

2020-2021 PN & ADN– Nursing Application

NURSING APPLICATION CHECKLIST:

*Application Period: September 1, 2019 – March 15, 2020

*Online PCC inquiry/intent to apply for Nursing Program is required prior to submitting Nursing Application

- 1) **Application** –
 - Incomplete application packets will NOT be accepted
- 2) **Official Transcripts** –
 - Official transcripts from High School/GED and ALL colleges attended are required.
 - Submit official copies of your high school transcript or GED certificate (if applicable) and transcripts from any college previously attended to the Office of Admissions/Registrar
 - Pratt Community College can receive official transcripts electronically from the following services:
 - Parchment
 - National Transcript Center
 - National Student Clearinghouse
 - e-Scrip Safe
 - If you have taken PCC classes (on campus or online) transcripts do not have to be sent
 - Order requests or statement verifying sent electronically or via mail must be included in “application packet”
- 3) **ATI TEAS® score sheet** –
 - Official TEAS score sheets are required.
 - Order requests or statement verifying scores sent electronically or via mail must be included in “application packet”
- 4) **Certification required of Programs** –
 - Kansas CNA certificate (copy) if applying for PN program
 - Kansas LPN License (copy) if applying for ADN program, or
 - Paramedic Certificate (copy) if applying for ADN program

SELECTION CRITERIA OVERVIEW:

Selection Criteria is performance outcome based. The selection criterion consists of:

- 1) **TEAS Overall Individual Adjusted Score (100% = 100 points)**
Overall Individual Adjusted score Minimum is 58.7% or higher.
- 2) **TEAS Reading Score (100% = 100 points)**
Reading score requirement is 65.0% or higher.
- 3) **TEAS Science Score (100% = 100 points)**
Science score requirement is 50.0% or higher.
- 4) **GPA requirements: (4.0 = 40 points)**
Overall GPA requirement is 2.5 or higher.
- 5) **Formal Interview (100% = 100 points)**
Based on Interview rubric.

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- Pratt PN Program- on campus
- Winfield PN Program- on campus
- Pratt ADN Program- online
- Pratt ADN Program- on campus
- Winfield ADN Program- on campus

PERSONAL INFORMATION:

Last Name	First Name	Middle Name
Other Last Names (that may appear on transcripts, license/certifications)		Date of Birth (MM/DD/YYYY)
Address:	Street	City
		State
		Zip
Home Phone	Cell Phone	E-mail Address
Are you a Kansas Resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you U.S. Citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

EDUCATION:

College where you completed Nurse Aid Training (CNA)	City	State	Date Completed
College where you completed Practical Nurse Certificate (if applicable)	City	State	Date Completed
College where you completed Paramedic training (if applicable)	City	State	Date Completed

WORK HISTORY:

Employer (current/most recent)

Position

Work Address (city and state)

Dates of employment

Previous Employer

Position

Previous Work Address (city and state)

Dates of employment

QUESTIONNAIRE:

1. What factors encouraged you to apply to the Pratt Community College Nursing Program?

2. Why do you want to be a nurse?

3. What are your future goals in the nursing field?

4. Have you attempted a nursing program previously?

Y or N

If Yes, where?

If yes, what are the reasons for not completing?

Prerequisites / Requirements

Pre-Requisites (Transferability to be determined by the PCC Registrar)	Status (To be considered 'complete' must have a C or better)	Where you completed the course	Date course was or will be completed
Anatomy & Physiology w Lab (Min. 5hr course) Course Number _____	<input type="checkbox"/> Completed <input type="checkbox"/> In Progress	<input type="checkbox"/> PCC <input type="checkbox"/> Other (please list)	Completed: _____ Will be complete: _____ 5 year expiration
General Psychology Course Number _____	<input type="checkbox"/> Completed <input type="checkbox"/> In Progress	<input type="checkbox"/> PCC <input type="checkbox"/> Other (please list)	Completed: _____ Will be complete: _____
English Comp I Course Number _____	<input type="checkbox"/> Completed <input type="checkbox"/> In Progress	<input type="checkbox"/> PCC <input type="checkbox"/> Other (please list)	Completed: _____ Will be complete: _____
Developmental Psychology Course Number _____	<input type="checkbox"/> Completed <input type="checkbox"/> In Progress	<input type="checkbox"/> PCC <input type="checkbox"/> Other (please list)	Completed: _____ Will be complete: _____
Microbiology w/ Lab (Minimum 5 hour course) Course Number _____	<input type="checkbox"/> Completed <input type="checkbox"/> In Progress	<input type="checkbox"/> PCC <input type="checkbox"/> Other (please list)	Completed: _____ Will be complete: _____ 5 year expiration
Beginning Algebra or Higher Course Number _____	<input type="checkbox"/> Completed <input type="checkbox"/> In Progress	<input type="checkbox"/> PCC <input type="checkbox"/> Other (please list)	Completed: _____ Will be complete: _____
CNA Certificate Course Number _____	<input type="checkbox"/> Completed <input type="checkbox"/> In Progress Active? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PCC <input type="checkbox"/> Other (please list)	Exp. Date: _____
PN Program	<input type="checkbox"/> Completed <input type="checkbox"/> In Progress	<input type="checkbox"/> PCC <input type="checkbox"/> Other (please list)	Completed: _____ Will be complete: _____
Paramedic Program	<input type="checkbox"/> Completed <input type="checkbox"/> In Progress	<input type="checkbox"/> PCC <input type="checkbox"/> Other (please list)	Completed: _____ Will be complete: _____
LPN License	State Completed _____	Active? <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> No	Exp. Date: _____
Paramedic Registry	State Completed _____	Active? <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/> No	Exp. Date: _____

Legal Qualifications

ALL information is required or application will NOT be processed

Have you been convicted of a misdemeanor or felony? Yes No

If yes, see Legal Qualifications before applying to this program to see if you are eligible. You may find the Legal Qualifications at the following website: <http://www.prattcc.edu/nursing> webpage.

Terms:

I certify that the information provided is correct and complete. I understand that submission of false information and/or failure to submit supporting transcripts is grounds for denial of admissions, re-enrollment, or immediate suspension if enrolled. If accepted as a student at PCC, I agree to abide by the rules and regulations of the college regarding conduct, financial and other obligations. I have read the admission requirements, the legal qualifications for LPN/RN Licensure, and the estimated cost sheet. I affirm my intention to meet these requirements and agree to immediately report any change of status related to information on this application.

I agree with these terms: Yes No

Student Signature

Today's Date

Pratt Community College is an equal opportunity employer and does not discriminate on the basis of any characteristic protected by law in admission, recruitment, treatment or employment in its programs and activities. Pratt Community College hires only U.S. citizens and aliens lawfully authorized to work in the United States. If you have any questions, please contact the Director of Personnel, Pratt Community College, 348 NE SR 61, Pratt, KS 67124,

Pratt Community College reserves the right to change program dates and times. Completion of admission checklist items makes candidates eligible for consideration by the selection committee. College Admission does not guarantee admission into the Nursing Program.

Ready to submit your application? Have you done all of the following:

- Completed Nursing Application
- Enclosed transcript order requests or statements verifying official transcripts have been sent to PCC
- Enclosed copy of ATI TEAS score sheet
- Enclosed copies of the following:
 - Kansas CNA certificate (copy) if applying for PN program
 - Kansas LPN License (copy) if applying for ADN program, or
 - Paramedic Certificate (copy) if applying for ADN program

Applications must be returned to:

Pratt Community College, Attention: Elyse Birdsong
348 NE SR 61, Pratt, KS 67124

Or preferably by email to: elyseb@prattcc.edu