

Application Deadline: Wednesday, March 5, 2025, at 3:00pm LPN to RN Application for Summer 2025 Start - Class of May 2026

<u>Please Note:</u> Health care agencies require nursing students must be at least 17 years of age to participate in clinical rotations and provide patient care. Per the Northeast State Community College Nursing Student Handbook policy, "All nursing students must comply with the health care agencies' requirements." To meet health care agencies' requirements, applicants must be 17 years of age by June 1, 2025, to be eligible to attend clinical rotations.

Applicant Information (Please no	ote application must be completed	<u>in ink.)</u>	
Applicant Name (Please print)			
	Last	First	MI
Northeast State Community Colle	ege assigned Student ID Number:		
Mailing Address:			
City:	State:	Zip Code:	
() Home Phone Number	() Cell Phone Number	() Alternative Phone	Number
Email Address	Alternati	ve Email Address	
new contact information to nursinursingmail@northeaststate.edu Required Submission of Transcri Average of 3.0 after completing (credit hours of coursework consi Science in Nursing degree, LPN to ("C" or better) by the end of spri Composition I; MATH 1530: Intro 3.0 weighted Grade Point Average Submission of Transcripts - Appli	ipts: All qualified applicants must p (or be in progress of completing by sting of pre-nursing courses that a o RN concentration. Pre-nursing co ng 2025 are: BIOL 2010: Anatomy oductory Statistics and PSYC 1030	possess a minimum weighted the end of spring 2025) a minimum re required for the Associate burses that must be successful and Physiology I; ENGL 1010: Introduction to Psychology in progress of completing a minimum weighted progress of completing a minimum weighted progress and progress a minimum weighted progress and progress a minimum weighted progress and prog	Grade Point nimum of 12 of Applied Ily completed English with a minimum
concentration) are required to: I certify that the information contained with	in this application is true and is made in good cuments are sufficient for disqualification of a s page.	faith. I understand the following: falsifi	ed statements on this



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- a. provide official, unopened copies of transcripts to the Northeast State Admissions Office, if college credit hours or coursework has been completed at institutions other than Northeast State; and
- b. attach official, unopened copies of transcripts from Northeast State to the Nursing Application. (Applicants, who have had course work transferred into Northeast State, must attach copies of his/her official, unopened Northeast State transcripts showing transfer credit has been applied to the Northeast State transcript.)
 - 1. All pre-requisites the student has completed must have a letter grade on the official Northeast State transcript for ranking purposes.
 - 2. All pre-requisite and co-requisite courses currently being taken must show "IP" (in progress) on official Northeast State transcript for ranking purposes.
 - 3. All courses required for the associate of applied science in Nursing at Northeast State must reflect a grade of a "C" or better.
 - 4. Courses with the grade of "C- "or below will not be accepted.
 - 5. If a Course Substitution Form or Petition to Evaluate Transfer Work has been initiated by the applicant, a copy of the initiated form must be included in the Nursing application packet.
 - 6. All biology courses (BIOL 2010, BIOL 2020, and BIOL 2230) required for the Associate of Applied Science in Nursing degree must contain lecture and laboratory components and must be completed within 10 years of first semester of NRSG coursework.
 - 7. To check a Northeast State transcript, please go to www.NortheastState.edu and log into MyNortheast. It is the applicant's responsibility to ensure the information posted on official transcripts is correct.
 - 8. To request a **printed official transcript** on paper, go to your My.Northeast account. Select Banner self-service, student, records, request printed transcript. Please know that paper requests take up to 3 business days to be printed following the request. Additional time for mailing will apply.

Effective for AAS in Nursing, LPN to RN Concentration, Summer 2023 Start – Class of May 2024: A Systemwide Articulation Agreement between the Tennessee Colleges of Applied Technology and TBR A.A.S. in Nursing, LPN to RN programs has been created and approved by TBR. The College System of Tennessee nursing program directors worked to establish common admission requirements to reduce confusion and to streamline the pathway to becoming an RN after completing the LPN program at a TCAT.

