



## Minimum Requirements for Admission Eligibility:

- 1. Hartnell College enrollment: If not currently enrolled, a Hartnell College Application for Admission indicating eligibility must be completed and on file in the Office of Admissions and Records.
- 2. Completion of high school: Official high school transcript or equivalent required (Board of Vocational Nursing and Psychiatric Technicians, Rules and Regulations, Section 1412).
- 3. Completion of all prerequisite courses with a grade of "C" or better as documented on official transcripts. (In-progress courses will not be accepted, with the exception of NVN 131)
- 4. Current American Heart Association Healthcare Provider CPR certification.

## **Selection Process**

The Vocational Program receives more applications than spaces available. Admission is based on GPA, and health-related volunteer or work experience. Letters of recommendations and performance ratings from persons familiar with the applicant's work and/or education in a health-related field, e.g., certified nursing assistant, paramedic, medical assistant and/or instructors, are considered during the selection process. Personal references are not considered.

#### **Application Process**

The Vocational Nursing Program has a separate admission application process from the Hartnell College admission process. General college application materials are available in the Office of Admissions and Records on the main campus or on the Hartnell College website (<u>www.hartnell.edu</u>).

The newly redesigned Vocational Nursing (VN) Program is a 12-month, year round program and is currently accepting applications for Summer 2012. Information packets and application forms are available on the main campus in the Department of Nursing Office and the Counseling Department, located in the CALL Building, or online at <u>www.hartnell.edu/academics/health.html</u>. The completed application with official documents of verification must be submitted to the Nursing Department office by the published deadline date. <u>There are no exceptions</u>.

## Application Dates and Contact Information:

Submission Deadline: December 16, 2011, 4:30p.m. –NO EXCEPTIONS. Acceptance Notification: No later than March 1, 2012

Department of Nursing and Allied Health:

Mailing address: Hartnell College Attn: Dept. of Nursing and Allied Health Mail Box G-19,<br/>411 Central Avenue, Salinas CA 93901<br/>Office location: CALL Building 2<sup>nd</sup> Floor (Room 216)<br/>Tele: (831) 770.6146, 770-6148 Fax: (831) 770.6144Counselors:<br/>Mailing address: Hartnell College Attn: Counseling Department<br/>411 Central Avenue, Salinas, CA 93901<br/>Tele: (831) 755.6820.Hartnell College Office of Admissions and Records:<br/>411 Central Avenue, Salinas CA 93901<br/>Tele: (831) 755.6711 Fax: (831) 759.6014

#### **Official Transcripts:**

**High school**: An official sealed transcript, GED report, or proficiency report must be submitted with the application packet to the Department of Nursing.

Hartnell College: Students must request an official Hartnell College transcript be sent to the Nursing Office.

**Other Colleges:** Official transcripts from colleges other than Hartnell College must be mailed or delivered to Hartnell College Admissions and Records *and* the Department of Nursing.

**<u>Request for Course-to-Course Evaluation Form</u>:** A Harnell College counselor must evaluate course descriptions provided by the student for each prerequisite or general education course completed at another institution. Once reviewed, the nursing counselor completes and signs the form that must be included with the nursing application. Appointments with a Hartnell College counselors may be made by calling the Hartnell College Counseling Department at (831) 755-6820.

**Foreign high schools and colleges:** Official transcripts must be evaluated for course work equivalency to United States educational standards by a credentials evaluation service approved by Hartnell College. A comprehensive evaluation is required for prerequisite college coursework. For high school, a letter from the evaluation service verifying equivalency to United States education through 12<sup>th</sup> grade is required. Contact Hartnell College Office of Admissions and Records for more information.

**<u>Rating/ Recommendation Forms</u>:** Recommendations from three (3) sources are required, preferably from those who can comment on the applicant's health-related nursing coursework or employment in a health-related field (e.g., CNA, MA, HHA, Paramedic, etc.). Letters of recommendation from personal friends or relatives are not accepted.

**Health-related Work Experience Statement:** A brief (typed) statement on the applicant's work or volunteer experience in health-related field must be submitted.

**Healthcare Provider CPR certification:** Applicants must provide proof of current certification. Maintenance of the American Heart Association Healthcare Provider certification is required by the Department of Nursing.



Hartnell College Vocational Nursing Certificate Program Office: CALL Building, 2<sup>nd</sup> Floor, Hartnell College Main Campus 831-770-6146, 831-770-6148



# **Application Checklist**

I understand that to be considered for admission to the Vocational Nursing Program at Hartnell College, I must have completed all of the following:

- 1. All prerequisite coursework
- 2. Application for Admission submitted to Hartnell College Admissions Office, if currently not enrolled .
- 3.  $\square$  High School transcript, 12<sup>th</sup> grade or equivalent
- 4. American Heart Association Healthcare Provider CPR certification
- 5. Consultation with a Hartnell College counselor if required courses were taken at other colleges

# The completed vocational nursing application must be submitted to the nursing department office by December 16, 2011, 4:30 pm <u>(NO EXCEPTIONS)</u>. The following documents are required:

One (1) sealed, official Hartnell College transcript mailed to Department of Nursing office or submitted with the application packet
Two (2) official transcripts from every college attended. One transcript must be mailed or submitted with the application packet to the Department of Nursing and one must be mailed or submitted to the Hartnell College Office of Admissions and Records: Hartnell College ATTN: Dept. of Nursing, 411 Central Ave. Salinas, CA 93901
Hartnell College ATTN: Office of Admissions & Records, 411 Central Ave. Salinas, CA 93901 One (1) official high school transcript, GED report, or proficiency report mailed or submitted with the application packet
Three (3) completed Recommendation/Rating Forms
One half $(1/2)$ page typed statement on work or volunteer experience, preferably in a health-related field
Authorized <u>Request for Course-to-Course Evaluation Form</u> for coursework completed at other colleges or institutions. The form must be signed by a Hartnell College counselor. Foreign

to-Course Evaluation Form can be completed by a Hartnell College counselor.

