



**SOUTH DAKOTA
STATE UNIVERSITY**

College of Nursing

SDSU College of Nursing

Application for Admission to the Nursing Major

Application Deadlines

Spring Admission: **September 25th**

Fall Admission: **January 25th**

Today's date: _____

I, _____, request admission to the Undergraduate Nursing Major in the College of Nursing at South Dakota State University.

I am applying for a position starting in:

Semester:

Year: 2016

Site:

I am willing to attend the following alternate site(s) if space is available:

☐

Brookings

☐

Rapid City

General Information Section (please type)

Mailing address: _____
Street, RR, or Box City State Zip

Jacks email* (or official school email if not current SDSU student): _____

Current telephone: _____ Permanent telephone: _____

Student ID number: _____

High school education: ☐ High school diploma ☐ G.E.D.

Is English your second language? (*see requirement 5 on following page*)

☐ No☐ Yes

If you answered yes, enter TOEFL or IELTS score: _____

Are you contracted or working to contract with ROTC? ☐ No ☐ Yes If yes, which branch? ☐ Army ☐ Air Force

Have you completed any Honors-level courses? ☐ No ☐ Yes

If yes, please indicate: _____

Have you applied to SDSU's nursing program in the past? ☐ No ☐ Yes

Have you ever been enrolled in a professional nursing program in the past? ☐ No ☐ Yes**

**Letters regarding admission will be send via email in February.*

***Students who have begun but not completed a nursing program at another college or university must submit a letter to the College of Nursing indicating their reason for transfer. Three letters of recommendation must also be submitted to the College of Nursing: one from the dean/director of their former program and two from faculty members.*

Requirements:

1. Students are [eligible to apply](#) to the nursing major while they are in progress with their final pre-requisite courses. To be considered for admission, students must have pre-nursing and cumulative GPAs of 2.7 or higher. The College of Nursing also requires a grade of "C" or higher in all coursework applied toward graduation. Students are selected competitively based on the total applicant pool. All applicants will be notified by letter (sent via email) following the Admission and Scholastic Standards Committee's decision regarding admission.
2. Transfer Courses: All courses from other institutions must be transferred and recorded on the SDSU transcript by the time of application to the major. If this is not possible because of courses still in progress, attach a current transcript to your nursing application that shows your course history and classes in progress from that institution. *Application will be considered incomplete if transcript is not received.*
3. Transfer Students: The [application form](#) to SDSU must be submitted prior to application to the major. Failure to submit the SDSU application to the Admissions Office at SDSU will result in suspension of the nursing major application until this is received.
4. Complete the nursing major application form and submit or postmark by the due date.
5. Students who meet the definition of English as a Second Language must attain the [required TOEFL or IELTS score](#). English as a Second Language is defined as a student who was instructed and spoke primarily in a language other than English in the K-12 grades or primary and secondary schooling. Contact NSS office at 605-688-4106 with any questions.
6. Read and understand the [Technical Standards](#).

Directions for Completing the Application:

Read the application carefully.

1. Section I & II: If you have taken a course more than once, report the last grade you received for the course. **For courses in progress at the time of application, put an asterisk (*) on the grade line.**
2. Complete Section III, noting example of how to compute pre-nursing grade point average.
3. Respond to the questions in Section V.
4. Questions in Section IV are optional and will have no impact on the admission process.
5. **Please print a copy of your "Unofficial Transcript/Course History" from WebAdvisor and attach it to the application.**
6. This form must be mailed or hand-delivered to the College of Nursing at one of the following locations:

BROOKINGS: **SDSU Nursing Student Services**
(SWG 352) **Box 2275**
Brookings, SD 57007

RAPID CITY: **SDSU Nursing Student Services**
1011 11th Street
Rapid City, SD 57701

Section I: Pre-Nursing Courses

These courses MUST be completed with a "C" or better before admittance into the nursing major.

Course:	Grade:	Credits:	Semester & year taken	School where completed:
CHEM 106 Chemistry Survey or CHEM 112 Gen Chem I	_____	_____	_____	_____
CHEM 106L Chem Survey lab or CHEM 112L Gen Chem I lab	_____	_____	_____	_____
CHEM 108 Organic & Biochem or CHEM 114 Gen Chem II	_____	_____	_____	_____
CHEM 108L Organic & Biochem lab or CHEM 114L Gen Chem II lab	_____	_____	_____	_____
PSYC 101 General Psychology	_____	_____	_____	_____
SOC 100 Intro, 150 Soc Prob, or 240 Rural	_____	_____	_____	_____

BIOL 221 Anatomy	_____	_____	_____	_____
BIOL 221L Anatomy lab	_____	_____	_____	_____
BIOL 325 Physiology	_____	_____	_____	_____
BIOL 325L Physiology lab	_____	_____	_____	_____
HDFS 210 Lifespan Development	_____	_____	_____	_____
MICR 231 General Microbiology	_____	_____	_____	_____
MICR 231L General Microbiology lab	_____	_____	_____	_____
NUTR/NFS 315 Human Nutrition	_____	_____	_____	_____

Section II: General Education Core

These courses **MUST** be completed with a “C” or better before admittance into the nursing major. Any courses you have taken that are not listed below (i.e. NURS 201) do not need to be reported.

