WAYNE COMMUNITY COLLEGE

PRACTICAL NURSING

Fall Semester 2019
Admission Policies and Procedures

This application packet can be accessed at:
http://www.waynecc.edu/wp-content/uploads/practical-nursing.pdf

This information supersedes all previously published information.

Apply September 1, 2018 – April 18, 2019 for earliest consideration.
Applications received after April 18, 2019 will be considered on a monthly basis.
Applicants may apply for only one limited health occupations program per semester.

PRACTICAL NURSING
FALL 2019 ADMISSION POLICIES AND PROCEDURES

INFORMATION IN THIS PACKET SUPERSEDES ALL PREVIOUSLY
PUBLISHED INFORMATION

Thank you for your interest in the Practical Nursing (PN) program. We will begin accepting applications for the PN program starting **September 1, 2018**. Admission to the Practical Nursing program is a competitive process based on highest point count. Students interested in enrolling in the Practical Nursing program for Fall 2019 must submit a completed application, all transcripts and/or letters verifying non-attendance, and complete an official interview by **April 18, 2019 by 4:00 p.m.** for consideration at the first meeting of the Limited Admissions Committee.

Applicants completing all requirements after the April 18th deadline will be considered by the Admissions Committee at subsequent meetings until the program is filled. *If you have questions or concerns, please call the Office of Student Development/Counseling Services at 919-735-5151, ext 6732 or the Office of Admissions and Records at ext. 6726.*

Please use the following list to ensure you complete the admissions requirements.

The applicant should complete and submit the following information to the Office of Admissions and Records:

1. Submit an application for Practical Nursing and Letter of Understanding to the Office of Admissions and Records. **A faxed application and Letter of Understanding will not be accepted.**

   Note: If you are planning to take the general education requirements for Practical Nursing in a semester prior to Fall 2019, also submit a general application to the college for Associate in General Education-Nursing to the Office of Admissions and Records.

Undocumented Immigrants
- Federal law prohibits states from granting professional licenses to undocumented immigrants.
- Undocumented immigrants shall not be considered a North Carolina resident for tuition purposes. Undocumented immigrants must be charged out-of-state tuition whether or not they reside in North Carolina.
- Students lawfully present in the United States shall have priority over any undocumented immigrant in any class or program of study when there are space limitations.

2. Request that an official high school transcript or equivalent and **ALL** college transcripts be sent to the Office of Admissions and Records. These transcripts must be requested by you from your former schools, colleges and/or universities and must be received by WCC before the application deadline in order to complete your application. **(Note:** An official transcript is one that is sent by one school, college or university to another school. The official transcript has the school's seal and the appropriate signature. **A faxed copy is not considered to be an "official" transcript).** If you are enrolled in the Fall 2018 semester, you will need to send an updated transcript by the April 18th deadline. If you have any Advanced Placement (AP), CLEP or DANTES credit, you must request the scores to be sent directly from the testing company.

It is the applicant's responsibility to make sure that all transcripts are up to date and on file in the Admissions Office by the published deadline. Failure to submit all transcripts to the Admissions Office by the published deadline will result in removal of the application from consideration or the applicant's dismissal from the program.

The National Student Clearinghouse is used to verify students' prior enrollment.

NOTE: Students with foreign transcripts must complete at least eight (8) semester hours of college credit (**not including pre-curriculum courses)** from an institution accredited by an American regional accrediting agency. **No transfer credit will be accepted from institutions not accredited by an American regional accrediting agency.**

3. Take the placement tests (Accuplacer/CPT, ASSET or COMPASS, NC DAP, and Computer Skills) or submit official SAT or ACT scores and meet the required minimum scores necessary for the Practical Nursing program. Test scores must be within five (5) years of the program start date August 2019. Accuplacer/CPT, ASSET, COMPASS, NC DAP, and Computer Skill placement tests and SAT or ACT tests taken before August 2014 must be retaken for a program starting August 2019. Official placement scores can be sent from another school. **Note:** Official placement scores are ones that are sent by one school, college or university to another. The official placement scores are sent in a sealed envelope. Courses or minimum cut-off scores on placement tests or minimum scores on the SAT or ACT are:

