EAST CENTRAL
COMMUNITY COLLEGE

P. O. Box 129
Decatur, Mississippi 39327

DIVISION OF HEALTHCARE EDUCATION

Tel. No. 601-635-6293 **Fax No. 601-635-5472**

Email address: ccooley@eccc.edu

Thank you for your interest in a Healthcare Education program at ECCC. You have taken an important step toward a career opportunity in a healthcare field.

The information in this application packet allows the prospective student to apply to the **Associate Degree Nursing Program.**

The following documents are included in this application packet:

1. Admission requirements and steps.
2. Acceptance Criteria
3. Applicant checklist (complete before turning in)
4. Application
5. Entrance exam form.
6. Program policies acknowledgement agreement.

If you have questions about any of the healthcare programs at ECCC, please call the Office of Healthcare Education at 601-635-6293 or one of the faculty located on the website at https://www.eccc.edu/sites/default/files/adn_faculty_contact_information_1.pdf

***** Please contact the financial aid office to apply for financial aid during the application process. Delay in financial aid request can delay receipt of benefits.

FAFSA Application Open

FAFSA (Free Application for Federal Student Aid) opened October 1. Apply online at studentaid.gov for the 2023-24 school year. Find more information online at www.eccc.edu/its-fafsa-time.

** Scholarship application packets will be located at www.eccc.edu in under the "Scholarship" tab. If you have further questions about scholarships, please contact the ECCC Student Services office.

The College reserves the right to change any requirements and policies announced herein when deemed necessary. Proper notification will be provided, if applicable.

EAST CENTRAL COMMUNITY COLLEGE
ADMISSION OF ASSOCIATE DEGREE NURSING STUDENTS

The Associate Degree Nursing (ADN) Program is designed to provide educational opportunities for qualified students entering a career as a registered nursing. The curriculum includes a balance of general education, nursing theory, laboratory, and clinical experiences. Graduates of the program receive an Associate of Applied Science Degree (AAS). Candidates that meet the requirements of the Mississippi State Board of Nursing are eligible to write the National Council Licensure Examination for Registered Nurses (NCLEX-RN®). The MS State Board of Nursing may deny any application for licensure due to, but not limited to, conviction of a felony, commission of fraud, or deceit in the application process, or addiction to alcohol or other drugs. The Associate Degree Nursing Program is accredited by the Board of Trustees of State Institutions of Higher Learning (IHL) of Mississippi and the Accreditation Commission for Education in Nursing (ACEN).

Admission Requirements and Steps:

1. The applicant **must apply** for regular admission **and be accepted by the College** before applying to the program.
2. The applicant must apply to the Associate Degree Nursing and submit to Office of Healthcare Education.
3. Applicants must submit **ALL** official college transcripts to the (1) Office of Admissions **AND** to (2) the Office of Healthcare. **BOTH offices must have official transcripts on file before January 31st Deadline**.
4. The applicant must have a high school diploma, high school equivalency certificate, or equivalent.
5. The applicant **MUST** have a minimum ACT composite score of **18**.
6. The applicant must have a cumulative Grade Point Average (GPA) of 2.00 or better.
7. All applicants are required to complete Anatomy & Physiology I with lab and Anatomy & Physiology II with lab, or upper level equivalent; Microbiology with lab or upper level equivalent; and earn a grade of "C" or better in each course **prior** to taking the first nursing course. An applicant may be accepted into the ADN program prior to completing these courses, but all courses must be successfully completed during the summer prior to beginning nursing classes in the fall.
8. All applicants will be required, at the student's expense, to take an entrance examination test as specified by the Office of Healthcare Education. The cost of this exam is **$62.00**.
9. Applicants **selected for admission into the ADN program** must submit proof of all items listed below before **June 30, 2023 at 11 am**.
    a. Physical examination by a physician or nurse practitioner obtained before June 30th of the year of admission. This form will be emailed with acceptance notification.
    b. Proof of immunizations against measles, mumps, rubella (MMR) 2 series, or positive rubella titer and Varicella (2 Series) or positive titer.
    c. Hepatitis B (3 Series) vaccine or positive titer, or signed declination statement.
    d. Valid proof of age to be eighteen (18) years or older (Accepted forms of validation include current driver's license, birth certificate, state-issued identification, or tribal identification)

    All applicants that are accepted into the program will be required to pay a **Pre-Qualification Fee of $110.00**. A due date for this will be determined at a later time.

