

## **Admission and Waitlist Process for High Demand Programs**

Washtenaw Community College maintains a waitlist for admission into any program that it has designated as a high demand program (one for which there are more qualified applicants than openings for an entering class). The order of the waitlist facilitates a first-in, first-out treatment of applicants within the following residency classes:\*

**Priority 1: Legal residents of the Washtenaw Community College district.**

**Priority 2: Legal residents of counties adjacent to the Washtenaw Community College district.**

**Priority 3: Legal residents of all other counties of the State of Michigan.**

**Priority 4: Persons whose legal residence is outside the State of Michigan but within the United States.**

**Priority 5: Persons whose official residence is a foreign country.**

In order to be added to the waitlist, applicants must apply to the college and also submit a completed application for the program. The program application must include any necessary documentation to substantiate that the applicant has met all of the program's minimum admission requirements. The college will keep a rolling waitlist for each high demand program and applicants will be added to the list at the end of each two-month cycle listed below:

**August 1 to September 30**

**October 1 to November 30**

**December 1 to January 31**

**February 1 to March 31**

**April 1 to May 31**

**June 1 to July 31**

Those who submit a completed application during one of the application cycles defined above will be added to the waitlist in random order, with applicants possessing Washtenaw County residency status being given first priority on the waitlist, applicants with residency status in counties adjacent to Washtenaw County will be given next priority, then all other applicants who meet Michigan residency requirements, and so on.\*

Applicants who submit their completed applications on the first day of the two-month application cycle have no advantage over those who submit their completed applications on the last working day of the two-month application cycle. These applicants are added to the waitlist in random order within their residency class.

However, those who submit their completed application in an earlier application cycle have priority over those in their residency class who submit during a later application cycle. For example, people who submit completed applications during the October 1<sup>st</sup> to November 30<sup>th</sup> cycle have priority in their residency class over people who submit their applications during the December 1<sup>st</sup> to January 31<sup>st</sup> cycle.

The Admissions Office is open during weekdays, so please note that if the last day of the month ends on a day the Office is closed, you must submit your documentation earlier. Also, if you are on the waitlist and your residency status changes, you will be placed in the part of the waitlist that applies to your most current residency status, so please make sure you keep your address updated through MyWCC or at the Student Connection Center.

**If you have any questions, please call the Health and Second Tier Admissions Office at (734) 973-3596 or call (734) 973-3358 to schedule an appointment to meet with the Health Programs Counselor.**

\*In cases where there are not sufficient in-district clinical sites for a program and where out-district sites are available but require special consideration of out-district students, the college may establish and maintain parallel priority lists.

References to residency refer to the Washtenaw Community College residency requirements as defined in the Programs and Services Bulletin.

**Washtenaw Community College**  
**Associate Degree in Applied Science: Registered Nursing (APNURS)**  
**CONTACT INFORMATION**

If you are interested in the Registered Nursing program at Washtenaw Community College, you should talk with the Health Programs Counselor for advising. If you have questions pertaining to the waitlist or admission to the program, you should contact the Health and Second Tier Admissions Office. Helpful contact information has been provided below.

**Sue Travis**  
**Health Programs Counselor**  
**Phone: (734) 973-3358 – by appointment only**  
**Email: [stravis@wccnet.edu](mailto:stravis@wccnet.edu)**

**Gloria Velarde**  
**Nursing Program Director/Department Chair**  
**Phone: (734) 677-5110**  
**Email: [gav@wccnet.edu](mailto:gav@wccnet.edu)**

**Health and Second Tier Admissions Office**  
**Phone: (734) 973-3596**  
**Email: [healthadmissions@wccnet.edu](mailto:healthadmissions@wccnet.edu)**

**Financial Aid Department**  
**Phone: (734) 973-3523**  
**Email: [finaid@wccnet.edu](mailto:finaid@wccnet.edu)**

**Transcript Evaluation Department**  
**Phone: (734) 973-3590**  
**Email: [transcripteval@wccnet.edu](mailto:transcripteval@wccnet.edu)**

**Washtenaw Community College**  
**Associate Degree in Applied Science: Registered Nursing (APNURS)**  
**2009-2010 Academic Year – Application Valid Until July 31, 2010**  
**ADMISSION REQUIREMENTS**

**A. Admission to the Registered Nursing Program:**

Forty (40) students are admitted to the Registered Nursing program every Fall and Winter semesters (80 per year).