Accuplacer/CPT		**ASSET**		**COMPASS**		**NC DAP**	
Reading	80	Reading	41	Reading	81	DRE	151
Writing	86	Writing	41	Writing	70	DMA 010	7
Arithmetic	55	Numerical	41	Pre-Algebra	47	DMA 020	7
Elem. Alg.	55*	Elem. Alg.	41*	Algebra	46*	DMA 030	7
		OR				DMA 040	7*
		Interm. Alg.	41*			DMA 050	7*
						DMA 060	7*

SAT (January 2016 and earlier)		**SAT (March 2016 and later)**		**ACT**	
Critical Reading	500	Reading/Writing	480	Reading	22
Writing	500	Mathematics	530	English	18
Mathematics	500	Mathematics	530*	Math	22
Mathematics	500*			Math	22*

Computer Skills
Computer 78**

Scores with an asterisk can be met with course work. Scores underline without an asterisk underline can not be met with course work, only with placement test scores.

*__OR__ completion of MAT 070 or MAT 080 (or a college level equivalent) with a minimum grade of C __OR__ DMA 040, DMA 050, and DMA 060 with a minimum grade of P __OR__ state-mandated NC DAP placement test scores __OR__ DMA 045 and DMA 060 with a minimum grade of P.
**__OR__ completion of CIS 070 or CTS 080 (or a college level equivalent) with a minimum grade of P.

Please plan ahead as Allied Health applicants are not permitted to take placement tests on the application deadline date.

Please note that Fall applicants will not be interviewed, tested or otherwise processed from November 19 - January 21 or from May 1 – May 31. Please plan accordingly.

For Readmits Only: The five (5) year limit is waived for applicants applying for readmission to the Practical Nursing program.

_____ **4.** Provide evidence of completion of high school or college chemistry within 10 years of the program start date, August 2019, with a minimum grade of <u>C</u>. Chemistry taken before August 2009 must be retaken for a program starting Fall 2019. The Chemistry requirement must be completed before the final interview with Student Development. (See step # 5).

_____ **5.** (OPTIONAL) Submit documentation of completion of education or training (copy of a transcript, copy of a certificate, a license or a listing on registry) as a : EMT (Basic, Intermediate or Paramedic) CNA (I or II), Phlebotomy, Medical Laboratory Technology Degree, Medical Assisting Certificate or higher, Pharmacy Technology Diploma.

_____ **6**. Complete the admission process for Practical Nursing with an **official** interview* with a WCC Student Development/Counseling Services counselor in the Wayne Learning Center Building for referral to the Admissions Committee for the year of application.

*You will know your interview is **official** if your pink copy of the Student Admission Report (SAR) has a check beside "Yes" under "Refer to Allied Health Admissions Department."

Please do not submit unsolicited information such as personal recommendations or references. These materials are not used in the application process.

When the admission process is completed, a letter will be sent to each applicant informing him/her of the decision of the Admissions Committee.

Prior to final acceptance, applicants **must submit the Student Medical Form (with documentation of required immunizations).** Health Forms will be provided by WCC after your conditional acceptance to the nursing program. **The Student Medical Form MUST BE COMPLETED and reviewed prior to the first day of classes.**

CRIMINAL BACKGROUND CHECKS

Affiliating clinical agencies with which the college has contracted to provide clinical experiences for nursing students require students to submit to criminal background check and drug screening prior to participation in clinical experiences at the site. The results of the background checks and drug screen may determine if a student is eligible to enter clinical agencies. Students are responsible for the cost of the background checks and drug screen.

1. Applicants should be aware that a student must be able to enter and/or remain in all clinical agencies to progress within the program. If a clinical site denies a student placement in their facility, the student would be unable to complete the required clinical component of the course. The student will be withdrawn from all NUR courses and will not be allowed to progress in the program.

2. Currently the nursing program uses an online vendor for background checks and drug screening. Information on how to complete the process is included with the letter of acceptance to the program.

3. The background checks and drug screening must be completed by the specified date prior to the start of the semester in which the student enrolls. Failure to complete the process as specified will jeopardize enrollment in the program.

Applicants to the nursing program should be aware that if they have pled guilty to or have been convicted of a felony or misdemeanor (other than a minor traffic violation), the NC Board of Nursing may restrict or deny licensure. The NC Board of Nursing requires criminal history checks for each person applying to practice nursing in the state of North Carolina. Applicants will be charged a fee to offset the cost of the background check.