Course:	Grade:	Credits:	Semester & year taken	School where completed:
MATH 102 College Algebra or higher*	_____	_____	_____	_____
ENGL 101 Composition I	_____	_____	_____	_____
SPCM 101 Fundamentals of Speech*	_____	_____	_____	_____
SGR Goal #4 Humanities (please indicate)* _____	_____	_____	_____	_____
IGR Goal #1 First-Year Seminar (please indicate NURS 109 or other)* _____	_____	_____	_____	_____

*See SDSU undergraduate catalog/bulletin for list of approved General Education courses

Section III: Grade Point Averages

Cumulative grade point average (GPA) as of last grade report: _____
(check unofficial transcript on WebAdvisor)

Grade point average (GPA) of completed pre-nursing courses listed in Section I: _____

A = 4 points	Example:	<u>Credits:</u>	<u>Grade:</u>	<u>Grade points:</u>	Total grade points (31) ÷ Total # of credits (10) = <u>3.100</u>
B = 3 points	BIOL 221	4	A (4)	4 x 4 = 16	
C = 2 points	PSYC 101	3	C (2)	3 x 2 = 6	
D = 1 point	SOC 100	<u>3</u>	B (3)	3 x 3 = <u>9</u>	
	Total = 10			Total = 31	

Section IV: Optional Questions (for informational purposes only)

The College of Nursing applies for federal grants that ask for data on disadvantaged students. Many of these grants provide funding for program enhancements or include student support in the form of scholarships and stipends. Information provided is confidential and will not factor into admission decisions. Data may be used in aggregate form for federal reporting and grant applications.

1. Did your family receive public assistance (e.g. Aid to Families with Dependent Children, Temporary Assistance to Needy Families, Supplemental Nutrition Assistance program, Medicaid, food stamps, and/or public housing)? ☐ Yes ☐ No ☐ Do not know
2. Are you the first generation in your family to attend college? ☐ Yes ☐ No
3. High school name, city, and state: _____
4. Do you / your family live in an area designated under section 332 of the Public Health Service Act as a health professional shortage area? (To find out if the area is a health professional shortage area, visit the following link and select "Primary Care" as the discipline: <http://datawarehouse.hrsa.gov/tools/analyzers/hpsafind.aspx>)
☐ Yes ☐ No ☐ Do not know
5. Are you:
☐ Hispanic or Latino
☐ Non-Hispanic
6. Choose one or more that apply:
☐ American Indian or Alaska Native
☐ Black or African American
☐ Native Hawaiian or Pacific Islander
☐ White
☐ Other

Section V: Legal Compliance Questions (required)

Please answer the following questions taken from the South Dakota Board of Nursing licensure application form. If you answer "yes" to any of the questions, please provide a complete description of dates and circumstances on last page of this application. (Clinical agencies and boards of nursing require criminal background checks and information as a basis for practice and licensure.) Please note that disclosure is important.

1. Have you ever been convicted, pled guilty or no contest/nolo contendere, pled guilty to, or been granted a deferred judgment or sentence with respect to a felony, misdemeanor, or petty offense other than minor traffic violations?
☐ No ☐ Yes
2. Is there any pending criminal prosecution against you which would constitute a felony? ☐ No ☐ Yes
3. Are you currently being investigated or is disciplinary action pending against any professional license(s) or certificate(s) held by you? ☐ No ☐ Yes
4. Has any nursing license or certificate ever held by you in any state or country been denied, revoked, suspended, stipulated, placed on probation, or otherwise subjected to any type of disciplinary action? ☐ No ☐ Yes
5. Have you ever had privileges revoked, reduced, or otherwise restricted at any hospital or other healthcare provider entity? ☐ No ☐ Yes
6. Have you ever been subject to proceedings by a professional society to revoke, reduce, or restrict membership?
☐ No ☐ Yes
7. Have you ever been treated for abuse or misuse of any alcohol or chemical substance? ☐ No ☐ Yes
8. Have you ever experienced a physical, emotional, or mental condition that has endangered the health or safety of persons entrusted in your care? ☐ No ☐ Yes
9. Do you currently owe child support arrearages in the amount of \$1,000 or more? ☐ No ☐ Yes
10. Are you currently on probation? ☐ No ☐ Yes

I understand that if I am convicted, plead guilty or no contest, or receive a suspended imposition of sentence for a felony or other criminal offense (excluding minor traffic violations) while in the nursing major, I will report the offense within two days to the Director of Nursing Student Services in the College of Nursing.

Please initial to acknowledge that you agree to adhere to the above statement: _____

I hereby verify that all the information contained in the document is accurate and truthful to the best of my knowledge:

Signature _____ **Date** _____

Printed name: _____

If you answered "yes" to any of the questions in Section V please provide a complete description of dates and circumstances below. You must also submit copies of charges or citations and ALL communications with (to and from) the citing agency AND the court of jurisdiction, including evidence of completion/compliance with court requirements. You must submit all supporting documents that are applicable to one of the following locations:

Brookings: **SDSU Nursing Student Services**
(SWG 352) **Box 2275**
Brookings, SD 57007

Rapid City: **SDSU Nursing Student Services**
1011 11th Street
Rapid City, SD 57701

PRINT

Please keep a printed copy of this application for your records