1. **Completion and submission of a Registered Nursing program application. ONLY COMPLETED APPLICATIONS WILL BE ACCEPTED.** If the following requirements are not successfully completed when your application is submitted with supporting documentation, your incomplete application will be returned to you by mail.
2. Completion and submission of the **Information Release Authorization form** for obtaining a criminal background check/fingerprinting.
3. Signed **Abilities Statement** declaring specific physical and cognitive abilities.
4. Completion of the following prerequisite requirements (grades are based on a 4.0 GPA scale):
  - a. **Academic Math Level 3** (The following course/scores put you at level 3: MTH 097 w/grade of “C” or 2.0 & LEEM Exam w/minimum score of 75%, ACT Math = 18, SAT Math = 440, or COMPASS Algebra = 32)
  - b. **BIO 111 (Anatomy & Physiology w/lab) or equivalent course with minimum grade of “B-“ or 2.7**
    - Level I Prerequisite: high school chemistry or CEM 090 AND high school biology or BIO 101, or BIO 102 w/minimum grade of “C” (2.0) in all courses
  - c. **HSC 101 (Healthcare Terminology) or equivalent course with minimum grade of “B-“ or 2.7**
  - d. **Current Certified Nurse Aide Certification (CNA) in the State of Michigan**
    - After successful completion of a State approved training program, you will be eligible to apply to the State for your registration number in order to schedule and sit for the State certification examination.
    - WCC’s State approved training course is: HSC 100 (Basic Nursing Assistant Skills)
    - The **ONLY** acceptable substitutions to the CNA requirement are a current LPN, EMT-Basic, EMT-Intermediate, or Paramedics License. **NO OTHER SUBSTITUTIONS OR EXEMPTIONS WILL BE MADE** (including a Medical Assistant Certification).
  - e. Completion of the **Pre-Admission Math Test with a minimum score of 80 percent** within two (2) attempts.
    - Test is to be taken **AFTER** your application is submitted but **WITHIN** the *same* two (2) month application cycle.
  - e. Competency in verbal and written English.
5. **Verification of residency – Washtenaw county residents are given priority**
  - Students are required to submit documentation to verify residency to support their residency status as determined by the Health and Second Tier Admissions Office.
  - Refer to the Admission to High Demand Programs Policy in the WCC Bulletin
6. **Minimum Cumulative College GPA of 2.5.** Only transcripts that provide an admission requirement course will be used in calculation of the cumulative GPA. If a transcript is submitted for an admission requirement course, the cumulative transcript GPA will be used in a weighted calculation of the cumulative GPA requirement.

**Transcripts:**

If a course is not clearly stated, you must include the course description and/or syllabus. We are not responsible for your application being delayed due to lack of clarification concerning your transcripts.

- Foreign college or university transcripts **MUST** be evaluated by either ECE ([www.ece.org](http://www.ece.org)) or WES ([www.wes.org](http://www.wes.org)) before the submission of your application. Foreign high school transcripts will **NOT** be used for validation of prerequisite requirements.

**B. Entrance Requirements to the Registered Nursing program:**

1. Mandatory attendance at the new student Nursing orientation upon acceptance into the program.
2. Completion of first Assessment Technologies Institute (ATI) standardized test – Test of Essential Academic Skills (TEAS)
3. Completion of health requirements that will be discussed at the mandatory orientation session by the required deadline.

**NOTE: Program requirements are reviewed annually and are subject to change without notice.**

**Washtenaw Community College**  
**Associate Degree in Applied Science: Registered Nursing (APNURS)**  
**SUGGESTED COURSE SEQUENCE**

**Effective Fall 2007**, the nursing (NUR) courses will span over four (4) semesters. Nursing courses are sequential and complemented with required support courses, which include general education courses that fulfill the associate degree requirements at WCC.

Since a waitlist is used to manage admissions into high demand programs such as nursing, students are encouraged to take **all** support and general education courses(\*) while on the waitlist **before** they begin their first nursing course sequence. Minimally, a student must complete those courses listed under the Semester 1 before taking any NUR courses. All support courses listed under Semesters 2 through 5, must be taken **not later than** the scheduled semester.

All courses must be successfully completed with a minimal grade of C- or higher (GPA = 1.7) at WCC or 2.0 from any transferring institution. Any grade/GPA less than 2.0 will not transfer for credit to WCC.

---

**Semester 1**

*ENG 111 - English Composition I	4 credits
*COM 101/102/200 - Communication electives (only <b><u>one</u></b> is required)	3 credits
*MTH 167 - Math Applications for Health Sciences	3 credits
*BIO 147 - Hospital Microbiology (BIO 237 recommended for RN-BSN programs)	1 credit
*BIO 212 - Pathophysiology: Alteration in Structure & Function (formerly HSC 220)	<u>4 credits</u>
<b>Total</b>	<b>15 credits</b>

---

**Semester 2**

NUR 100 - Introduction to Nursing / Care of the Healthy Older Adult	2 credits
NUR 102 - Fundamentals of Nursing	2 credits
NUR 103 - Fundamentals of Nursing – Clinical Practice	3 credits
NUR 115 - Pharmacology	3 credits
*HSC147 - Growth and Development	<u>3 credits</u>
<b>Total</b>	<b>13 credits</b>

---

**Semester 3**

NUR 123 - Acute Care Nursing I	3 credits
NUR 124 - Acute Care Nursing I – Clinical Practice	2 credits
NUR 131 - Nursing of the Childbearing Family	3 credits
NUR 132 - Nursing of the Childbearing Family – Clinical Practice	2 credits
*HSC 138 - General and Therapeutic Nutrition	<u>2 credits</u>
<b>Total</b>	<b>12 credits</b>

---

**Semester 4**

NUR 223 - Acute Care Nursing II	3 credits
NUR 224 - Acute Care Nursing II – Clinical Practice	2 credits
NUR 255 - Mental Health Nursing	3 credits
NUR 256 - Mental Health Nursing– Clinical Practice	2 credits
*PSY 100 - Introductory Psychology	<u>3 credits</u>
<b>Total</b>	<b>13 credits</b>

