Application Checklist for
Vocational Nursing Program

Your application is <u>NOT COMPLETE</u> and will NOT be considered in the admission process until ALL forms and any required documentation is included

Use the checklist below to verify that all information is included. Sign and date this form. Submit this and include the indicated information to the Vocational Nursing Program Director or department Assistant. These items may be mailed or delivered to the specific departments listed. All information, current and accurate, is required by the application deadline of **JUNE 15th** for fall admission and **OCTOBER 15th** for spring admission. **A $20 application fee is required.** Please attach a copy of the payment receipt to this application.

- ☐ **MCC Student ID#:** _____

- ☐ **Application for Admission to McLennan Community College.** LVN Applicants must be admitted to MCC before they can be considered for the program.

- ☐ **Application for the Vocational Nursing program.** Completed 2-page application must be sent to the Vocational Nursing Administrative Assistant or Program Director.

- ☐ **Transcripts (Documentation) – Transcripts** from any/all colleges where you have earned credit. This information must be supplied to **both** the Vocational Nursing Program Director and the MCC Admissions Department. **The Admissions Department MUST have Official Transcripts. Unofficial transcripts can be submitted with the VN application.** *Note:* It is the applicant's responsibility to submit updated transcripts to the Office of Student Admissions as additional courses are completed.

- ☐ **Transcripts (Documentation)-All Academic Courses must be completed** with grade of C or higher before entering the program. **BIOL 2404 *, SPCH (**Choose One: 1311,1315,1318,1321), **PSYC 2301**-General Psychology, **HPRS 1206**- Medical Terminology.

  NOTE: * BIOL 2404 Course Substitution: BIOL 2401 & 2402 (**ALL** science courses must be **LESS** than 5 years old)

- ☐ **Transcripts (Documentation) - Proof of completion** of any **one of the <u>Texas college placement tests</u> to include test scores in Reading, Writing, and Mathematics or placement test Exemption Status. Must be TSI complete** If not taken yet, indicate date when test will be complete. **If required** (based on TSI or approved alternative test results); Math 0311 (Intermediate Algebra) or the 0137/0138/0139 sequence, or Math 1332 or Math 1342 and Reading INRW 401 & INRW 402 must also be completed. This information must be supplied to **both** the Vocational Nursing Program Director and the Admissions Department.

- ☐ **HESI A2 Test Scores (Documentation) – HESI A2 Test Score.** <u>Only MCC HESI A2 scores</u> will be accepted. Students must submit printed HESI A2 scores from their Elsevier/Evolve account. (Screenshots or photos of scores will not be accepted). ****Must score a minimum of 75%** in each of the five categories (Reading, Grammar, Vocabulary, A&P, and Math). Submit your most recent HESI A2 scores with this application, even if you are applying to another nursing program.

- ☐ **HESI A2 Test Scores (Documentation) – HESI A2 Test Score, Critical Thinking scores.**

- ☐ **Application Fee Receipt.** A $20 application fee is required. <u>Pay at the Business Office</u> and **attach a copy of the receipt to the Vocational Nursing Program application.**

- ☐ **Proof of Residency (Documentation) -** Please **include a copy of utility bill or Driver's License that includes your name and current address.**

- ☐ **Documentation – Immunization and CPR Requirements.** If accepted into the LVN program, you must provide proof of immunization against Hepatitis B, varicella (chicken pox), measles, mumps, rubella, diphtheria/tetanus, and influenza vaccine (Covid vaccine may be required). You must also provide proof of negative TB blood test, proof of current AHA BLS CPR certification **(online CPR certification will not be accepted)** and proof of Health Insurance coverage. **Students will upload all immunizations into the immunization tracker, Complio, AFTER being accepted into the LVN program. Please DO NOT turn in any immunizations with the application.**

After you have completed and checked all applicable items above, you are now ready to turn in your application. **Anything checked on the checklist must be included with the application, with the exception of immunizations. It is the student's responsibility to make copies of all documentation.**

_____   _____
Signature   *Date*

1400 College Drive • Waco, TX 76708

Application for
Vocational Nursing Program

Application deadline is <u>JUNE 15th for the fall</u> semester and <u>OCTOBER 15st for the spring</u> semester. This application is effective for *ONLY* ONE review. A new application is required for each admission. PRINT CLEARLY

- Name: _____ _____ _____ _____
  Last Name *First Name* *Middle Name* *Other names used on records*

- Social Security Number: _____ - _____ - _____   Date of Birth: _____

- Current address (include proof of address):

  _____
  House number, Street, Route or P.O. Box number, Apartment number

  _____
  City, State, Zip code, County

- **E-mail address**: _____ **MCC Student E-mail**: _____

- Telephone number: Home (_____) _____ Work (_____) _____

- High School grad: _____ High School location: _____ GED completed: _____

- Admission requested for: **Fall** class _____ OR **Spring** class _____ (select one only)
  Year *Year*

- Are you applying to **other** Health Science Programs? _____Yes _____No **If yes**, please check all that apply.

  _____ADN _____RADT _____RESP _____SRGT _____PTA _____MLT _____HIT _____END/PSG _____EMS/Paramedicine

- Were you previously enrolled in this Vocational Nursing Program? _____ Yes _____ No

- Have you applied to this Vocational Nursing Program before? _____ Yes _____ No When: _____

- Where and when did you take the HESI A2 Test? _____

Attach a copy of your HESI A2 scores to this application. Only MCC HESI A2 scores will be accepted.

- MCC Student ID#: _____

- List all colleges and/or vocational-technical schools you have attended, including MCC. **Include unofficial transcripts.**

  Colleges and Dates attended:

  _____
  _____

Are you currently, or have you ever been, expelled or placed on disciplinary suspension from any college or university? (This does NOT include academic or financial aid suspension.) _____Yes _____No

<u>**The steps outlined on the Application Checklist**</u> (admission to the college, testing, transcripts, etc.) <u>**must be completed by the application deadline before the application can be considered for admission to the Vocational Nursing Program.**</u> For program information, contact Elizabeth Painter at (254) 299-8347 or epainter@mclennan.edu.

I certify that the information furnished in this application is complete and correct.

_____ _____
Signature *Date*

RETURN THIS FORM TO:

Vocational Nursing / 1400 College Drive Waco, TX 76708   **www.mclennan.edu/departments/hsp**