Cardio Pulmonary Resuscitation (CPR)

Nursing students must obtain current American Heart-BLS provider certification prior to the first day of class. Must stay current while enrolled in nursing classes.

ALLIED HEALTH
STUDENT ADMISSION REPORT

Wayne Community College
P.O. Box 8002 • Goldsboro, NC 27533-8002
919-735-5151 • waynecc.edu

An Equal Opportunity Employer

Student Name: _____
                 Last   First   Middle   Maiden/Former

Datatel ID Number: _____

Allied Health program applying for:

- ○ Associate Degree Nursing
  - ❑ Deadline: March 21, 2019
- ○ Licensed Practical Nursing
  - ❑ Deadline: April 18, 2019
- ○ Advanced Standing LPN to RN
  - ❑ Deadline: November 8, 2018

- ○ Dental Hygiene
  - ❑ Deadline: March 21, 2019
- ○ Dental Assisting
  - ❑ Deadline: April 18, 2019
- ○ Medical Assisting
  - ❑ Deadline: April 18, 2019

- ○ Pharmacy Technology
  - ❑ Deadline: April 18, 2019
- ○ Advanced Standing Medical Assisting
  - ❑ Deadline: November 8, 2018

- ○ Medical Laboratory Technology
  - ❑ Deadline: November 8, 2018

○ Practical Nurses seeking Advanced Standing:
   Schedule an interview with the Nursing Department Head to review additional requirements.

○ Readmission *Pending space availability and meeting departmental criteria. Student will contact respective Department Head.

        Name: _____ Number: 919-739- _____

Refer to Allied Health Admissions Department

   ○ Yes   ○ No

Hold until further action:

○ Missing Transcripts per Clearinghouse / personal disclosure

○ Old / Incomplete / Missing / Low Test Scores

   ○ Reading _____ ○ English _____ ○ Math _____ ○ CIS 070 _____ ○ ACT/SAT _____

○ Missing / not completed chemistry class within ten years of program start date (Nursing only)

○ Missing proper work-related experience documentation (DH / DA / Phlebotomy / Pharm Tech / Med Lab Tech / Med Assisting)

It is the student's responsibility to make sure all requirements are met by program deadline.

Counselor Signature _____ Date _____

Student Signature _____ Date _____

WHITE - ADMISSIONS   PINK/YELLOW - STUDENT

06/20/18KB

SELECTION CRITERIA FOR PRACTICAL NURSING

The following criteria will be used in the competitive admission process to calculate the total point count:

1. **GRADES FROM COMPLETED COLLEGE COURSE WORK:** The following
   courses or equivalents will be considered.

BIO 163	Basic Anatomy and Physiology
ENG 111	Expository Writing
PSY 150	General Psychology

   Points will be allotted as follows:* (Maximum of 18 points)

(A-, A, A+)	**6 points**
(B-, B, B+)	**4 points**
(C, C+)	**2 points**

   * The highest earned grade for each course will be used to calculate total
   points.

2. M**EDICAL EXPERIENCE:** Documentation and completion of: EMT (Basic, Intermediate or Paramedic) CNA (I or II), Phlebotomy, Medical Laboratory Technology Degree, Medical Assisting Certificate or higher, Pharmacy Technology Diploma. **(Maximum of 3 points)**

The following "tiebreakers" will be used should more than one applicant accrue the same number of total points:

#1 tiebreaker: Accuplacer/CPT, ASSET, COMPASS, SAT or ACT Reading Score
#2 tiebreaker: Grade received for completion of BIO 163
#3 tiebreaker: Medical Experience (documentation required)

PRACTICAL NURSING
READMISSION POLICY

The readmission policy for the Practical Nursing program is as follows:

Any student failing within the first semester of an allied health limited admission program must apply as a new student in a subsequent academic year.

Because of the organization of the learning experiences in the Practical Nursing program, the course sequence may be offered only one time per year; therefore students requesting readmission to the Practical Nursing program will not be able to re-enter until the course is offered again. In addition to the Wayne Community College "Readmission Policy" listed on page 12 of the 2018-2019 Wayne Community College General Catalog, the student requesting readmission is subject to the following requirements.