---

**Semester 5**

NUR 231 - Nursing of Children	3 credits
NUR 232 - Nursing of Children – Clinical Practice	2 credits
NUR 271 - Advanced Topics in Medical-Surgical Nursing	1 credit
NUR 272 - Advanced Topics in Medical-Surgical Nursing – Lab Practice	.5 credit
NUR 281 - Transition to the Registered Nurse Role	1 credit
NUR 282 - Transition to the Registered Nurse Role – Clinical Practice	2.5 credits
*PHL 244 - Ethical & Legal Issues in Health Care	<u>3 credits</u>
<b>Total</b>	<b>13 credits</b>

**WASHTENAW COMMUNITY COLLEGE**  
**Associate Degree in Applied Science: Registered Nursing (APNURS)**  
**Nursing Program –Effective Winter 2009**

**General Information**

The Washtenaw Community College Nursing Program curriculum covers four semesters following a semester of general education and required support courses, which can be taken *while* the applicant is on the waitlist. The Associate in Applied Science: Registered Nursing program prepares students for the NCLEX-RN exam for receiving registered nursing licensure.

**CURRICULUM PLAN**

**REQUIRED PROGRAM COURSES:**

**PREREQUISITES:**

Anatomy & Physiology	5 credits
Healthcare Terminology	1 credit

**SUPPORT COURSES:**

Math Applications for Health Science	3 credits
College-Level English Composition	4 credits
Life Span Growth and Development	3 credits
General and Therapeutic Nutrition	2 credits
Hospital Microbiology	1 credit
Pathophysiology	4 credits
Introductory Psychology	3 credits
Ethical and Legal Issues in Health Care	3 credits
Communications/Speech Elective	3 credits
<b>TOTAL</b>	<b><u>32 credits</u></b>

PLEASE NOTE: Students considering continuing their education to earn a Bachelor of Science degree in Nursing (BSN) are strongly encouraged to see their Academic Advisor for assistance in support course selection.

**NURSING COURSES:**

**SEMESTER 2:**

NUR 100	Introduction to Nursing / Care of the Healthy Older Adult	2 credits
NUR 102	Fundamentals of Nursing	2 credits
NUR 103	Fundamentals of Nursing - Clinical Practice	3 credits
NUR 115	Pharmacology	3 credits

**SEMESTER 3:**

NUR 123	Acute Care Nursing I	3 credits
NUR 124	Acute Care Nursing I - Clinical Practice	2 credits
NUR 131	Nursing of the Childbearing Family	3 credits
NUR 132	Nursing of the Childbearing Family - Clinical Practice	2 credits

**SEMESTER 4:**

NUR 223	Acute Care Nursing II	3 credits
NUR 224	Acute Care Nursing II - Clinical Practice	2 credits
NUR 255	Mental Health Nursing	3 credits
NUR 256	Mental Health Nursing - Clinical Practice	2 credits

**SEMESTER 5:**

NUR 231	Nursing of Children	3 credits
NUR 232	Nursing of Children - Clinical Practice	2 credits
NUR 271	Advanced Topics in Medical-Surgical Nursing	1 credit
NUR 272	Advanced Topics in Medical-Surgical Nursing – Lab Practice	.5 credit
NUR 281	Transition to the Registered Nurse Role	1 credit
NUR 282	Transition to the Registered Nurse Role – Clinical Practice	2.5 credits
<b>TOTAL</b>		<b><u>40 credits</u></b>

**Washtenaw Community College  
Registered Nursing (APNURS)  
ESTIMATED COST**

College Catalog	2009-2010
Tuition (72 credits @ \$80. per credit in-district rates) <sup>1</sup>	\$5760.
Contact Hour Fee (estimate)	1370.
ATI Testing Package Expenses – Standardized testing across the curriculum (fees distributed over 4-5 semesters)	~500.
Physical exam including lab tests (est.)	200.
Student health insurance (estimate)	500.
Uniform costs (3 sets-estimated), shoes etc...	300.
Additional equipment <sup>2</sup>	100.
Books and course packs (estimated)	2,000.
Licensure – NCLEX exam, license fee	248.
NCLEX review class (NUR 039 – 2 credits-in-district) <sup>3</sup>	128.
Pre-licensure fingerprinting costs	75.
NCLEX review materials	75.
Graduate Pin	200.
Pinning ceremony fees	25.
<b>Total</b>	<b>\$11,481.00</b>

***Additional Costs to be considered:***

Transportation to campus (3-5 days/week) and to hospitals (1-4 days/week); full-time child care; incidentals for Nursing lab; notebooks, paper, pens, pencils; class pin, class picture and graduation gown.

**Notes:**

<sup>1</sup> Tuition subject to change

<sup>2</sup> Stethoscope, scissors, penlight, watch with sweep second hand, approved Medical dictionary (Taber's, Mosby, etc.), pocket calculator.

<sup>3</sup> This is a brief review course for WCC graduates. Other review courses available vary in cost from \$150. to approximately \$350.