TCAT graduates will not be required to take the community college AAS RN Admission Assessment Exam (A2) IF the applicant has graduated within the past 3 years (March 2022-March 2025), and has successfully passed the TCAT specific exit exam (successful completion of the TCAT specific exit exam is required for a student to

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Student Applicant Signature:	_Date:



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graduate from the LPN program). If it has been greater than three years or the student is not a TCAT graduate current policy for Admissions Assessment will apply. (See Required Submission of Admission Assessment (A2) Scores below)

If an LPN to RN applicant can provide proof they took their LPN Exit Exam, ATI Comprehensive Predictor (TCAT-Elizabethton) with an 90% or better within the last 3 years (March 2022-March 2025), they can submit these scores with their LPN to RN application as their Entrance Exam required for the LPN to RN Program. The applicant's LPN Exit Exam, ATI Comprehensive Predictor scores must be included in the nursing application packet.

Required Submission of Admission Assessment (A2) Scores

The entrance test required to be completed is the Admission Assessment (A2) if applicant is not a TCAT Graduate within the past three years. For information on registering for the A2 exam, please visit the Northeast State Community College Testing Center webpage for the Nursing Entrance exam at https://www.northeaststate.edu/resources/testing/nursing-entrace-exams.html. The applicant's A2 scores must be included in the nursing application packet. Completion date must be within one year of applying to the program. Applicants are allowed one re-test per calendar year with a one-week waiting period between tests. Applicants may submit the first or second A2 scores with the nursing application packet at their discretion. Admission Assessment (A2) results must be current (less than one year old) as of the application deadline. For example, the A2 exam must be completed between March 5, 2024 – March 5, 2025.

Prior Application Submitted to Northeast State Nursing Program

If application has been made to the Northeast State associate of applied science in Nursing previously and the applicant wishes to be considered for application for this cycle, the applicant must reapply, completing all application requirements again as if this were the applicant's first time applying. For applicants previously accepted and enrolled into the Northeast State Nursing Program, the nursing application and requirements must be met by the deadline. All requirements for application are applicable to all students seeking readmission.

Submission of Licensed Practical Nurse License

A copy of your LPN license must be supplied in your application packet. This license must be active and unencumbered.

Registration of Courses for Accepted Applicants

Student Applicant Signature: ___

If accepted into the program, the student will be issued a registration permit for NRSG 1600: Transition to Professional Nursing (6 credit hours) which is composed of three components (lecture, lab, and clinical), and NRSG 1340: Mental Health Nursing (3 credit hours) which is composed of lecture and clinical. This registration permit will allow the student to register for their assigned lab, clinical and lecture sections. Student schedules will be assigned by the Director of Nursing or his/her designee. Students, who have not completed BIOL 2020: Anatomy and Physiology II with a "C" or better, will need to register themselves for this co-requisite course to

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be completed during summer 2025, as it is required to be completed <u>prior to or during</u> the summer semester of the LPN to RN program. Students, who wish to be considered full-time for scholarship, insurance, or financial aid reasons, will need to register for additional needed credit hours; if uncertain if this is applicable, contact financial aid for more information.

Core Performance Standards

All Tennessee Board of Regents (TBR) nursing programs have adopted the following core performance standards proposed by the Southern Council on Collegiate Education for Nursing (1992). Admission to and progression in nursing programs is not based on these standards; instead, they will be used to assist each student in determining whether accommodations or modifications are necessary. Each of these standards is reflected in nursing course objectives and provides an objective measure for students and advisors to make informed decisions regarding whether the student is "qualified" to meet requirements. Copies of these standards will be available to every applicant and student. If a student believes that he or she cannot meet one or more of the core performance standards without accommodations or modifications, it is appropriate for the student to take the responsibility of identifying his or her need for accommodations to the Accessibility Services and course instructor. The needs of each self-identified student will be addressed on an individual basis when considering necessary accommodations, and it is recognized that helping to determine successful accommodation is the responsibility of the student, as well as the faculty member. The nursing program will cooperate with other college units to identify auxiliary aids and services which may be needed for reasonable accommodations.