***All submissions are due in the Office of Healthcare Education on or before **June 30th** of the year of admission. Any student accepted into the ADN program must agree to be randomly tested for drugs and/or alcohol at any point and time while enrolled in the ADN program. The student is responsible for all expenses associated with testing. (Initial drug testing fees are included in the student's course fees assessed by the college). The number of students admitted into the program will vary according to resources available. Qualified applicants will be given priority based on academic records. Students admitted to any nursing courses must adhere to the policies in the current Catalog and the Nursing Student Handbook.

Acceptance Criteria

To be considered for acceptance into the ADN Program, the applicant's file in the Office of Admissions & Records and the Office of Healthcare Education must be complete by **January 31st** deadline. The student is responsible for ensuring data in the file is correct and submitted to the Healthcare Division office by the application deadline. The nursing admissions committee will review qualified applicants for the ADN program using criteria outlined below and ranked by overall score. All candidates selected or not selected for admission into the traditional Associate Degree Nursing program will be notified via email in March 2022. (Specific date to be determined.) Please check your email address on the application for accuracy. Selection for admission into the program is not a guarantee of admission. Applicants must refer to the ECCC College Catalog for post-acceptance requirements.

All Healthcare Education Division students must submit fingerprints, which will be transmitted to the Mississippi Department of Health and run through the Mississippi Criminal Information and Federal Bureau of Investigation databases**. Nursing student candidates must satisfactorily meet requirements for a criminal history background check.** Admission to the program may be rescinded and reversed based on review of the students' criminal history record check. The criminal background check will be conducted prior to admission into the nursing program.

All healthcare education students are required to submit to a criminal background check according to Mississippi law prior to any clinical experience. If the person has ever been convicted of a felony, or pleaded guilty to, or pleaded no contest to a felony of possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, sex offence listed in Section 45-33-23 (f), child abuse, grand larceny, burglary, gratification of lust or aggravated assault, felonious abuse and/or battery of a vulnerable adult they may not be eligible to attend clinical experience, thus forfeiting their slot in the program. The list is not all inclusive and is subject to criterion set forth by the Mississippi Attorney General's office, laws of the state of Mississippi, and misdemeanors by clinical agencies' judgment for participation in patient or resident care.

Students who refuse to submit to a criminal history background check or fail to submit a satisfactory criminal background check review will be refused entry into the program. If a student has a disqualifying event that he/she believes to be in error, it is the responsibility of the student to clear the record prior to admission into a healthcare program. Students who are dismissed from a Healthcare Education Division program may seek admission into another educational program.

If a student is enrolled in a healthcare education program and is charged with a misdemeanor or felony, the student is responsible for notifying the Dean of Healthcare immediately. Failure to notify the Dean will qualify as grounds for dismissal.

The number of students admitted into the traditional Associate Degree Nursing program will vary according to resources available such as room, faculty, clinical space, which is not all inclusive. Qualified applicants are ranked by the admissions committee using the *Points Category* ranking scale and academic records. Candidates who do not meet admission criteria or complete admission requirements are not considered for admission. Students admitted to any nursing courses must adhere to the policies in the current Catalog and the Nursing Student Handbook.

Qualified applicants for the Associate Degree Nursing program will be considered on a competitive basis. Meeting the admission criteria does not guarantee admission into the program. Applicants for the program are evaluated using ACT score, academic course work, pre-admission examination results, and criminal history background.

Points Categories

1. Students who have received a grade of "D" or "F" in more than 6 hours in the ADN curriculum will receive a 10-point deduction. Also, a -5 point deduction for previous program.

2. Lives within the college district or previously enrolled at ECCC.

Residence or Enrollment	Points
Lives within district or previously enrolled.	1
Lives outside district or never enrolled.	0

2. College GPA on ADN Curriculum Courses or High School GPA with no college courses taken:

GPA	Points
3.5 - 4.0	4
3.0 - 3.49	3
2.5 - 2.99	2
2.0 - 2.49	1

3. ACT composite score:

ACT Composite Score	Points
Above 27	6
24-26	5
21-23	4
18-20	3

ACT scores below 18 will NOT be considered for admission into the ADN program.