**NOTE: The above fees are only estimates and are subject to change without notice.**

# Guidelines for the Nursing Pre-Admission Math Test

---

As a prerequisite to the Nursing program, you must achieve a minimum score of 80 percent on the Pre-Admission Math Test. There will be a total of 50 questions similar to the sample test questions provided at the web page below. The procedure for taking the math test is outlined below:

1. You **MUST REQUEST** a Permission Letter from the Admissions Office located on the second floor of the Student Center Building, which you will need to provide to the Testing Center in order to be eligible to take your test.
  - This letter may **ONLY** be requested **AFTER** your program application along with all supporting documentation has been submitted to the Admissions Office.
2. You must take your Permission Letter to the Testing Center located on the third floor of the Student Center Building and request to take the Pre-Admission Math Test.
  - Upon showing proper identification and your Permission Letter, you will be given access to take the test. Calculators will be allowed.
  - Your Pre-Admission Math Test results will be viewable through your MyWCC account by clicking on *Student Services* and then *Health and Second Tier Admission Application Status* approximately 1 - 2 weeks after you have taken the test.
  - To determine the Testing Center's Hours of Operation, please visit the Testing Center's web page below or call the Student Connection Center at (734) 973-3543.  
<http://www4.wccnet.edu/studentservices/otherservices/testingcenter/index.php>
3. If you are successful in achieving 80 percent or higher, this admission requirement has been met.
  - If other admission requirements are not met and your program application is returned to you by mail, your Pre-Admission Math Test results are valid for up to six (6) months. If you re-submit your program application after this date, you will be required to re-take the Pre-Admission Math Test in order to complete your program application.
4. If you score less than 80 percent on the pre-admission math test you may have the opportunity to have a second attempt, if you do the following:
  - Meet and discuss your results with the Math Department Faculty (Kristin Chatas can be contacted at (734) 477-8566 or [kchatas@wccnet.edu](mailto:kchatas@wccnet.edu))
  - Complete ten (10) hours of tutoring.
  - The Math Department will then provide you with a Second Attempt Pre-Admission Math Test Permission Letter allowing you to re-test at the Testing Center.
5. If you are unable to achieve 80 percent or higher on the second attempt, enrollment in an appropriate math course and successful completion is required prior to re-applying to the program, as recommended by the Math Department.

**Go to the following website for a practice Pre-Admission Math Test:**

<http://courses.wccnet.org/~palay/math165/preexam.htm>

**\*Students can refresh/reload the page multiple times for a new practice test.**

**Washtenaw Community College**  
**Associate Degree in Applied Science: Registered Nursing (APNURS)**  
**2009-2010 Academic Year – Application Valid Until July 31, 2010**  
**ADMISSION APPLICATION CHECKLIST**

**ONLY COMPLETED APPLICATIONS WILL BE ACCEPTED. If the following requirements are not successfully completed when your application is submitted, your incomplete application will be returned to you by mail.**

The following checklist is important for proceeding with your application. Please read the checklist carefully and check off the completed requirements. **EACH REQUIREMENT MUST BE CHECKED OFF BEFORE YOUR APPLICATION WILL BE ACCEPTED.** This checklist must also be included with the submission of your application. We suggest you keep a copy of all items for your own records.

\_\_\_ 1. I have been **accepted** to WCC. My **Student ID** is @ \_\_\_\_\_

\_\_\_ 2. **Admission Prerequisite Requirements (all grades are based on a 4.0 GPA scale):**

**\*\*Sealed Official Transcripts MUST be submitted with your application. (WCC transcripts DO NOT need to be submitted).**

a. **Academic Math Level 3** (The following course/scores put you at level 3: MTH 097 w/grade of “C” or 2.0 & LEEM Exam w/minimum score of 75%, ACT Math = 18, SAT Math = 440, or COMPASS Algebra = 32): (check one)

\_\_\_ I completed this requirement at WCC (Transcripts NOT Required).

\_\_\_ I completed this requirement at \_\_\_\_\_ and included a sealed official transcript.

\_\_\_ I completed this requirement at \_\_\_\_\_ and have confirmed that WCC has my official transcript on file.

\_\_\_ I have a COMPASS Algebra score of 32.

\_\_\_ I have an ACT Math score of 18 and included a copy of my scores.

\_\_\_ I have an SAT Math score of 440 and included a copy of my scores.

b. **HSC 101 (Healthcare Terminology) w/minimum grade of “B-” or 2.7:** (check one)

\_\_\_ I completed this requirement at WCC (Transcripts NOT Required).

\_\_\_ I completed this requirement at \_\_\_\_\_ and included a sealed official transcript.

\_\_\_ I completed this requirement at \_\_\_\_\_ and have confirmed that WCC has my official transcript on file.

c. **BIO 111 (Anatomy & Physiology w/lab) w/minimum grade of “B-“ or 2.7:** (check one)

\_\_\_ I completed this requirement at WCC (Transcripts NOT Required).

\_\_\_ I completed this requirement at \_\_\_\_\_ and included a sealed official transcript.

\_\_\_ I completed this requirement at \_\_\_\_\_ and have confirmed that WCC has my official transcript on file.

d. **Current Certified Nurse Aide (CNA) Certification in the State of Michigan**

\_\_\_ I included a copy of my current State of Michigan CNA Certification Card.

- Training program completion certificate is NOT acceptable.

\_\_\_ I included copies of my Clinical and Knowledge State Exam Results showing both sections were successfully passed.