1. The student must complete the admission process and submit an updated Student Medical History.

2. The student must follow a prescribed program of knowledge and skill development based upon identified deficiencies as recommended by the program faculty and Department Head.

3. Admission will be awarded on a space-available basis.

4. Readmissions will be limited to a maximum of one (1) time.

<p style="text-align: center;">**PRACTICAL NURSING**</p>

Official Program Description registered with the N.C. Department of Community Colleges:

Curriculum Description

The Practical Nursing curriculum provides knowledge and skills to integrate safety and quality into nursing care to meet the needs of the holistic individual which impact health, quality of life, and achievement of potential.

Course work includes and builds upon the domains of healthcare, nursing practice, and the holistic individual. Content emphasizes safe, individualized nursing care and participation in the interdisciplinary team while employing evidence-based practice, quality improvement, and informatics.

Graduates are eligible to apply to take the National Council Licensure Examination (NCLEX-PN) which is required for practice as a Licensed Practical Nurse. Employment opportunities include hospitals, rehabilitation/long term care/home health facilities, clinics, and physicians' offices.

Diploma Awarded:

A Diploma in Practical Nursing is awarded by the College upon completion of this program.

Note:

Students must earn a grade of C or better in all curriculum courses in order to progress in the program.

In addition to tuition and textbooks, cost of this program include a watch with a second hand, latex-free blood pressure cuff and stethoscope, bandage scissors, penlight, uniforms, shoes, lab coat, physical examination, immunizations, fees for application for criminal background checks/drug screen and fees for application for licensure for the North Carolina State Board of Nursing and National Council Licensure Examination.

This nursing education program is approved by the North Carolina Board of Nursing and accredited by the National League for Accreditation Commission for Education in Nursing.

North Carolina Board of Nursing
4516 Lake Boone Trail
Raleigh, North Carolina 27607

ACEN
3343 Peachtree Road NE, Suite 850
Atlanta, Georgia 30326

Student Success and Retention

Student retention and success are a priority at Wayne Community College. Obstacles to success may include the academic rigor of the program, extracurricular demands or dissatisfaction with your choice of this career path. Job shadowing should be strongly considered so that you are keenly aware of the professional responsibilities and duties associated with your career choice. Extracurricular demands such as full time work schedules may also need to be reduced in order to allow the necessary study time required to be successful. A good support system is also important if you are involved in other extracurricular demands such as providing care for children or elders.

Credit/Clock Hour Conversion Programs

WCC offers some programs that are considered credit/clock hour conversion programs based on federal regulations set by the U.S. Department of Education. These programs fall under this regulation because all the required credit hours are not acceptable or transferable into a two-year degree or college transfer program. If you are enrolled in one of the credit/clock hour program s and you have been awarded the Federal Pell Grant, your award payment may be less than what is indicated on your award letter. The Practical Nursing program is a credit/clock hour conversion program.

WAYNE COMMUNITY COLLEGE
NURSING PROGRAM TECHNICAL STANDARDS

Nursing is a practice discipline with cognitive, sensory, affective and psychomotor performance requirements. For purposes of nursing program compliance with the 1990 Americans with Disability Act, a qualified individual with a disability is one who with or without reasonable accommodation or modification, meets the essential eligibility requirements for participation in the nursing program.

Admission to and progression in the nursing program is not based on these standards. Rather, the standards should be used to assist each student in determining whether accommodations or modifications are necessary. Standards provide an objective measure upon which a student and the advisor base informed decisions regarding whether a student is "qualified" to meet requirements. It is the responsibility of the applicant to read the technical standards carefully and to ask for clarification of any standard that is not understood.

If a student believes that he or she cannot meet one or more of the standards without accommodations or modifications, the nursing faculty will determine on an individual basis, whether or not the necessary accommodations or modifications can be made reasonable.

TECHNICAL STANDARDS

Nursing students should possess and be able to demonstrate the following:

1. **Critical Thinking:** critical thinking ability sufficient for clinical judgment. For example, student must be able to identify cause-effect relationships in actual or simulated clinical situations; analyze data; develop or participate in the development of nursing care plans.

2. **Interpersonal Skills:** interpersonal abilities sufficient to interact with individuals, families and groups from a variety of social, emotional, cultural and intellectual backgrounds. For example, student shall establish rapport with patients/clients, families and colleagues.