Core Performance Standards for Admission and Progression

- 1. Critical thinking ability sufficient for clinical judgment.
- 2. Interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds.
- 3. Communication abilities sufficient for interaction with others in verbal and written form.
- 4. Physical abilities sufficient to move from room to room and maneuver in small spaces.
- 5. Gross and fine motor abilities sufficient to monitor and assess health needs.
- 6. Auditory abilities sufficient to monitor and assess health needs.
- 7. Visual ability sufficient for observation and assessment necessary in nursing care.
- 8. Tactile ability sufficient for physical assessment.

Student Signature	Student's Identification #	 Date
certify that the information contained within	this application is true and is made in good faith. I understand	the following: falsified statements on this
application or failure to provide required docur understand all information contained on this p	ments are sufficient for disqualification of application and/or d age.	ismissal if accepted. I have read and
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Clinical Health Care Requirements

All accepted nursing students must comply with the health care agencies' clinical requirements. Clinical requirements are enforced by clinical affiliates and OSHA regulations. Please be aware that clinical affiliates may refuse clinical rotation access to students who fail to obtain the required immunizations, therefore, negatively impacting a student's ability to successfully progress in the curriculum/program. Clinical requirements may be added or changed based on current information regarding communicable diseases and/or revisions/additions of new College, Board of Regents, and/or health care agency requirements. Students will be informed of new requirements and deadlines for new requirements.

All Nursing applicants are requested to provide proof of all immunizations/vaccinations, positive titer (if needed), or documentation supporting one or more of the exemptions listed above with the Nursing Application packet. Failure to submit clinical health care requirements cannot lead to disqualification.

Students are to submit copies of required documentation with his/her Nursing Application packet. <u>Do not send original documents</u>. Do not send health histories. The applicant's name is required to be on the proof of documentation. If a health care provider's statement is used, the applicant's name and the health care provider's signature are required on the documentation.

For accepted applicants, further information will be provided in the acceptance letter for <u>additional</u> Clinical Health Care and health/accident insurance requirements.

Exemptions

Valid exemptions include medical exemption and/or a religious exemption.

- Medical Exemption: Physician, health department, or health care provider provides documentation indicating medical exemption from specific vaccinations due to risk of harm stating one of the following as a contraindication for the vaccination: (1) the individual meets the criteria for contraindication set forth in the manufacturer's vaccine package insert; (2) the individual meets the criteria for contraindication published by the U.S. Centers for Disease Control of the ACIP; or (3) in the best professional judgment of the health care provider, based on the individual's medical condition and history, the risk of harm from the vaccinate outweighs the potential benefit.
- Religious Exemption: The student's religious affiliate provides on official letterhead a signed, notarized statement (affirmed under penalties of perjury) indicating the vaccination conflicts with the student's religious tenets or practices.

Immunizations/Vaccinations

Student Applicant Signature: ___

All student applicants are requested to submit documentation of completed vaccination/immunization series, positive/reactive/immune titers, or valid medical/religious exemptions for the items listed below with the Nursing Application.

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- Measles, Mumps, Rubella (MMR)
- Varicella
- Hepatitis B
- Tuberculosis (Tb) Screen 2 Step Process (Tb screening tool required annually following 2 Step Process with Nursing Application)

Questions/Concerns can be answered by contacting current healthcare provider.

Measles, Mumps, Rubella (MMR)

Decide which <u>box</u> applies to you and place an "X" in the box you selected. You must supply additional documentation if selected box requests such.

Student Applicant Signature:	Date:
	ion is true and is made in good faith. I understand the following: falsified statements on this fficient for disqualification of application and/or dismissal if accepted. I have read and
·	d the chickenpox. (Must supply signed documentation with the er with year of illness. Attach documentation to the back of this
$\hfill \square$ I was born before 1980, therefore presum proving year of birth; highlight the birth year	ed immune through past illness. (Must supply documentation ron documentation provided); or
Varicella (Chicken Pox) Decide which box is applicable and place an documentation if selected box requests such	"X" in the box selected. The applicant must supply additional า.
☐ I met one of the approved exemptions and	d have provided the appropriate documentation.
or immune. (Must provide documentation o	itive titer for measles, mumps, rubella, and rubeola with IgG positive if positive titer for measles, mumps, and rubella. I highlighted this bmitted and attached a copy to back of this form.); or
(Must provide documentation of positive tite	e titer for measles, mumps, and rubella with IgG positive or immune. er for measles, mumps, and rubella. I highlighted this information on ached a copy to back of this form.) A titer is not necessary if is provided; or
days apart). (Must provide documentation o	rubella vaccination (No earlier than 4 days before 1^{st} birthday, ≥ 28 of proof of first and second doses of the MMR vaccination. I ntation being submitted and attached a copy to back of this form.);
documentation if selected box requests such	1.