\_\_\_ 3. **Minimum Cumulative College GPA of 2.5.** Only transcripts that provide an admission requirement course will be used in calculation of the cumulative GPA. If a transcript is submitted for an admission requirement course, the cumulative transcript GPA will be used in a weighted calculation of the cumulative GPA requirement.

\_\_\_ 4. I have signed and included the **Abilities Statement** declaring specific physical and cognitive abilities.

\_\_\_ 5. I have included a completed and signed **Information Release Authorization Form.**

\_\_\_ I included a copy of one (1) of the following government issued picture ID’s: Drivers License, State ID Card, or Passport.

\_\_\_ 6. I have included a signed **Additional Information Form.**

**CONTINUED ON BACK OF PAGE →**

## ADMISSION APPLICATION CHECKLIST CONTINUED

- \_\_\_ 7. **IF a Washtenaw County resident**, I have included COPIES of **three (3) dated documents** to verify my residency status which includes, but is not limited to: lease or mortgage contract, property tax statement, drivers license, state ID card, voter registration card, veteran's card w/address, tribal card w/address, tax return check stub w/address, professional license w/address, dated correspondence from government agency or court, bank statement, car registration, gas, water, electric, phone, or cable invoice, home, auto, or renters insurance policy.
- You **MUST** provide documentation verifying your current "Basic" address in WCC's records. To confirm or make changes to this address, please login to your MyWCC account and click on *Personal Information*.
- \_\_\_ 8. **IF** submitting **Foreign College or University Transcripts**, they MUST be evaluated by either ECE ([www.ece.org](http://www.ece.org)) or WES ([www.wes.org](http://www.wes.org)) before the submission of your application. Foreign High School Transcripts will NOT be used for validation of prerequisite requirements.
- \_\_\_ 9. **Request Pre-Admission Math Test Permission Letter from Admission Office.** After your program application along with all supporting documentation has been submitted to the Admissions Office located on the second floor of the Student Center Building, you **MUST** request a Permission Letter from the Admission Staff. Please remember, that this test **MUST** be taken BEFORE the end of the two (2) month application cycle in which you have submitted your Application in. **If you fail to successfully complete this test with a minimum score of 80% or better before the end of the application cycle in which you applied in, your application will be considered INCOMPLETE.**

**NOTE: Program requirements are reviewed annually and are subject to change without notice.**

**Program applications and ALL supporting documentation can be submitted to the Admissions Office located on the second floor of the Student Center Building (SC 203) or mailed to the following address:**

Health and Second Tier Admissions Office  
Washtenaw Community College  
4800 East Huron River Drive  
Ann Arbor, MI 48105

Phone: (734) 973-3596  
Fax: (734) 677-5408  
Email: [healthadmissions@wccnet.edu](mailto:healthadmissions@wccnet.edu)  
Website: [www.wccnet.edu](http://www.wccnet.edu)

### Procedure to Request Official Evaluation of Other College or University Transcripts:

**NOTE: Your program application will be accepted without completion of your official evaluation. Please remember that you still must submit your official request to have your credits posted to your WCC transcript**

**Official Transfer evaluations will be completed approximately one (1) semester AFTER you have requested the evaluation and have earned at least one (1) credit hour from WCC.** Until you have earned your first credit from WCC, our Counseling Department located on the second floor of the Student Center Building (734-677-5102) can help with the prerequisite overrides needed to sign up for classes. Once the evaluation is completed, transfer credit will be posted to your WCC transcript and viewable in your MyWCC account.

- You **MUST** submit an email request for your official WCC evaluation at least 10 days AFTER you have requested your previous institution to send official transcripts to WCC.
- In the email SUBJECT line enter *YOUR LAST NAME* with the word "*REQUEST*"
- In the email BODY, number 1-9 and list the following:
  1. Your **WCC Student ID**
  2. Your **Last Name**
  3. Your **First Name** and middle initial
  4. All **Former Names**
  5. Daytime **Phone** number
  6. **WCC Program** or degree that you want credit evaluated for
  7. **Year of the catalog** you are going by
  8. **\*First Term** you earned credit at WCC
  9. List of the **Colleges and Dates** the Official Transcripts were sent to WCC
- **EMAIL transcript request ONLY to: [transcripteval@wccnet.edu](mailto:transcripteval@wccnet.edu)**
- **Direct all questions pertaining to the evaluation of credit to our Transcript Evaluator at (734) 973-3590.**

**Washtenaw Community College**  
**Associate Degree in Applied Science: Registered Nursing (APNURS)**  
**2009-2010 Academic Year – Application Valid Until July 31, 2010**  
**ADMISSION APPLICATION INFORMATION**

WCC Student ID: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First M.I. Former/Maiden

\*Address: \_\_\_\_\_  
Number Street City State Zip County

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

**\*The contact information provided above MUST match WCC's records. You can confirm or change your contact information at anytime by logging into your MyWCC account and clicking on "Personal Information". (Your address MUST match your current "Basic" address on record. Your "Mailing" address is not sufficient for residency verification).**

Please indicate where your admission prerequisite courses were completed along with the grades you earned. **Official transcripts and/or documents MUST be submitted with this application for verification. If a course is not clearly stated on your transcript(s), you must include the course description and/or syllabus. We are not responsible for your application being delayed due to lack of clarification.**

