



RN Nursing Application Fall 2013 Forms Packet



FORM 1 SIGNATURE PAGE

Complete all portions of this form as directed. Name as indicated in **myLane**

L# _____ FIRST _____ LAST _____

Address _____ City _____ ST _____ Zip _____

E-mail _____ Preferred Phone _____ 2nd Phone _____

- ☐ All courses were taken at LCC
- ☐ Official Transcripts from other colleges have been submitted to Lane Enrollment Services

I have completed the following and **submitted prior to the application deadline**. (Read and initial all)

- _____ B. Submitted official, sealed transcripts from colleges other than Lane to Lane Enrollment Services.
I understand transcripts must be received by date of application (submission of Forms 1 and 2 and the Online Application). OR All courses were taken at LCC.
- _____ C. Completed the LCC Credit Admission process and have an L number.
OR I have previously taken credit classes at Lane and have an L number.
- _____ D. Completed the **RN** Nursing On-line Application and Payment process the **same date I have emailed Forms 1 & 2** and have paid the **\$50 non-refundable** application fee.

Conditions of Application. (Initial all)

- _____ A. I have read all information in the **RN** Nursing Application Information Packet Fall 2013.
- _____ B. I am a current resident of the State of Oregon and my current Oregon address is listed in **myLane**.
- _____ C. I understand that my application will not be returned and that I am responsible for making a personal copy.
- _____ D. I understand that I am NOT considered an applicant to the program unless all required admission steps, forms, and documentation have been received **prior to the application deadline**.
- _____ E. I understand points allotted towards my **interview** will not be available to me, as required by OCNE regulations.
- _____ F. I understand that should I be accepted into the program, conditions of enrollment require completion of **all course prerequisites** as listed in the RN Nursing Application Information Packet Fall 2013; program specific physical and immunizations, CPR certification, criminal background check; drug screening; medical insurance, and attendance at the orientation session. Details of requirements will be included in letters of acceptance.
- _____ G. I hereby attest that all application information and documentation submitted **online and by email** are accurate and authentic.

Signature _____ Date _____

By Application deadline **submit by e-mail to...**

HPApplicationCenter@lanecc.edu

**Health Professions Application Center
Subject – Attention Nursing Application**

Change to file name:

RN NursingForms2013LastNameLNumber

On the same date or before:

**Lane Transcript and/or submitted transcripts to
Enrollment Services reflect courses and degree(s)
listed on Point Petition Sheet.**

**To Lane Enrollment Services, ATTN: HP
Transcript 4000 East 30th Ave, Eugene, OR 97405**

**Online Nursing Program Application and Payment
has been submitted.**

FORM 2 RN POINT PETITION SHEET Lane RN Nursing Fall 2013 If courses that meet grade criteria in Section 1 appear on a transcript by date of application they must be listed below. See RN Nursing Application Information Fall 2013, pages 2-3 items 1-8 and page 5 items 1-5. : Required to Apply – 30 credits from Section 1 that includes BI 231 and MTH 095 or math competency. Students with BA/BS if not listing WR 121/WR 122 may use up to 8 Approved Elective credits in Section 1 to meet 30 credit minimum criteria.		Enter credits in credit column. Courses must meet minimum credit requirement shown and may not exceed maximum credit shown. Credits X Grade Value = Quality Points (QP) Identify corresponding QP below. Then enter in the right hand column under QP – the number. Math example- 4/5 credits. For a B grade the 12/15 quality points. For 4 credits the Quality Points would be 12. For 5 credits it would be 15. Then enter 12 or 15 in right hand column				
Lane Course Number ¹	See RN Nursing Application Information Fall 2013 for specifics. ¹ Courses listed below must meet criteria as defined in the Application Information. 45 qualifying credits that include all courses listed below are required for Fall Entry.					
Section 1. Use the Lane Transfer Tool to establish course equivalency if your courses are not from Lane. For items 1-4 list term and year completed. For items 6-7 list name of qualifying course name. If courses not taken at Lane list name of institution(s), course number and name as it appears on your transcripts (e.g. Clatsop CC NFM 225 Nutrition, Fall 2006 or MHCC PSY 237 Human Development Winter 2010)		Credits	C Grade Value (2)	B Grade Value (3)	A Grade Value (4)	Quality Points QP
Item 1 - BI 231 (4 Credits)			8	16 (exception Fall 2013)	16	
Item 1 - BI 232 (4 Credits)			8	16 (exception Fall 2013)	16	
Item 1 - BI 233 Fall 2006 or later (4 Credits)			8	16 (exception Fall 2013)	16	
Item 2 - MTH 095 or higher (4/5 Credits)	If Pass grade – do not list credits for course or quality points.		8/10	12/15	16/20	
OR LCC MTH placement for MTH 105 or 111	Date taken: _____ Score: _____	0	0	0	0	0
Item 3 - WR 121 (3/4 Credits) If BA/BS can use Approved Elective			6/8	9/12	12/16	
Item 3 - WR 122 (3/4 Credits) If BA/BS can use Approved Elective			6/8	9/12	12/16	
Item 4 - FN 225 (3/4 Credits)			6/8	9/12	12/16	
Item 5 - PSY 215 (3 Credits)			6	9	12	
Item 6 – Human Relations (3/4 Credits)			6/8	9/12	12/16	
Item 7 - Social Science (3/4 Credits)			6/8	9/12	12/16	
For office use only 30-40 credits/90-160 quality points						
Section 2: Approved Electives. Item 8 – only list if 30 credits completed in Section 1. See pages 2-3 item 8 in Application Information for definition of qualifying courses. Total within 45- 47 credits.		3 or more Credits	C grade	B grade	A grade	QP
College Name, Course #, Course Name, Term/Year			2x____	3x____	4x____	
College Name, Course #, Course Name, Term/Year			2x____	3x____	4x____	
College Name, Course #, Course Name, Term/Year			2x____	3x____	4x____	
College Name, Course #, Course Name, Term/Year			2x____	3x____	4x____	
College Name, Course #, Course Name, Term/Year			2x____	3x____	4x____	
Maximum total prerequisite credits is 45- 47		TOTAL SECTIONS 1 & 2				
For office use only 45-47 credits/135-188 quality points						

Section 3: GPA Calculation- minimum accepted prerequisite GPA is 3.00 (16 points) to 4.00 (40 points)	
Calculate Prerequisite GPA by dividing quality total points by total credits (see Total Sections 1&2) <i>Example 1:</i> 184/ 46 = 4.00 GPA = Prerequisite GPA: <i>Example 2:</i> 144/40 = 3.60 GPA	GPA = _____
TO calculate GPA points - Multiple Prerequisite GPA by 24 and then subtract 56 (e.g. GPA _____ x 24 = GPA Points. Enter in right hand column) = GPA Pts <i>Example 1:</i> 4.00 x 24 = 96 – 56 = 40 GPA points: <i>Example 2:</i> 3.60 x 24 = 91.92 – 56 = 30.4 GPA points. Pre-requisiite GPA _____ x 24 = _____ - 56 = GPA points	
For office use only	
Section 4: OCNE Points – see Item 4, page 5	Point Earned
Anatomy and Physiology I, II, & III completed (12 credits) Anatomy & Physiology I and II, or I and III completed (8 credits)	= 5 pts = 3 pts
37 credits completed by end of Fall Term 45 credits completed by end of Fall Term	= 3 pts = 5 pts
Prior College Degree: List type of degree, college and term/year completed. _____ <i>Transcript must indicate degree granted.</i>	Associate Degree or higher = 1pt
Section 5: Lane Discretionary Points – See Item 5, page 5	---
Lane County Residence for at least 90 days prior to application. Write in your Address (not PO Box) _____	=4 pts
Prerequisites Taken at Lane CC, see Item 5, page 5	24-35 prerequisite credits = 1 pts 36 or more prerequisite credits = 2 pts
Diversity Course – as defined page 5 – item 5. College Name, Course #, Course Name, Term/Year _____	= 2 pts
Medical Terminology Course (2 credits, may be taken as Pass) – page 5 – item 5. College Name, Course #, Course Name, Term/Year _____	= 2 pts
State Board of Nursing Certified Nursing Assistant or Licensed Practical Nurse Unencumbered License (submit verification)	= 3 pts
ESTIMATED POINTS (Pre-Interview)	TOTAL SECTIONS 3, 4 & 5
Maximum Points Possible (pre-Interview) is 64	For office use only

2011-12 Health Professions Online Program Application & Payment

Before you start your On-line Application & Payment session:

- You must have applied for **credit** admissions to Lane and have a student L number.
- You must have a personal e-mail account (Lane does not issue students Lane e-mail accounts).
- You must have a credit card on which to charge the **non-refundable application** fee.
- Complete the program Application Worksheet.

Go to: [Lane's Admission and Program Application website](#) and Apply Online.

First time user account creation..... Click on this link at bottom of page.

Create a Login ID: Leave the Login ID blank and the system will generate a G# for you. **Make sure to keep** your G number for reference!). **Do not use your L Number.**

All students create a **new PIN**: ... Follow instructions on the web page.

- **Do not** use the same PIN you use to log into ExpressLane, myLane, or Moodle.
- This PIN is only for the Application process and will not change your ExpressLane PIN.
- Use this Application PIN to check on the status of your program application. **Write it down!**

Login: Click this button located at bottom of page.

Continue: Click this button located at bottom of page.

Application Type: Select the correct program application type from pull down menu. Make sure of your selection.

Continue: Click this button at bottom of page.

Apply for Admissions By entering the correct information.

Admission Term: **Select the term you are applying as your admission term.**

Enter Name: Make sure your name matches the name you used in your **myLane** portal.

Fill Out Application Click this button at bottom of page.

Application Checklist..... Click this link and complete each required section of the application.

- Follow the instructions provided on each screen.
- **High School Section.** Some Health Professions programs require high school completion.
- **Previous College Section:** List all previously attended institutions.

Application is Complete Click this button only when all sections have been completed.

or Finish Later Click this button to save your information.

Complete Payment..... You must pay the On-line Application fee with a Visa or MasterCard.

Signature Page Click the button and read agreement information.

- Your On-line Application is dated and timed after submission of the Signature Page.
- This is an acknowledgement page and **does not require a signature. Ignore the "ERROR" message.**

Return to Application Menu Click this link at the bottom of the page. Your application is now listed as "submitted."

Lane Community College Admission Confirmation. An E-mail will be sent to you confirming your On-line Application and Payment and time. Retain this page for your reference.

In addition to your On-line Application and Payment, the following programs require additional form(s) and documentation. Details are in the Program Application Information & Forms.

**Dental Assisting
Dental Hygiene
EMT Paramedic
Health Records Technology**

**Medical Office Assistant
Nursing
Physical Therapy Assistant
Respiratory Care**