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	application is true and is made in good faith. I understand the following: falsified statements on this ts are sufficient for disqualification of application and/or dismissal if accepted. I have read and
$\hfill \square$ I met one of the exemptions and ha	ve provided the appropriate documentation with this application.
	ve titer for Hepatitis B and have attached this documentation to the back lts on the documentation provided). A titer is not necessary if atitis B series is provided.
·	ccination and have provided documentation with this application of all Proof of all doses are required to be submitted with Nursing Application; itation provided).
documentation if selected box reques	
	ies is provided. v-B, Engerix-B, Recombivax HB, or Twinrix); positive or immune titer; ption was submitted with Nursing Application packet, no other form of
immunity via a Hepatitis B Tite provided. Highlight the results	patitis B vaccination dates are unavailable, laboratory evidence of er (Attach a copy of blood test results showing immunity in the box s on the document provided). A titer is not necessary if documentation of
copy of immunization record immunization dates on prescr	ation series (Heplisav-B, Engerix-B, Recombivax HB, or Twinrix); Attach a highlighting the dates for the completed series or a statement of iption pad with physician, advanced practice nurse, or physician assistant's
health science student expected to ha	ed by law, any student enrolled in a higher education institution who is a ave patient contact shall present proof of protection against Hepatitis B roses of this paragraph adequate immunization is defined as:
☐ I met one of the approved exemption	ons and have provided appropriate documentation with this application.
documentation of the completed vari	we titer for Varicella with IgG positive or immune. A titer is not necessary if cella doses is provided. (Must provide documentation with the Nursing Ia. I highlighted this information on the documentation being submitted rm.); or
	ccine (No earlier than 4 days before 1^{st} birthday, \geq 28 days apart). (Must ing Application of proof of first and second doses of the varicella



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<u>Tuberculosis (Tb) Screening 2 Step Process – required annually</u>

The 2-Step process is useful in identifying a positive skin test as a result of a remote history of previous Tb exposure. The baseline tuberculin test in applied and read as usual. If this test is negative, the individual has a repeat skin test in 1 to 3 weeks. If this is also negative, then the individual is considered uninfected, and an annual screening tool will be required in subsequent years. However, if the second test is positive, the individual should be considered infected and treated accordingly, but this would not be considered a conversion.

The applicant must provide documentation of the results of the screen. Please remember, the results must be in millimeters; "positive" or "negative" is not acceptable. The applicant will need to complete one of the two the screening options below.

Option #1 – 2-Step Tb Screen	
Screen #1	
Tb Screening – PPD <u>Administration</u> Record	
Date PPD Skin Test Administered	_
Information of Licensed Healthcare Provider Administering	Гb Screen Name:
Signature:	
Address:	
Phone:	-
Tb Screening - Tuberculosis (Tb) Screening Reading	
Date PPD Skin Test was Read	
Results in Millimeters	
Information of Licensed Healthcare Provider Reading Tb Scr	een Name:
Signature:	
Address:	
Phone:	
	-
Screen #2	
Tb Screening – PPD <u>Administration</u> Record	
Date PPD Skin Test Administered	
Information of Licensed Healthcare Provider Administering	Гb Screen Name:
Signature:	
Address:	
Phone:	-
Tb Screening - Tuberculosis (Tb) Screening Reading	
Date PPD Skin Test was Read	
Results in Millimeters	
Information of Licensed Healthcare Provider Reading Tb Scr	aan Nama
_	
Signature:	
Address:	
Phone:	-
Option #2 Chest X-ray	
If you have ever had a positive Tb skin test, do not repeat the Tb skin to	test. A chest x-ray is required. Attach results of Chest X-Ray to this
application.	
I certify that the information contained within this application is true and is n	
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Application Check-Off List