Course	Institution where taken	Grade
Academic Math Level 3 (ACT=18, SAT=440, COMPASS ALG=32, MTH 097, or Equivalent Course)		
Healthcare Terminology w/grade of "B-" (HSC 101 or Equivalent College Course)		
Anatomy & Physiology w/lab w/grade of "B-" (BIO 111 or Equivalent College Course)		
Current Nurse Aide Certification (CNA) (MUST submit copy of MI STATE CERTIFICATION CARD)		

The courses listed below are supporting courses of the Registered Nursing program and can be taken prior to entering the program. If you have completed any of the following support courses, please indicate which one(s):

**I have completed the following courses with a minimum grade of "C-" (1.7 on 4.0 scale) at WCC or with a minimum grade of "C" (2.0 on 4.0 scale) from a transferring institution:**

	WCC	Transfer
<b><u>SEMESTER 1 COURSES:</u></b>		
Math Applications for Health Sciences (MTH 167) .....	_____	_____
Speech/Communication (COM 101, 102, 200) – only <u>one</u> is required .....	_____	_____
English Composition I (ENG 111) .....	_____	_____
Hospital Microbiology or Microbiology (BIO 147 or 237) .....	_____	_____
Pathophysiology (BIO 212 – formerly HSC 220) .....	_____	_____
<b><u>SEMESTER 2-5 COURSES:</u></b>		
General & Therapeutic Nutrition (HSC 138) .....	_____	_____
Introduction to Psychology (PSY 100) .....	_____	_____
Growth & Development (HSC 147) .....	_____	_____
Ethical & Legal Issues in Health Care (PHL 244) .....	_____	_____

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**NOTE: Program requirements are reviewed annually and are subject to change without notice.**

**Washtenaw Community College  
Nursing Program  
ABILITIES STATEMENT**

*Admission into the Nursing Program is contingent upon students declaring that they have specific physical and cognitive abilities. These requirements are detailed below. WCC reserves the right to request that students successfully demonstrate the specific cognitive and physical abilities related to the Nursing Program.*

**Abilities Necessary for Attainment of Core Competencies in the Nursing Program**

The student must be able to:

- Speak clearly in order to communicate with patients, families, health care team members, peers, and faculty.
- Stand and walk for six to ten hours/day.
- Bend, squat, and kneel.
- Possess sufficient strength to push/pull objects more than 50 pounds and to transfer objects of more than 100 pounds.
- Perform CPR, i.e. move above patient to compress chest and manually ventilate patient.
- Work with arms fully extended overhead.
- Possess manual dexterity, i.e. use hands for grasping, pushing, pulling, and other fine motor manipulation, including legible writing and typing.
- Demonstrate eye-hand coordination and arm-hand steadiness for manipulation of equipment, i.e. syringes, procedures.
- Possess tactile ability to differentiate changes in sensation as part of the patient assessment.
- Possess auditory acuity to note slight changes in the patient's condition, i.e. lung sounds, bowel sounds, vital signs, etc.
- Possess auditory acuity to hear patient's calls for assistance without facing the patient.
- Possess auditory acuity to interpret various equipment signals and alarms and use the telephone.
- Possess visual acuity to read and distinguish colors, to read handwritten orders and other handwritten or printed patient data, i.e. medical records, medication labels.
- Possess visual acuity to clearly see and read electronic monitors, syringes, and scales in order to correctly interpret data.
- Concentrate on details with moderate amount of interruptions, such as patient requests, IV pumps/alarms, calculating drug dosages, etc.
- Attend to tasks/functions for periods up to 60 minutes in length and to attend to tasks/functions for periods exceeding 60 minutes in length.
- Possess sufficient emotional control to exercise independent judgment and discretion to ensure patient safety.
- Understand and relate to specific ideas, concepts, and theories generated and simultaneously discussed.
- Remember tasks and assignments given to self and others over both short and long periods of time.

**I have read these statements and believe I meet the above requirements.**

**Printed Name:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Washtenaw Community College**  
**Associate Degree in Applied Science: Registered Nursing (APNURS)**  
**2009-2010 Academic Year**  
**ADDITIONAL INFORMATION**

1. **Necessary Screenings:**

- All students must agree to an initial Criminal Background Check in order to complete their Nursing application and a second check before entering the program. If a conviction is found (see Information Release Authorization Form), the student will **not be admitted** to the program.
- As a courtesy, WCC will conduct your initial and second background checks using the Michigan State ICHAT system which has limitations that may cause false positive or false negative records to be received. Please be aware that if a false record is received or you believe that the record is a mistake or inaccurate, it will be **your responsibility** to clear the record which may accrue additional fees (see Information Release Authorization Form).
- Please be aware that the Nursing Department has contracts with many facilities and some require additional screening, ie: fingerprinting, urine drip screens, and additional background checks which may accrue additional fees to the student.