4. Each required science course (A&P I, A&P II, Microbiology) completed with an A=3 points, B=2 points, and C=1 point.

Sciences completed.	Points: A=3	B=2	C=1
A & P I with lab			
A & P II with lab			
Microbiology with lab			
Total			

5. Preadmission examination results:

Pre-entrance exam cumulative score	Points
85% or Above	5
80% - 84%	4
75% - 79%	3
70% - 74%	2
65% - 69%	1
64% and below	0

6. HESI A2 Admission Exam SUBCATEGORIES

Math		Grammar	
Score Percentage	**Points**	**Score Percentage**	**Points**
90% to 100%	3	90% to 100%	3
80% to 89%	2	80% to 89%	2
75% to 79%	1	75% to 79%	1
74% or below	0	74% or below	0

Critical Thinking		Reading Comp.	
Score	**Points**	**Score Percentage**	**Points**
900-1000	3	90% to 100%	3
800-899	2	80% to 89%	2
700-799	1	75% to 79%	1
699 or below	0	74% or below	0

EAST CENTRAL COMMUNITY COLLEGE
HEALTHCARE EDUCATION
ASSOCIATE DEGREE NURSING PROGRAM

Instructions/Checklist for Application

In order to be considered for admission into the Associate Degree Nursing Program, all requirements must be completed and submitted by **January 31 at 4:00 pm**. Only completed applications will be reviewed. **It is the applicant's responsibility to ensure that all documents are on file. Incomplete applications will not be considered.**

__1 Applicants who have not attended East Central Community College are to complete the **APPLICATION for ADMISSION** to the college.

__2. Applicants who have had a semester break in attendance at East Central Community College are to complete the **READMISSION APPLICATION** to the college.

__3. **ALL** applicants must complete the **ASSOCIATE DEGREE NURSING ADMISSION APPLICATION**. **Hand Deliver** or **Mail** all ADN application documents to:

Office of Healthcare Education
East Central Community College
P.O. Box 129
Decatur, MS 39327

__4. Apply for **Financial Aid** (if applicable)**.**

__5. **ALL** applicants **MUST** submit **official transcripts** from **EVERY** college attended except East Central Community College to: **BOTH OFFICES (A and B) NEED YOUR TRANSCRIPTS**

(A) the Office of Healthcare Education (address listed in #3) or escript to **ccooley@eccc.edu**.
(B) the College Admissions office.

__6. Validated results of ACT scores must be submitted to Office of Admissions & Records at East Central Community College before **January 31st**. The minimum ACT score accepted for the ADN Program is a **composite score of 18**. A composite score less than 18 will not be considered.

__7. Proof of current acceptance to East Central Community College must be on file with the Office of Admissions and Records that states you have been accepted to the college.

__8. **ALL** applicants must take an entrance exam. (See attached instructions). **Receipt of $62 must be included with your application before an exam date can be confirmed.**

__9. Deadline for the completed application is **January 31 at 4:00 pm** for Fall admission.

__10. **ALL** applicants will be notified via email of acceptance or non-acceptance to the ADN program in March 2022. (Specific date to be determined) Please make sure the email address on the application is LEGIBLE and active. **All communication and notifications from the Office of Healthcare Education will be by EMAIL.**

__11. Applicants must refer to the college catalog for additional post-acceptance requirements.

__12. ALL vaccines/shot records are due by **June 30 at 11:00 am**. You need to check you Immunization record for *MMR (2 series), Varicella (2 series), Hep B (3 series) and Tdap (every 10 years)*. **If these are not complete, you need to start the process, some Vaccines require 30 days in between and can't be given with other Vaccines**.