YES □	NO □	Nursing Application – all inclusive, fully completed
YES 🗆	NO 🗆	Official, unopened copies of transcripts from Northeast State. All course grades or "IP" for in progress courses, including withdrawals and/or incompletes, must also be listed on transcripts. All transcripts should arrive within the application packet. All applications must have an official Northeast State paper transcript or disqualification will occur.
YES 🗆	NO 🗆	Copy of required LPN Exit Exam, ATI Comprehensive Predictor (TCAT-Elizabethton) with an 90% or better within the last 3 years (March 2022 – March 2025) <i>OR</i> Admission Assessment (A2) entrance test scores taken between March 5, 2024 – March 5, 2025.
YES 🗆	NO □	Copy of current active LPN License.
YES 🗆	NO □	Documentation proof of first and second doses of the MMR Vaccination <i>OR</i> positive/reactive/immune titer results for measles, mumps, and rubella. If titers are negative, must provide proof of the negative titer, followed by proof of two doses of MMR; or exemption as instructed.
YES 🗆	NO 🗆	Documentation of two doses of Varicella <i>OR</i> positive, immune, reactive titer, <i>OR</i> documentation of history of the disease, <i>OR</i> documentation of date of birth before 1980, <i>OR</i> exemption as instructed.
YES 🗆	NO □	Documentation of complete Hepatitis B series <i>OR</i> positive, immune, reactive titer; <i>OR</i> exemption as instructed.
YES 🗆	NO 🗆	Documentation of Tuberculosis 2-Step screening <i>OR</i> Chest X-ray <i>OR</i> exemption as instructed.
	ler: A titer is not (Varicella only)	required if documentation of the completed vaccination series, history of the disease or Birthdate is provided.
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Student	Applicant Signat	ure:Date:



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Application Submission Instructions

The completed application packet must be **mailed** to the following:

Northeast State Community College

Regional Center for Health Professions - Nursing Program

Attn: Nursing Application 300 West Main Street Kingsport, TN 37660-4280

Please check with the postal service for correct amount of postage needed to mail application packet. Applications must be received, not postmarked, by the Nursing Program deadline date and time. Hand delivered, faxed, emailed, or incomplete applications will <u>not</u> be reviewed. All mailed material, including envelopes, are retained by the Nursing Program. The applicant is responsible in maintaining copies of all submitted materials. The Nursing Program cannot provide copies of any submitted materials.

Applicants have the option, at an additional cost, to send the application packet by certified mail, return receipt requested, Federal Express, or UPS to confirm receipt of their packet. The Nursing Program will not respond to inquiries of receipt other than mail delivered by the services suggested above. The Nursing Program is not responsible for lost or misdirected mail or mail that does not arrive in a timely manner. Please do not call or email the Nursing Program regarding the outcome of application.

LPN to RN Applicants will be notified by mail confirming receipt of the application. This letter should be received no later than April 5, 2025. This confirmation letter will include additional healthcare requirements needed and further information regarding program enrollment <u>if</u> the applicant was to be accepted into the LPN to RN Program.

Applicant official notification of acceptance or non-acceptance into the LPN to RN program will occur after spring 2025 final grades are posted to transcripts and ranking has been completed (early May 2025). Please note, <u>if</u> accepted into the LPN to RN Program summer 2025 classes will begin mid to late May 2025 and a mandatory orientation day will be scheduled before classes begin.

Applicants accepted into the program will receive an acceptance letter with a "Letter of Intent" enclosed. The "Letter of Intent" will be due back to the Nursing Program by a specified date and time. Applicants who do not respond by the specified date noted on the acceptance letter will be declining the offered position in the program, thus forfeiting the offered position to the next qualified applicant.

I certify that the information contained within this application is true and is made in application or failure to provide required documents are sufficient for disqualification understand all information contained on this page.	
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