2. **Mailings:**

- An initial confirmation letter will be sent to inform the student we have received their completed application approximately three (3) weeks following the end of the admission cycle in which the student submitted their application in.
- Program requirements are reviewed annually and are subject to change. If there are changes to the program curriculum or prerequisite requirements, a letter will be sent informing you of these changes and you are required to meet all new requirements by the specified deadline or **your application will be closed.**
- If you are required to clear your background record, a letter will be sent informing you of this. You must have your record cleared by the specified date or **your application will be closed.**
- Still Interested letters are sent occasionally to students with a residency status outside Washtenaw County. If you receive a Still Interested letter and would like your name to remain on the waitlist, you must submit the included Still Interested/Closing Application Form by the specified deadline or **your application will be closed.**
- Residency Verification letters are sent to all students who could potentially be considered for admission to an entry term approximately eight (8) months prior to the start of that term to verify their residency status. You must submit the included Residency Verification Form and supporting documentation by the specified date or **your application will be closed.**
- Official Acceptance letters are sent approximately six (6) months prior to an entry term by Certified Mail.
- Official Alternate Candidate letters are sent approximately six (6) months prior to an entry term by Certified Mail.
- You will be required to sign for all letters sent by Certified Mail to show receipt of the letter. If you are not at home to receive this letter, the Post Office will attempt to deliver the letter two (2) more times. If no one is home to sign for the letter after the third (3<sup>rd</sup>) attempt, the letter will be held at your local Post Office for one (1) week only before it will be returned to WCC as "Unclaimed".
- If a letter is sent and not returned to WCC, it is assumed you received the letter. If mail is returned to WCC by the Post Office including "Unclaimed" Certified Mail and we are unable to contact you, **your application will be closed.** Please keep in mind that the Post Office does NOT forward WCC mail.
- We assume that all letters that are sent have been received unless the letter is returned by the Post Office.
- It is your responsibility to check your **Student Email** on a regular basis. Important information regarding your application status may be sent and we assume that this information has been received since it was sent to your student email address.

3. **Additional ways in which your application can be closed:**

- It is **your responsibility** to keep your contact information CURRENT. If we do not have an active address on record for you and are unable to contact you, **your application will be closed.** To view or make changes to your contact information, please login to your MyWCC account and click on "*Personal Information*" or contact the Student Connection Center located on the second floor of the Student Center Building.
- Students who have been admitted to the program will be REQUIRED to attend a Mandatory Orientation Session. The date, time, and location of this orientation along with other requirements (including health) will be stated in your Certified Official Acceptance letter. If you do not attend orientation and have not contacted and made other arrangements with the Nursing Department, **your application will be close.**
- Students are required to take the first ATI test, the Test of Essential Academic Skills (TEAS) before their official start date. The dates and times will be given during the Mandatory Orientation Session. If you do not schedule and take the TEAS prior to your official start date, and have not made other arrangements with the Nursing Department, **your application will be closed.**

**CONTINUED ON BACK→**

4. You must maintain a minimum cumulative college GPA of 2.5 while on the waitlist in order to be eligible to begin the nursing program. If you are accepted in our program and you do not meet the 2.5 cumulative GPA requirement, you will be required to take your deferment option in order to raise your GPA. If your GPA has NOT been raised to the minimum 2.5 requirement by the semester to which you deferred your admission, **your application will be closed.**
5. All Officially Admitted students are given the one (1) time only option to defer their admission to the program up to one (1) year. In order to take this option, you will be required to submit the Deferment Form (provided at the Mandatory Orientation) by the specified date as stated in your Official Acceptance letter. If you do not take your deferment option by this deadline and choose not continue with the program, **your application will be closed.**
6. If you receive an Alternate Candidate letter, you will be provided with the same information as an admitted student and expected to meet all the same requirements in order to be eligible to take the spot of an admitted student if he/she cancels his/her admission to the program. Approximately fifteen (15) students will be given Alternate Candidate Status each entry term. (Alternate Candidates are NOT eligible for the deferment option unless they have received official notice of their acceptance in the program.)
7. If we exhaust our Alternate Candidate list and still need to fill seats in the program for a specific entry term, be aware that if you have a low waitlist number you may be called for acceptance to the program at the last minute.
8. If your application has been closed for any of the reasons mentioned above and you would like to reapply to the program, you must meet all current prerequisite requirements and submit a new application to the program. Your name will be placed at the bottom of the waitlist in your residency category.
9. **You have read the Admission and Waitlist Process for High Demand Programs that is included in your application packet and are aware of your priority level for when there are more qualified applicants than openings for an entering class.**
10. **Your program application status can be viewed online through your MyWCC account by clicking on *Student Services* and then *Health and Second Tier Admission Application Status* approximately two (2) weeks after the submission of your application. You can view your waitlist number online approximately three (3) weeks after the application cycle has ended in which you submitted your completed application.**
11. **Your waitlist number will fluctuate (up and down) due to you or other waitlisted students making changes to their residency status, closing their application, or taking their deferment option once admitted to the program.**
  - **Your waitlist number can INCREASE or DECREASE depending on the residency status of you and/or other students in our database:** If your residency status has changed, your waitlist number will too. All students on the waitlist will see an increase or decrease in their waitlist number depending on the residency change that was made and the position on the waitlist of this student with the change. These changes could have been made by the student or the college. It is suggested that you check your residency status online through your MyWCC account on a regular basis to be sure your status is accurate.
  - **Your waitlist number may DECREASE if another student on the list has chosen to close their application:** If a student submits the Closing Application Form, the application will be removed from the waitlist which means many students on the waitlist will see a decrease in their waitlist number.
  - **Your waitlist number will INCREASE due to the Deferment Process in our database:** Once a student is officially admitted to the program, they are no longer reflected in the current waitlist numbers which means all remaining students on the waitlist will see a decrease in their waitlist number. When an admitted student chooses to take the deferment option and is replaced by an alternate student, all students will initially see a decrease in their waitlist number. However, when the deferred student is moved back onto the waitlist to be included in the admission process for the next entry term, all students currently on the waitlist will again see an increase in their waitlist number.
  - **Your waitlist number will DECREASE after we have admitted a class:** Your waitlist number should decrease by approximately forty (40) students each entry term.