Please return to:
Office of Healthcare Education
East Central Community College
P.O. Box 129
Decatur, MS 39327

EAST CENTRAL COMMUNITY COLLEGE

Date received

_____
ECCC Student ID Number

HEALTHCARE PROGRAM ADMISSION APPLICATION

Please mark which Program you are applying for:

_____ Associate Degree Nursing (ADN) _____ Practical Nursing (PN) _____ Both ADN and PN

***IF you are applying to both ADN and PN, please rank program of choice as #1 and #2.**

_____ ADN _____PN

APPLICANT INFORMATION

Name _____ _____ _____/_____/_____
Last First Middle/Maidan SS# DOB

Address _____ _____ _____ _____ _____
Street/ Apartment Number or PO BOX City State Zip County

Telephone (_____) _____ (_____)_____ _____
Cell Home E-mail **(PLEASE PRINT CLEARLY)**

ACADEMIC INFORMATION

High School Attended _____ Graduation Date _____

City _____ State _____ GED or High School Equivalency Exam ____ YES ____NO

GED Graduation or Exam Completion Date and State where it was taken: _____ _____
Date State

ACT: Date Taken _____ Score:_____ Validated results on file in Office of Admissions and Records? _____

List **all** colleges/universities currently or previously attended, **including ECCC**:

Name and Location of Institution	Dates of Attendance	Degree Awarded (if applicable)

*An official transcript from each institution attended (excluding ECCC), and/or GED results must be submitted to ECCC Admissions, P.O. Box 129, Decatur, MS 39327 **AND** to the Office of Healthcare Education, P.O. Box 129 Decatur, MS 39327 before action can be taken on your application.

FELONY/MISDEMEANOR DECLARATION

Have you ever been convicted of or have charges pending against you for a felony or misdemeanor in any state/jurisdiction? ____Yes ____No If yes, please attach explanation.

*If you have been convicted, pleaded guilty or pleaded no contest to certain felony crimes, you may be unable to obtain licensure/certification or attend clinical or obtain employment in a licensed health care facility in Mississippi. For more information, refer to the college website or contact the Dean of Healthcare at deverett@eccc.edu

PREVIOUS HEALTHCARE PROGRAM ENROLLMENT

Have you ever been enrolled in a school of nursing or other health related program?_____Yes _____ No

If yes, please answer the following for each program:

Type of Program	School	City	State	Dates Attended	Did you graduate? Yes or No

*If you did not complete a nursing program, you will need a letter from that **program director** stating your last semester completed and/or eligibility for readmission emailed to deverett@eccc.edu or mailed to the Office of Healthcare Education.

If you successfully completed the program, please provide the following information:

Date of Licensure/Certification/Registration _____

Licensure/Certification/Registry Number _____

Are charges pending against you concerning licensure or practice in any state jurisdiction?

___Yes ____ No **If yes, please attach explanation**

NURSING ENTRANCE EXAM: HESI A2 with Critical Thinking

As part of your admission process into the Associate Degree Nursing program, you will be required to take the HESI Admission Assessment Exam for Associate Degree Nursing. HESI Admission Assessment Exams from other nursing programs are non-transferrable to ECCC. Please allow a maximum of 4 hours for this exam.

Payment is due in the Business Office before you can submit your application. **Attach receipt to your Application Packet and submit to the Office of Healthcare Education**. You will receive an email with a Date Confirmation once your completed application is processed.

Have you ever taken the HESI A2 with Critical Thinking at East Central Community College?
___ YES ___ NO If yes, when (month and year)? _____

Free HESI A2 practice questions are available at http://www.hesia2test.com/
Chemistry and Biology sections are not tested.

EAST CENTRAL COMMUNITY COLLEGE
HEALTHCARE PROGRAM POLICIES ACKNOWLEGE

I certify that the information I have provided on this application is accurate and that I have not intentionally withheld information requested. I understand that any falsification of information may subject me to dismissal from any program.

_____ _____

Signature Date

I understand that it is my responsibility to use the checklist to make sure my application is complete when I turn it in to the Office of Healthcare. It is not the responsibility of Mrs. Cooley or any Faculty to tell me what I am missing. If I am missing any of the required documents from the check list, my application will be considered INCOMPLETE if they are not received before January 31st deadline.

_____ _____

Signature Date

I have read and understand the policies outlined in the ECCC Associate Degree Nursing program required for admission. If I am approved for admission into the program, I concur that I meet the standards required within the policies.

_____ _____

Signature Date