3. **Communication Skills:** communication abilities sufficient for interaction with others in verbal and written form. For example, collect assessment data, explain treatment procedures, initiate health teaching, document and interpret nursing actions and patient/client and family responses.

4. **Physical Abilities:** physical abilities sufficient to move from room to room and maneuver in small spaces. For example, move around in patient/client's rooms, work spaces and treatment areas; administer cardio-pulmonary procedures.

5. **Gross and Fine Motor Abilities:** gross and fine motor abilities sufficient to provide safe and effective nursing care. For example, move, calibrate and use equipment and supplies; lift, transfer and position mobile and immobile patients/clients.

6. **Auditory Ability:** auditory ability sufficient to assess and monitor health needs. For example, hear monitor alarms, emergency signals, auscultatory sounds and cries for help.

7. **Visual Ability:** visual ability sufficient for physical assessment, performance of nursing procedures and maintenance of environmental safety. For example, observe patient/client responses such as skin color, facial expression and specimen color.

8. **Tactile Ability:** tactile ability sufficient for physical assessment and performance of nursing procedures. For example, perform palpation, functions of physical examination and/or those related to therapeutic intervention, e.g. insertion of catheters.

9. **Emotional Stability and Mental Alertness:** emotional stability and mental alertness sufficient in performing nursing care. For example, maintain a calm and efficient manner in high stress situations with patients/clients, families and colleagues.

EXAMPLES ARE NOT ALL INCLUSIVE

WAYNE COMMUNITY COLLEGE
COMMUNICABLE DISEASE POLICY OF STUDENTS

Wayne Community College is committed to assuring that all necessary training and precautions are taken with regard to communicable diseases. The Biohazard Exposure Control Plan and the Pandemic Preparedness Plan of Wayne Community College reflect our efforts to ensure the good health and safety of all employees and students. The College adopts this communicable disease policy for students in an effort to control communicable diseases and the threat of pandemics on campus based upon established rules and regulations of the N.C. Division of Health Services. Employees and employees of contractors or contracted services infected with a communicable disease have the responsibility of reporting this fact to the Director of Human Resources. Students infected with a communicable disease have the responsibility of reporting this fact to the Associate Vice President of Academic and Student Services or the Vice President of Continuing Education, as appropriate.

Communicable disease is an illness resulting from an infectious agent or its toxic products being transmitted directly or indirectly to a person from an infected person or animal through the agency of an intermediate animal, host, or vector, or through the inanimate environment. [N.C.G.S. 130A-2(1c)] Communicable Disease shall include, but is not limited to: Chickenpox, influenza, Infectious Mononucleosis, Conjunctivitis, Hepatitis A, B & D, Acquired Immune Deficiency Syndrome (AIDS), Aids-related complex (ARC), positive HIV antibody status, Influenza, Measles, Meningitis, Tuberculosis, Whooping Cough, and sexually transmitted diseases.(N.C.G.S. 130A)

Persons who are infected with a communicable disease are expected to seek expert medical advice and are encouraged to advise local health authorities. Local health authorities should offer counseling to these persons about measures that can be taken to prevent the spread of infection and to protect their own health.

Persons who know, or have a reasonable basis for believing, that they are infected with a communicable disease have an ethical and legal obligation to behave in accordance with such knowledge to protect themselves and others. Medical information relating to the communicable disease of a student or employee will be disclosed to responsible college officials only on a strictly limited need-to-know basis. No person, group, agency, insurer, employer, or institution should be provided any medical information without the prior specific written consent of a student unless required by state and/or federal law. Furthermore, all medical information relating to the communicable diseases of students and employees will be kept confidential, according to state and federal law, including the Family Education Rights and Privacy Act.

If a student reports a communicable disease condition, the student may be excluded from the institution until an appropriate evaluation of the student's medical condition can be made. The evaluation may be made by a physician or a health department official and testing may be required if appropriate. Students in any Allied Health program may have additional requirements, as specified in each program's student handbook; therefore, these students should report all suspected communicable diseases.

The final determination of student's ability to remain in school will be made by the Vice President or Associate Vice President based upon professional medical evaluation results and recommendations. If a student is found to have a communicable disease, then the attendance of the student on campus or at any College activity will be prohibited until a satisfactory letter or certificate is obtained from one or more licensed physicians or public health officials stating that the student is not a health risk to employees and other students at the College.