**I have read these statements and understand their ramifications.**

**Printed Name:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**WASHTENAW COMMUNITY COLLEGE**  
**Nursing & Health Sciences Department**  
**Nursing and Nursing Assistant Programs (APNURS, APNURT, CCNAST))**  
**4800 East Huron River Drive**  
**Ann Arbor, MI 48105**

**INFORMATION RELEASE AUTHORIZATION FORM**

I understand that it is the policy of Washtenaw Community College to screen its students applying to the Nursing and Nursing Assistant Programs for prior criminal convictions as a condition for admission.

Part 201, of Article 17 of the Public Health Code, which regulates health facilities and agencies, were amended to require background checks on employees of nursing homes, county medical facilities, and homes for the aged. Under the bill, a nursing home, county medical facility or home for the aged could not employ, grant clinical privileges to, or independently contract with an individual who would be providing direct services to patients or residents if the person has been convicted in Michigan of:

\_\_\_ a felony within the previous **fifteen (15)** years

\_\_\_ an attempt or conspiracy to commit a felony within the previous **fifteen (15)** years

\_\_\_ a misdemeanor that involved abuse, neglect, assault, battery, or criminal sexual conduct against anyone or fraud or theft against a vulnerable adult (as defined under the Michigan Penal Code) or a substantially similar state or federal crime within the previous **ten (10)** years.

I understand that if I have a criminal record that includes any of these convictions, I am not eligible for admission into any of WCC's Nursing and Nursing Assistant Programs since all students will be assigned or placed in a nursing home, county medical facility, or home for the aged for their clinical experiences.

I hereby authorize Washtenaw Community College to release this form and/or any of its contents to the Michigan State Police and to the health care facility(ies) at which I will do clinical work in the course of my nursing studies. I agree to provide further identification if requested.

**You MUST submit a copy of one (1) of the following government issued picture ID's with this form which includes: Driver's License, State ID Card, or Passport.**

**Please PRINT clearly and answer ALL questions.**

Name: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

Previous Name(s) and/or Maiden Name(s): \_\_\_\_\_

Other Name(s) known by: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender (circle one): **Male** or **Female**  
Month Day Year

Ethnicity (circle one):

**White** or **Black** or **Asian or Pacific Islander** or **American Native or Alaskan Native** or **Unknown/Other**

Driver's License Number: \_\_\_\_\_

Current Address: \_\_\_\_\_

City / State / Zip Code: \_\_\_\_\_

Previous Address: \_\_\_\_\_

City / State / Zip Code: \_\_\_\_\_

**(TURN OVER --- CONTINUED ON BACK)**

**How long have you consecutively lived in the State of Michigan?** \_\_\_\_\_ **Years** \_\_\_\_\_ **Months**

Anyone who has resided in Michigan less than a consecutive three (3) years may be required to be fingerprinted as part of the criminal records check per State law. These fingerprints will be forwarded to the federal bureau of investigation to determine whether you have any national criminal history.

As a courtesy, criminal record checks are conducted using the Michigan State Police ICHAT system which has limitations that may cause false positive or false negative records to be received. If a false positive or false negative record is received or you believe that the record is a mistake or inaccurate, it will be your responsibility to clear the record which may accrue additional fees. Procedures for clearing a record can be found on the criminal record that was received. Please contact the Michigan State Police with any questions regarding finger printing or clearing your record.

Michigan State Police  
Criminal Justice Information Center  
7150 Harris Drive  
Lansing, MI 48913  
517-322-5531

Sometimes records inadvertently contain errors. For example, the nature or date of the conviction might be wrong, or the record might contain a conviction that should have been removed from the record. In such cases the individual should obtain certified copies of the court judgment or other documents which show that the information contained on the criminal record is incorrect. If the proof provided is satisfactory, the Michigan State Police will modify the record accordingly.

**The following statement must be signed and submitted prior to completing a Nursing or Nursing Assistant Program application.**

**APPLICANT'S STATEMENT:** *I hereby attest that I have not been convicted of any felony or attempt or conspiracy to commit a felony within fifteen (15) years prior to today's date nor of any misdemeanor listed on the front page within ten (10) years prior to today's date.*

*I understand and agree to be fingerprinted if required and clear my criminal record. I understand and agree that I will be immediately withdrawn from all Nursing or Nursing Assistant Programs should the criminal record check disclose any of the above-mentioned offense(s) or any others not disclosed by me as part of the application process. I confirm that the information I provided regarding my state residency is accurate and correct.*

*I understand that knowingly providing false information regarding a criminal conviction is a misdemeanor punishable by imprisonment for not more than ninety (90) days or a fine of not more than \$500.00 or both.*

*I agree to report immediately to the Nursing & Health Sciences Department Chair if I am arrested for or convicted of any of the criminal offenses listed on the front page of this Authorization.*

**Printed Name:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_