

**Fall 2023 Associate Degree Nursing Program applications will be accepted from
February 1, 2023 at 8:00 AM through May 10, 2023 at 3:00 PM.**

****Application must be filled out completely for processing****

****Save the date****

Mandatory Boot Camp for admitted students will be held Friday, June 23 and Friday/Saturday, July 21 and 22, 2023 from 8:00 a.m. - 5:00 p.m.

First Name	MI	Last Name	SCC Student ID#
Phone	Email		
Mailing Address	City	State	Zip

Nurse Aide I Listing / LPN Licensure:

- I have reviewed the student readiness checklist and meet all requirements to apply.
Completed Nurse Aide 1 with a valid certificate: I am listed on the NC Nurse Aide registry, and my NA must be current at the time of admission.

Upload or attach your active NC Nurse Aid Registry listing documentation

NA Registry Number: _____ Expiration Date: _____

Maintain a current unencumbered license to practice as a LPN in North Carolina

Upload or attach your active license to practice as a LPN in North Carolina

License Number: _____ Expiration Date: _____

TEAS Exam:

- Applicants must complete the TEAS (Test of Essential Academic Skills) exam with a minimum composite score of 59.0% overall prior to the submission of this application. Scores are only valid for 2 years.

Test date: _____ Number of times taken: _____

TEAS Score: _____

Educational Information:

High School Attended: _____ Graduation Date: _____

Highest Grade Level Achieved:

GED or Equivalent: High School Diploma: Associate Degree: Bachelors Degree: Masters Degree: Doctorate Degree:

Previously Enrolled in any Undergraduate Nursing Programs: Yes No **IF YES, PLEASE COMPLETE THE INFORMATION BELOW:**

Name of College Attended: _____ Program attended: ADN LPN

*Please note any student that has previously been enrolled in a nursing program at any college other than Southeastern Community College must provide a letter from the Dean/Director of the program. The letter must state that the student has exited the nursing program in good standing with no issues related to safety or gross negligence in the clinical setting. The Director/Dean may email the letter to the Director of Nursing at Southeastern Community College at: Jessica.Hill@sccnc.edu

Cumulative GPA / Pre-Nursing Coursework Completed:

Please provide the information below for all completed equivalent courses from Southeastern Community College and any other institutions you have attended. Please indicate if you are currently enrolled in a course this semester.

- Applicants must have a cumulative GPA of 2.5 or higher.
 - GPAs for applicants who have never taken any courses at SCC will be determined by averaging the cumulative GPAs from all previously attended college/university transcripts.
 - GPAs for students who have taken any courses at SCC will be determined by the SCC cumulative GPA.

Current cumulative GPA: _____

Complete	Enrolled	Credit for	Grade	Semester/Year	Number of times taken or withdrawn	Name of College or University
		ENG 111				
		ENG 112				
		PSY 150				
		PSY 241				
		BIO 168				
		BIO 169				
		ACA 122				
		PHI 240				
		NUR 117				

SCC General Admissions Information:

Have you completed and updated the SCC Admissions Application and been admitted? Yes No

Have you completed the Online Residency Determination and received a RCN? Yes No (www.ncresidency.org)

Please note, an updated SCC Application and Residency Determination needs to be completed prior to this application.

Application Agreement:

I am applying for admission to the Fall 2023 Associate Degree Nursing program at Southeastern Community College. By submitting this application, I agree that I have read the **Student Readiness Checklist** and meet the requirements listed for entry into the program and have attached all required supporting documentation. I certify that all information provided is true and accurate to the best of my knowledge. I further acknowledge that misrepresenting information required for entry into the program can lead to dismissal if I am admitted.

Signature of Applicant: _____ Date: _____

*Please make an appointment to meet with your Nursing Advisor if you have questions regarding the application process prior to submission.
 *Return completed applications, along with supporting documentation to nursing@sccnc.edu OR hand deliver to Kathy Britt, Administrative Assistant of Nursing and Healthcare Training, located in "R" Building.