The College's Biohazard Control Plan defines guidelines that will be followed in the event of an accidental exposure to bodily fluids or biohazards. Any such exposure should be reported immediately to the responsible faculty or staff person associated with the WCC activity involving such exposure and to the Student Activities Coordinator and an incident report must be completed.

Reference: WCC General Catalog and Student Handbook 2018-2019, page 179-180
(https://www.waynecc.edu/wp-content/uploads/2018-18-catalog.pdf)

PRACTICAL NURSING PROGRAM

		CLASS HOURS	LAB HOURS	CLINICAL HOURS	SEMESTER CREDITS
FIRST SEMESTER					
ACA 111	College Student Success	1	0	0	1
BIO 163	Basic Anatomy & Physiology	4	2	0	5
NUR 101	Practical Nursing I	7	6	6	<u>11</u>
					17
SECOND SEMESTER					
NUR 102	Practical Nursing II	7	0	9	10
PSY 150	General Psychology	3	0	0	<u>3</u>
					13
THIRD TERM					
ENG 111	Expository Writing	3	0	0	3
NUR 103	Practical Nursing III	6	0	9	<u>9</u>
					12
	TOTALS	**31**	**8**	**24**	**42**
		(Contact Hours)			(Credit Hours)

WCC Practical Nursing Program Estimated Expenses

FALL SEMESTER	SPRING SEMESTER	SUMMER TERM
In-state Tuition/Fees Full-Time = 16 Hours $ 76.00/Sem. Hour $ 30.00 Activity Fee $ 16.00 Tech. Fee $1,262.00 * Out-of-state Tuition/Fees $ 268.00/Sem. Hour $ 30.00 Activity Fee $ 16.00 Technology Fee $4,334.00 * Books ** $ 500.00 Health/Medical Exam/Immunizations $ 270.00 *** Criminal Background Drug Screen $ 44.00 (minimum) Uniforms $ 150.00 Other Requirements Penlight $10.00 Shoes $ 60.00 Watch $ 25.00 Scissors $ 10.00 Stethoscope* $ 30.00 BP Cuff* $ 30.00 *latex-free	In-state Tuition/Fees Full-Time = 16 Hours $ 76.00/Sem. Hour $ 30.00 Activity Fee $ 16.00 Tech. Fee $1,262.00 * Out-of-state Tuition/Fees $ 268.00/Sem. Hour $ 30.00 Activity Fee $ 16.00 Technology Fee $4,334.00 * Books** $ 200.00	In-state Tuition/Fees Full-Time = 16 Hours $ 76.00/Sem. Hour $ 16.00 Tech. Fee $ 96.08 ATI Fee $ 1,328.08 * Out-of-state Tuition/Fees $ 268.00/Sem. Hour $ 16.00 Technology Fee $ 96.08 ATI Fee $4,380.86 * Graduation Expenses Cap/Gown $ 39.00 Uniform $ 50.00 Nursing School Pin $ 32.00-130.00 **** Application for NCLEX and Licensure $ 350.00
Total (in-state) $ 2,391.00 Total (out-of-state) $ 5,463.00	Total (in-state) $ 1,462.00 Total (out-of-state) $ 4,534.00	Total (in-state) $ 1,897.08 Total (out-of-state) $ 4,969.08

PLEASE NOTE:
*   Tuition/Fees are subject to change.
**   Cost of books is constantly changing. Costs vary according to number of courses taken each semester. Cost of books is based on a full course load.
*** Costs vary, depending on health care provider and insurance coverage.
**** Prices change annually. Pin can be purchased in gold, gold filled or silver.

06/15

PRACTICAL NURSING
LETTER OF UNDERSTANDING

NAME_____   Student ID# or DOB:_____

I affirm that all information submitted during the general and/or allied health application process(es) is true and complete to the best of my knowledge. I affirm that I have read and understand the Practical Nursing admission policies and procedures as stated by Wayne Community College in the Practical Nursing Fall Semester 2019 Admission Policies and Procedures package available online at: http://www.waynecc.edu/admissions/wp-content/uploads/practical-nursing.pdf.