transcripts must be evaluated by an outside credential evaluator before a Request for Course-

Copy of current American Heart Association Healthcare Provider CPR card

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# Hartnell College Vocational Nursing Certificate Program



Application for Summer 2012

Name:Last	Middle	Social Security Number:				
Last	Midule	FIISt				
Former names used in high school or college:						
	Last	Middle	First			
Address:						
Street			City	State	Zip	
Home Phone:	Work Pho	ne	E-mail address:			
College/University		Dates Attended	Total Units	Overall GPA	Degree (completed)	
Include all colleges/universit	ties attended		Completed			

Students must request an official copy of their Hartnell College transcript be sent to the Nursing Office. High school and transcripts from other colleges must be submitted to the Office of Admissions and Records and to the Nursing Department. A Hartnell College counselor must evaluate course descriptions provided by the student for each prerequisite course completed at another institution. A Request for Course to Course Equivalency Form must be completed by the counselor and included with this application. An approved outside credential evaluator must evaluate foreign transcripts for high school equivalency and college coursework.

All prerequisite courses must be completed and posted on transcript prior to applying: (No courses in progress will be accepted with the exception of NVN 131)

Hartnell College Course Name and #	Completed at Hartnell	Other College	Other College Equivalent Course Title and #	Sem/Yr	Units	Grade
ENG-1A College Composition (3 units)						
MAT-121 Elem Algebra or higher (5 units)						
*FCS 22 or *FCS 23 Nutrition (3 units)						
*PSY-2 General Psychology (3 units)						
*BIO 11 Introduction to Human Anatomy and Physiology (4 units) <b>Or</b>						
*BIO-5 Anatomy (4units) and						
*BIO-6 Physiology (3 units) and						
*BIO-6L Physiology Lab (2 units)						
<i>Curren</i> t American Heart Association Healthcare Provider CPR certification						

Other required courses for certificate may be completed before admission into the Vocational Nursing program::

Hartnell College Course Name and #	Completed at Hartnell	Other College	Other College Equivalent Course Title and #	Sem/Yr	Units	Grade
*NVN-131 Growth and Development Across the Lifespan (3 units)						

\*Recency: Courses marked with an asterisk must be completed within five (5) years of entering the Vocational Nursing Program in order to receive credit for the hours required by the Board of Vocational Nursing and Psychiatric Technicians of the State Of California (California Code of Regulations, Title 16: Professional and Vocational Regulations, Division 25: Board of Vocational Nursing and Psychiatric Technicians of the State of California).

I hereby acknowledge that the failure to follow admission procedures or omission of required documentation will result in disqualification of my application for admission to the Hartnell College Vocational Nursing Program.

Signature of applicant:

Date:



Hartnell College Vocational Nursing Certificate Program



## Health-related Work Experience Statement

## VOCATIONAL NURSING STUDENT APPLICANT:

Please type a brief statement on your work or volunteer experience. Describe your direct client care experience. Please include additional information you would like to share during the application process.



Hartnell College Vocational Nursing Certificate Program Recommendation/Rating Form



**TO THE APPLICANT:** Provide a copy of this form to persons familiar with your work and/or education as it relates to nursing. Each Recommendation/Rating Form should be returned to the nursing office in a sealed envelope unless you do not waive the right to examine the responses. Three (3) recommendations are required. **Recommendations from personal friends or relatives are not acceptable.** 

APPLICANT TYPE OR PRINT THE FOLLOWING INFORMATION:

Applic	ant Name		
Mailin	g Address		
Presen	t Occupation	Employer/Institution	
Expect	ted Date of Entry		
		Relationship to Applicant	
I hereb		amine this evaluation. ( <i>I do not want to review my references.</i> ) ht to examine this evaluation. ( <i>I do want to review my references.</i> )	
Applica	ant's Signature	Date	
Nursing Program at Hartnell College and has asked you to evaluate her/his ability to work in nurs. If the applicant has not waived the right to review this rating form, you should consider the rating form non-confidential. Evaluations must be received by <b>December 16, 2011, 4:30 p.m.</b> in the Nursing Department office. NO EXCEPTIONS. <ol> <li>How long have you known the applicant and in what capacity? (Give dates, if possible)</li> </ol>			
2. R	<i>Instructors only:</i> Course Nar anking in the course top:	me:	
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4. Compare the applicant with others you have known and/or supervised.

	Upper 5%	Upper 10%	Upper 25%	Upper 50%	Lower 50%	No Basis to Judge
Academic Ability						
Oral						
Communication						
Written						
Communication						
Motivation/						
initiative						
Cooperation						
Emotional						
Maturity						
Dependability						
Creativity						
Ability to work						
with others						
Critical Thinking						
Integrity						
Overall Potential						

5. Provide additional information related to the applicant's potential in nursing school. Include particular strengths and/or weaknesses. We appreciate your candid appraisal. Attach an additional sheet, if necessary.

Signature:	Name:
Position/Title:	Date:
Company or Institution:	Phone:
<u>Please mail to</u> :	Hartnell College ATTN: Department of Nursing and Allied Health Mail Box C-6 411 Central Avenue Salinas, CA 93901 <u>Must be returned by December 16, 2011</u>

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Please Print or Type: