



Associate of Science in Nursing (ASN) Program Admission Application 2019-2020

 First name Middle name Last name Previous name(s) used DOB

 Mailing address City State Zip

 Primary phone Message phone Email address

 Emergency contact name Relationship Phone number

Ethnicity (please check all that apply) **Age** **Gender** **Veteran status****

Native American or Alaska Native 18-24 Female Non-veteran

Asian or Pacific Islander 25-34 Male Veteran

African American 35-44 Other Qualifying spouse

Hispanic 45-54

Caucasian 55-64

Other: _____ 65-above

Tribal affiliation* (Students enrolled in a federally recognized tribe must submit verification of enrollment.)
 Enrolled Descendent Name of the tribe: _____ State: _____

Previous healthcare related work experience (please submit a resume if more than one)

Employer _____ Immediate supervisor _____
 Address _____ Phone number _____
 Position title _____ Dates of employment _____

Previous college degree(s) or certificate(s) completed (please submit a resume if more than one)

Degree: _____ Major: _____ Date degree conferred: _____
 College: _____ City, State: _____

Have you ever attended SKC before? Yes No
 If not, have you completed the SKC Application for Admission? Yes No
 Have you submitted all your official college transcripts to the SKC Enrollment Services? Yes No
 Are copies of all your college transcripts (can be unofficial) attached to this application? Yes No
 If an enrolled tribal member, is a copy of your Tribal ID attached to this application? Yes No
 Have you completed all the ASN pre-requisite courses listed below? Yes No

Course #	Course Title	Quarter / Year	Grade	Notes
BIOS 215	Anatomy and Physiology I			Fall 2014 or later; B or higher required
BIOS 216	Anatomy and Physiology I Lab			Fall 2014 or later; B or higher required
BIOS 217	Anatomy and Physiology II			Fall 2014 or later; B or higher required
BIOS 218	Anatomy and Physiology II Lab			Fall 2014 or later; B or higher required
MATH 103 MATH 100	Contemporary Math OR College Algebra			Fall 2014 or later; B or higher required
ENGL 101	English Composition I			
ENGL 202 ENGL 203	English Composition II OR Technical Writing			
PSYC 110	Introduction to Psychology			
IDST 101	SKC Seminar			Students who started at SKC as freshmen
NASD/NASL	Open Elective OR NASD 101			Can be completed during the ASN Program



ASN Student Responsibility Statement

As part of the SKC ASN admissions process, I understand that:

1. Official transcripts verifying all coursework completed must be submitted directly to the SKC Enrollment Services by June 15th.
2. The Kaplan Nursing School Admission Test must be completed by June 1st. Directions will be sent to eligible applicants via email to the email address provided.
3. Completion of the application process and prerequisite coursework does NOT guarantee admission into the Nursing Program.
4. Prerequisite and general education courses can be repeated three (3) times to improve a grade.
5. The expenses for enrollment in the Nursing Program are higher than the cost of general college courses. While SKC assists students in obtaining financial aid, I am fully responsible for payment of tuition, related educational obligations, and my living expenses.
6. A physician's recommendation and official American with Disabilities Act documentation MUST accompany all requests for specific classroom accommodations. I will be required to have ongoing monitoring by a physician to ensure that appropriate accommodations are met.
7. In the clinical setting, client safety must be maintained at all times. Student health problems (such as chemical dependency/abuse, uncontrolled seizure disorder, etc.), which impede a person's physical capacity and/or ability to think clearly and provide safe care using sound judgment, must be stabilized prior to admission.
8. I must attend a mandatory Nursing Institute prior to the beginning of Fall Quarter.
9. I must complete and submit additional required documentation (e.g. immunization records) upon acceptance into the ASN Program and PRIOR to the Nursing Institute. Failure to do so WILL result in my dismissal from the program.
10. I must complete and pass a background check (fee charged by SKC) prior to the Nursing Institute.
11. All ASN students are subject to a random drug screening prior to attending the NSGD classes.
12. I am responsible for updating my contact information quarterly. The Nursing Department is NOT responsible for delayed communication due to incorrect or outdated contact information.
13. Successful completion of the Nursing Program does not guarantee eligibility for licensure as an RN.

I, _____ PRINT NAME PLEASE _____ have read and understand each of the above listed statements, and have indicated so by signing this form.

Applicant signature

Date

Please return the completed application form and copies of all unofficial transcripts
by 4:30 p.m. on May 1st.

via: **Fax:** (406) 275-4806, or **Email:** nursingadmissions@skc.edu

Mail: Attn: Nursing Department, Salish Kootenai College, PO Box 70, Pablo, MT 59855