I understand that it is my responsibility as an applicant to submit all the necessary admission requirements prior to the deadline and that failure to comply with all application requirements will result in removal from consideration or dismissal from the program. (Please refer to the application package for more detailed information).

I have read and I understand the Wayne Community College Practical Nursing Program Technical Standards section within this packet.

I have disclosed **all** schools attended and have requested official transcripts from **each** be sent to Wayne Community College. I understand that omissions of **any** school attended is grounds for removal from consideration or dismissal from the program.

I understand that no exceptions to the policies and procedures will be granted.

INITIAL APPLICATION DEADLINE – **PRACTICAL NURSING**
April 18, 2019 by 4:00 p.m.

Applicants completing all requirements after the deadline will be considered by the Admissions Committee at their next regularly scheduled monthly meeting until the program is filled.

After reading the above statement, please sign, date and return with your application.

Signature_____   Date_____

Note: Your application will not be processed without this signed statement.

Please be sure to inform the Office of Admissions and Records if your address or telephone number changes.

AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER

APPLICATION FOR ADMISSION/READMISSION

P.O. BOX 8002
GOLDSBORO, NC 27533-8002
919-735-5151 • www.waynecc.edu
An Equal Opportunity Institution

Do Not Write In This Space
RCN _____
RCVD _____

NOTICE TO APPLICANT: The information that you provide below will be placed in our master file. If any of this data changes, you must notify the Office of Admissions and Records immediately. Information on race and sex is requested for data gathering purposes only. Disclosure of social security number is voluntary and is used to verify the identity of an individual. Answer all questions completely and accurately. Use your legal name. Incomplete forms may delay your acceptance. Please print or type.

Last Name Jr./Sr./III	First	Middle	Former

Address	City	State	Zip

County of legal residence	State of legal residence	Country of legal residence	WCC College ID Number *(If Applicable)*

Home Telephone ( )	Work Telephone ( )	Cell Telephone ( )	Social Security Number

Birthdate	Birthplace	E-mail Address	Sex ❍ Male ❍ Female

Ethnicity and Race - Hispanic or Latino ❍ Yes   ❍ No
If no, choose one or more:
❍ White
❍ Black or African American
❍ Asian
❍ Native Hawaiian or other Pacific Islander
❍ American Indian or Alaska Native

Year and term entering 20 _____
❍ Fall
❍ Spring
❍ Summer
I plan to attend
❍ Full-Time
❍ Part-Time

Enrolling as
❍ Freshman
❍ Transfer
❍ Returning WCC Student
Last term registered at WCC _____

Name last enrolled under _____

Long-term goal at WCC? *(Select one)*
❍ To obtain an Associate Degree, Diploma or Certificate
❍ To enhance job skills in present field of work
❍ To enhance employment skills for a new field of work
❍ To take courses to transfer to another college
❍ To take courses for personal enrichment or interest

Employment status while attending WCC *(Select one)*
❍ Retired
❍ Unemployed - not seeking employment
❍ Unemployed - seeking employment
❍ Employed 1-10 hours per week
❍ Employed 11-20 hours per week
❍ Employed 21-39 hours per week
❍ Employed 40 or more hours per week

Highest educational level completed *(Select one)*
❍ 8   ❍ 9   ❍ 10   ❍ 11   ❍ 12
❍ High School Equivalency
❍ 13 Adult High School Diploma
❍ 14 Post High School Vocational
❍ 15 Associate Degree
❍ 16 Bachelor's Degree
❍ 17 Master's Degree or Higher

U.S. Citizen ❍ Yes ❍ No

If no, a) give country of citizenship _____ b) immigration status _____

Indicate if any of the following apply to you

❍ Retired Military   ❍ Active Duty Military   ❍ Dependent of Active Duty Military   ❍ Department of Defense Employee

High school last attended _____ City _____ County _____ State _____

Graduation date or last date of attendance: Month _____ **Day** _____ **Year** _____ ❍ **Yes, I graduated** ❍ **No, I did not graduate**

❍ I received an Adult High school Diploma ❍ I received the High School Equivalency ❍ I am currently enrolled in high school	School	City	State	Date received or anticipated

INITIAL HERE _____

IF YOU ARE APPLYING TO A CURRICULUM PROGRAM, PLEASE COMPLETE THE ITEMS BELOW.
All transcripts (high school or equivalent and college) must be on file in the admissions office before an applicant is officially accepted to the Program. Financial Aid and VA benefits will not be approved until all official transcripts are on file.

