

RN Nursing Application Fall 2014 Forms Packet



FORM 1 CONDITIONSOF APPLICATION CHECKLIST 🔘

Co	mplete a	III portions of this form as directe	ed. Name as indicated in myLane	
L#		FIRST	LAST	
E-n	nail – re	quired:	Preferred Phone	2 nd Phone
	All cou	rses were taken at LCC		
	Official	Transcripts from other colleges have Community College – 4000 East 30th A		t Services – ATTN: HP Transcript – Lane
l ha	ave com	pleted the following and <mark>submitte</mark>	ed prior to the application deadline	. (Read and type in your initials)
	B.		ts from colleges <u>other than Lane</u> to L e <u>received</u> by date of application (s	ane Enrollment Services. aubmission of Forms 1 and 2). OR All
	C.	Completed the LCC Credit Admiss	ion process and have an L number. classes at Lane and have an L numbe	er.
	D.		Application and Payment process and have emailed Forms 1 and 2 to HPA	nd have piad the \$50 non-refundable pplicationCenter@lanecc.edu
Co	nditions	of Application: (Read and type in	n your initials)	
	A.		N Nursing Application Information Pa	
	B.	I am a current <u>resident</u> e State	of Oregon and my current Oregon a	ddress is listed in ne.
	C.	* **	ill not be returned and that I am respo	
	D.	I understand that I am NOT consid and 2 (Sections 1-5), and document	ered an applicant to the program unlentation have been received prior to the	ess all required admission steps, Formed e application deadline.
	E.	I understand points allotted toward regulations.	s my application/Interview will not be	available to me, as required by OCNE
	F.	prerequisites as listed on the point approved electives to total 45 cred immunizations, CPR certification, c	petition sheet Form 2 Sections 1 and its will be completed by Fall entry; pro	ening; medical insurance, and attendance
	G.	I hereby attest that all application is and authentic.	nformation and documentation submi	tted online, mail and by email are accurate
For	ms 1 and	l 2 submitted scanned, Google docs	, handwritten or delivered in person w	ill not be accepted. Be sure to use the

latest version of Adobe Reader to complete this Form Reader . http://get.adobe.com/reader/

Macintosh users – be sure to not use "Preview" to view or complete this Form. Set Adobe Reader as the default PDF reader.

By Application deadline submit all supporting PDF or scanned documentation attached to one e-mail: <u>HPApplicationCenter@lanecc.edu</u>

Health Professions Application Center

 ${\bf Subject-Student\ Name\ L\ number\ -\ RN\ Nursing\ Application} \\ {\bf Documentation}$

Change to file name: RNNursingForms2014LastNameLNumber

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.

Online Nursing Program Application and Payment has been submitted.

Enter credits in credit column. Courses must meet FORM 2 RN POINT PETITION SHEET Lane RN Nursing Fall 2014 minimum credit requirement shown and may not exceed If courses that meet grade criteria in Section 1 appear on a transcript by date of application maximum credit shown. they must be listed below. See RN Nursing Application Information Fall 2014, pages 2-3 Credits X Grade Value = Quality Points (QP) items 1-8 and page 5 items 1-5.: Required to Apply - 30 credits from Section 1 that includes Identify corresponding QP below. Then enter in the right hand column BI 231 and MTH 095 or math competency. Students with BA/BS if not listing WR 121/WR 122 under QP - the number. Math example- 4/5 credits. For a B grade the may use up to 8 Approved Elective credits in Section 1 to meet 30 credit minimum criteria. 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 See RN Nursing Application Information Fall 2014 for specifics. Courses listed below must meet criteria as defined in Lane Course Number¹ 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. R Quarter Quality Grade Grade Grade For items 1-4 list term and year completed. For items 6-7 list name of qualifying course name. If course **Points** Credits /alue Value Value not taken at Lane list name of institution(s), course number and name as it appears on your transcripts QP (e.g. Clatsop CC NFM 225 Nutrition, Fall 2006 or MHCC PSY 237 Human Development Winter 2010) (2) (4) (3) Item 1 - BI 231* 16 8 16 (4 Credits) exception Item 1 - BI 232 16 8 16 (4 Credits) (exception) Item 1 - BI 233 Fall 2007 or 16 8 16 later (4 Credits) (exception) If Pass grade – do not list credits for course or quality points. Item 2 - MTH 095* or 8/10 12/15 16/20 higher (4/5 Credits) OR *Other - see Item 2 Enter qualifying Exam or course information below. 0 0 0 0 0 page 2-3. Item 3 - WR 121 (3/4 6/8 9/12 12/16 Credits) If BA/BS can use Approved Flective Item 3 - WR 122 (3/4 6/8 9/12 12/16 Credits) If BA/BS can use Approved Elective Item 4 - FN 225 or FN 240 6/8 9/12 12/16 (3/4 Credits) Item 5 - PSY 215 6 9 12 (3 Credits) Item 6 - Human Relations 9/12 12/16 6/8 (3/4 Credits) pp 44/45 Item 7 - Social Science or 6/8 9/12 12/16 **Human Relations course** (3/4 Credits) pp 44/45 For office use only 30-40 credits/90-160 quality points 3 or Section 2: Approved Electives. Item 8 – only list if 30 credits completed in Section 1 including В C QP more courses marked with an *. See pages 2-3 item 8 in Application Information for definition of qualifying grade grade grade Credits courses. Total within 45-47 credits. (e.g. BI112,BI234,CS120,CH112,ENG104,PSY 201,WR 123) College Name, Course #, Course Name, Term/Year 3x 4x College Name, Course #, Course Name, Term/Year 2x 3x_ 4x_ College Name, Course #, Course Name, Term/Year 3x 4x College Name, Course #, Course Name, Term/Year 2x 3x_ 4x_ College Name, Course #, Course Name, Term/Year 2x 3x 4x

TOTAL SECTIONS 1 & 2

For office use only 45-47 credits/135-188 quality points

Maximum total prerequisite credits is 45-47

Section 3: GPA Calculation- minimum accepted prerequisite GPA is 3.00 (16 points) to 4.00 (40 points)	SPA Points
Calculate Prerequisite GPA by dividing quality total points by total credits (see Total Sections 1&2) Example 1: 184/ 46 = 4.00 GPA = Prerequisite GPA: Example 2: 144/40 = 3.60 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 Example 1: 4.00 x 24 = 96 - 56 = 40 GPA points: Example 2: 3.60 x 24 = 91.92 - 56 = 30.4 GPA points. Prerequisite GPA x 24 = 56 = GPA points	
For office use only	
Section 4: OCNE Points – see Item 2 page 5 - 11 points possible	Points Earned
Anatomy and Physiology I, II, & III completed (12 credits) = 5 pts Anatomy & Physiology I and II, or I and III completed (8 credits) = 3 pts	
37 credits completed by end of Fall Term for courses listed on Form 2 = 3 pts 45 credits completed by end of Fall Term for courses listed on Form 2 = 5 pts	
Prior College Degree: List type of degree, college and term/year completed. Transcript must indicate degree granted from an accredited institution. Type of Degree: Term/(Semester)Year completed:	
Section 5: Lane Discretionary Points – See Item 3, page 6 - 13 points possible	Points Earned
Lane County Residence for at least 90 days prior to application. Write in your Address (not PO Box) on Form 1.	
Prerequisites Taken at Lane CC, see Item 5, page 5 as listed on Form 2 24-35 prerequisite credits = 1 pts 36 or more prerequisite credits = 2 pts	
Diversity Course-defined page 5 – item 5. College Name, Course #, Course Name, Term/Year - if meets criteria can list in Section 1 or 2 = 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	
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 State: Date Expired:	
State Board of Nursing Certified Nursing Assistant or Licensed Practical Nurse Unencumbered License (submit verification) = 3 pts	

Be sure to do the Online Application and Payment Process to complete your final step to apply to the RN Nursing Program.

