

AS DEGREE IN NURSING (RN), GENERIC APPLICATION INFORMATION CHECKLIST

Limited Access Health Programs: AS-NGT

FALL ADMISSION for the West, North and Porter Campus: January 15 – May 07

SPRING ADMISSION for the West, East and Porter Campus: July 09 - September 01

FOR INFORMATION CONTACT: 727 816-3371 or admissions@phsc.edu

All Applications must be submitted to LAHApps@phsc.edu

IMPORTANT

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| APPLYING | Applicants must submit ALL limited access program admission requirements listed below in order to be considered for review. Once an application packet is submitted, it cannot be amended. |
| INCOMPLETE APPLICATIONS | Students who attempt to submit an incomplete application will not be processed and must reapply to the program and repay the limited access application fee once all requirements have been met. |
| DEADLINE | Complete applications are due NO LATER THAN 4:00 P.M. BY THE DEADLINE DATE . If the application deadline date falls on a day the College is closed, the application will be accepted no later than 4:00 P.M. on the next business day. |
| NO RESPONSE/ FAILURE TO ENROLL | Applicants who do not respond to an offer of admission by the date indicated on the acceptance letter or who fail to enroll for the term for which admission is offered must reapply for a future date. All official correspondence will be addressed to your PHSC student email address. |

| # | INITIAL | LIMITED ACCESS PROGRAM APPLICATION REQUIREMENTS | | | | | | | | | | | | |
|----------|----------------------------------|--|------------------|------------------------------|----------------------------|--------------|---------|----------------------------|----------|----------------------------------|----------|------------------|---------|----------------------------|
| 1 | | PHSC application with a \$25 non-refundable fee for new students or a PHSC Readmission application for returning PHSC students not enrolled for more than 3 consecutive terms. | | | | | | | | | | | | |
| 2 | | AS Degree in Nursing (RN), Generic program application. | | | | | | | | | | | | |
| 3 | | Copy of receipt of payment of the \$25 non-refundable limited access application fee payable at college store. | | | | | | | | | | | | |
| 4 | | Clear, enlarged copy of current driver's license indicating a physical mailing address (PO Box addresses will not be used for residency preference in the selection process). If a driver's license, or equivalent, does not prove Pasco or Hernando County residency, it will be processed as a non-resident (out-of-county) application. | | | | | | | | | | | | |
| 5 | | Copy of current TEAS test scores with Proficient or Higher in the ATI Academic Preparedness Category . Applicants may only submit ONE valid set of scores taken within the past two years of the application submission. Scores submitted with the application will be the only ones considered. | | | | | | | | | | | | |
| 6 | | Official high school transcript with graduation date indicating receipt of a standard high school diploma or an official transcript of GED scores indicating receipt of a high school equivalency diploma, if not already submitted. Current high school students that are pending May graduation are allowed to submit an application for fall admissions by May 07, 4:00 P.M. Admission will be contingent upon high school student providing PHSC an official high school transcript by July 01 4:00 P.M. | | | | | | | | | | | | |
| 7 | | Official transcripts from each U.S. College and university attended other than PHSC. | | | | | | | | | | | | |
| 8 | | Official scores from external agencies as appropriate for prerequisite courses (i.e. AP, CLEP, IB, etc.). | | | | | | | | | | | | |
| 9 | | Confirmation that any needed course substitutions have been approved by the application deadline date. Transfer Credits: If the course prefix and number of an evaluated transfer course is not equivalent to PHSC's course prefix and number (ex. transfer course does not indicate BSC1085), then you will have to meet with an advisor to complete a course substitution. | | | | | | | | | | | | |
| 10 | | A cumulative grade point average of 2.0 or higher. | | | | | | | | | | | | |
| 11 | | Complete the following prerequisite courses with a combined GPA of 2.5 or higher with at least a grade of "C" or higher: <table border="0" style="width: 100%;"> <tr> <td>BSC1085</td> <td>Human Anatomy & Physiology I</td> <td>MCB2010</td> <td>Microbiology</td> <td>CGS1100</td> <td>Microcomputer Applications</td> </tr> <tr> <td>BSC1085L</td> <td>Human Anatomy & Physiology I Lab</td> <td>MCB2010L</td> <td>Microbiology Lab</td> <td>PSY1012</td> <td>Introduction to Psychology</td> </tr> </table> | BSC1085 | Human Anatomy & Physiology I | MCB2010 | Microbiology | CGS1100 | Microcomputer Applications | BSC1085L | Human Anatomy & Physiology I Lab | MCB2010L | Microbiology Lab | PSY1012 | Introduction to Psychology |
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| BSC1085L | Human Anatomy & Physiology I Lab | MCB2010L | Microbiology Lab | PSY1012 | Introduction to Psychology | | | | | | | | | |

ACKNOWLEDGEMENTS

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| 12 | | I understand that any previous unsuccessful attempts in nursing courses may result in being denied entry per guidelines outlined in the Nursing Programs Student Handbook. |
| 13 | | Graduation: If selected, I understand that I must have both an overall GPA of 2.0 and a PHSC program GPA of 2.0 in order to graduate from the selected program. |
| 14 | | Tobacco Use: I understand that the use of tobacco at all PHSC campuses is prohibited and that I will refrain from all tobacco use. |
| 15 | | Orientation Requirement: If selected, BLS for Health Care Providers CPR Certification (PHSC Course NCH0050) taken at PHSC or from a PHSC Training Site due at Orientation. |

SELECTION PROCESS

Applicants who meet minimum requirements as of the deadline dates will be ranked based upon TEAS test scores and prerequisite GPA. Residents of Pasco and Hernando Counties will receive preference over out-of-county residents.

SIGNATURE

I certify that I have read and understand the statements above and that I am submitting all items listed under the Limited Access Program Application Requirements section.

SIGNATURE

PRINT

STUDENT ID

DATE