College attended	City	County	State	Date last attended

Curriculum to which you are applying (See back page) _____
6-Digit Curriculum Code _____

INITIAL HERE _____

WAYNE COMMUNITY COLLEGE
INFORMATION RELATING TO NORTH CAROLINA RESIDENCE FOR TUITION PURPOSES

North Carolina law (G.S. 116-143.1) requires that *"To qualify as a resident for tuition purposes, a person must have established legal residence (domicile) in North Carolina and maintained that legal residence for at least 12 months immediately prior to his or her classification as a resident for tuition purposes."* The information requested on this form must be supplied by every applicant for admission to WCC. This information is to be used only in connection with determination of your residence status for tuition purposes.

The law requires that every student admitted to the college be classified for the term admitted as either a resident or non-resident for tuition purposes, prior to enrollment. To be classified a resident for tuition purposes, you must furnish such evidence as the college may require to enable it to make such classification. Failure to provide all information requested will result in classification as a non-resident for tuition purposes.

Full Name _____ Social Security Number _____
　　　　　　　Last　　　　　　　　　*First*　　　　　　　　*Former*

ANSWER ALL QUESTIONS. PRINT OR TYPE YOUR RESPONSES. (IF NOT APPLICABLE, WRITE N/A.)

1. DO YOU HAVE A VALID ACTIVE DUTY MILITARY ID CARD OR ACTIVE DUTY MILITARY DEPENDENT ID CARD? ❍ YES ❍ NO

2. DO YOU CLAIM TO HAVE BEEN A LEGAL RESIDENT OF THE STATE OF NORTH CAROLINA FOR A PERIOD OF AT LEAST TWELVE MONTHS IMMEDIATELY PRIOR TO THE DATE OF COMPLETION OF THIS APPLICATION? ❍ YES ❍ NO

   NOTE: If you answer "No" to questions 1 and 2, do not complete the remaining questions. Sign and date the form in the space provided. Otherwise, complete questions 3 through 14. Sign and date the form in the space provided below.

3. Current mailing address _____
　　　　　　　　　　　　　　(Street, Route, P.O. Box)　　　　　　　　*City*　　　　　*State*　　　*Zip Code*

4. Spouse's name _____ Date of marriage _____

5. Father living? ❍ YES ❍ NO; His Name _____

6. Mother living? ❍ YES ❍ NO; Her Name _____

7. If your parents are divorced, in whose custody are/were you? _____

8. Name of court-appointed guardian (if applicable) _____

9. If you have a court-appointed guardian, where (place) _____ and when _____ (date) was the appointment made?

10. Have you, your spouse, or either of your parents been in active military service within the past two years? ❍ YES ❍ NO

11. Check each of the following you have ever done outside North Carolina: Attended post-secondary school _____ ; worked _____

12.

PERMANENT HOME ADDRESS	FROM (DATE)
Yours	
Spouse	
Father	
Mother	
Guardian	

13.

LAST ADDRESS OUTSIDE NORTH CAROLINA	FROM (DATE)	UNTIL (DATE)
If you have never lived outside North Carolina, please write N/A.		
Yours		
Spouse		
Father		
Mother		
Guardian		

14.

EMPLOYER (Current or Most Recent)	LOCATION	HOURS PER WEEK	SINCE (DATE)
Yours			
Spouse			
Father			
Mother			
Guardian			

IF ADDITIONAL INFORMATION IS NEEDED, THE APPLICANT WILL BE NOTIFIED.

I hereby certify that all information I have set forth herein is true to the best of my knowledge, pursuant to my reasonable inquiry where needed. I hereby acknowledge that the institution may divulge the contents of this application only as permitted under the Family Educational Rights and Privacy Act of 1974 if I am, or have been, in attendance at this institution. I understand that work I complete and submit as a student may be used to assess college general education outcomes. Falsification of admissions documents resulting in incorrect information which could be used in consideration of admission to the college, admission to curriculum programs, or financial aid will result in removal of application from consideration or dismissal from the college/program.

_____　_____　_____
Signature of Applicant　　　**Signature of parent or guardian also, if applicant is under 18 years of age**　　　**Date**

RV 08/17JM