Personal Interests
 __ Other

Do you plan to earn a degree or certificate at TVCC?
 __ Yes, certificate or 2-year degree
 __ Yes, High School Diploma or GED
 __ No
 __ Undecided

Highest level of post-secondary education or degree you have completed:
 __ None
 __ Other (short term training)
 __ 1-Year Certificate
 __ 2-Year Associate Degree
 __ Bachelor's Degree
 __ Master's Degree
 __ Ph.D./Professional Degree

LAST HIGH SCHOOL/ GED CENTER/ HIGH SCHOOL EQUIVALENCY PROGRAM ATTENDED:

School

State

Year

Did you graduate? __ Yes __ No

PREVIOUS COLLEGES ATTENDED: (Please list TVCC if you have attended previously.)

_____ School	_____ Year	_____ State	_____ Degree(s) or Certificate(s) Earned
_____ School	_____ Year	_____ State	_____ Degree(s) or Certificate(s) Earned
_____ School	_____ Year	_____ State	_____ Degree(s) or Certificate(s) Earned

Please have all colleges you have previously attended send official transcripts to TVCC Admissions.

I PLAN TO ENROLL AT TVCC THE FOLLOWING TERM(S):

School Year: _____ __ Fall __ Winter __ Spring __ Summer
 __ Full Time (12+ credits) __ Part Time

Intended Program of Study _____ Program Code _____**
 Interested in on-campus housing? __ Yes __ No

I certify that all information I have provided in this application is true and complete.

Signature

Date

Providing your social security number is voluntary. If you provide it, the college will use your social security number for keeping records, doing research, reporting, extending credit, and collecting debts. The college will not use your number to make any decision directly affecting you or any other person. Your social security number will not be given to the general public. If you choose not to provide your social security number, you will not be denied any rights as a student. Providing your SSN means that you consent to the use of your number in the manner described.

TVCC releases student "directory information" which includes enrollment status, major, enrollment dates, degrees or certificates earned/honors posted, athletic participation, weight & height of members of athletic teams, and for military purposes only - name, age, and address. If you do not want directory information released, please contact the Student Services Center, (541) 881-8822, for the necessary form and additional information.

* This information is required for institutional compliance with the Civil Rights Act of 1964 and is used for statistical and demographic purposes only.

It is the policy of the Treasure Valley Community College Board of Education and the College that there will be no discrimination or harassment on the grounds of race, color, gender, marital status, religion, national origin, age or disability in any educational program, activity or employment. Persons having questions about equal opportunity and non-discrimination should contact the Human Resources Director located in the Student Services Center on the south side of the Four Rivers Cultural Center Building. Telephone (541) 881-8822, ext. 226 or TDD (541) 881-2723.

Persons having questions about or requests for special needs and accommodations should contact the Disabilities Services Coordinator at Treasure Valley Community College, 650 College Blvd., Ontario, OR 97914. Telephone (541) 881-8822 x234 or TDD (541) 881-2723.

Treasure Valley Community College admits applicants who have earned a high school diploma (or equivalent) or whose high school class has graduated. Underage students who have not yet graduated from high school need permission from their high school and TVCC to enroll.

**NOTE: You must select a degree or vocational certificate program in order to be eligible for financial aid. Program codes can be found on the back of this application.

SEND COMPLETED APPLICATIONS TO:
 TVCC - Admissions
 650 College Blvd.
 Ontario, OR 97914
 (541) 881-2721 fax

