

P. O. Box 129 Decatur, Mississippi 39327

DIVISION OF HEALTHCARE EDUCATION

Tel. No. 601-635-6293

Email address: ccooley@eccc.edu

Fax No. 601-635-5472

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 **Practical 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 bottom of the website at <u>https://www.eccc.edu/practical-nursing-pn</u>.

* 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 <u>studentaid.gov</u> for the 2023-24 school year. Find more information online at <u>www.eccc.edu/its-fafsa-time</u>.

** Scholarship application packets will be located at <u>www.eccc.edu</u> 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 does not discriminate on the basis of race, color, religion, national origin, sex, age, or qualified disability in its educational programs and activities, employment practices, or admissions processes. The following offices have been designated to handle inquiries regarding the non-discrimination policies of East Central Community College: Inquiries regarding compliance with Title VI and ADEA are coordinated by the Executive Vice President, Walter Arno Vincent Administration Building, Room 171, Post Office Box 129, Decatur, MS 39327, Phone: 601-635-6202, Fax: 601-635-6401, Email: compliance@eccc.edu.

Inquiries regarding compliance with Title IX and Section 504 are coordinated by the Dean of Student Services, Campus Police Building, Post Office Box 129, Decatur, MS 39327, Phone: 601-635-6267, Fax: 601-635-4067, Email: compliance@eccc.edu. Inquiries regarding compliance with ADA are coordinated by the Director of Student Success, Mamie Ethel Burton Memorial Library, Post Office Box 129, Decatur, MS 39327, Phone: 601-635-6268, Fax: 601-635-2150, Email: compliance@eccc.edu.

EAST CENTRAL COMMUNITY COLLEGE ADMISSION OF PRACTICAL NURSING STUDENTS

The Practical Nursing (PN) Program prepares individuals to assist in providing general nursing care requiring basic knowledge of the biological, physical, behavioral, psychological, and sociological sciences and of nursing procedures which do not require the substantial skills, judgment, and knowledge required of a registered nurse. This care is performed under the direction of a registered nurse, licensed physician, licensed dentist, or advanced practice nurse. Students that complete program requirements, as identified by the Mississippi Department of Education, will be eligible to apply to take the National Council Licensure Examination for Practical Nurses (NCLEX-PN®). The State Board of Nursing may refuse any individual the right to take the NCLEX-PN® based on previous criminal records. The Practical Nursing program is accredited by the Mississippi Board of Nursing.

Admission Requirements and Steps:

- 1. The applicant **<u>must apply</u>** for regular admission **<u>and be accepted by the College</u>** before applying to the program.
- 2. The applicant must apply to the Practical Nursing Program and submit to Office of Healthcare Education.
- 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 **16**.
- 6. All applicants are required to complete Anatomy & Physiology I with lab and Anatomy & Physiology II 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 <u>may</u> be accepted into the PN program prior to completing these courses, but all courses must be successfully completed during the summer prior to beginning nursing classes in the fall.
- All applicants will be required, at the student's expense, to take an entrance examination test as scheduled by the Office of Healthcare Education. The cost of this exam is \$62.00. <u>Student must achieve a minimum cumulative</u> <u>score of 51% for admission</u>.
- 8. After applicants are <u>selected for admission into the PN program</u>, proof of all items listed below must be submitted before <u>June 30, 2023 at 11:00 am</u>.
 - 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)
- 9. All applicants that are accepted into the program will be required to pay a **<u>Pre-Qualification Fee of \$110.00.</u>** 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 <u>June 30th</u> of the year of admission. Any student accepted into the PN program must agree to be randomly tested for drugs and/or alcohol at any point and time while enrolled in the PN 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.

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Acceptance Criteria

To be considered for acceptance into the PN Program, the applicant's file in the Office of Admissions & Records and the Office of Healthcare Education must be complete by **January 31^{st}** deadline. The student is responsible for ensuring data in the files are correct. The nursing admissions committee will review qualified applicants for the PN program using criteria outlined below and ranked by overall scores. All candidates selected or not selected for admission into the Practical Nursing program will be notified via email in March 2023 (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 Practical 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 Practical 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.

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Points Categories

1. Within the five county ECCC district or previously enrolled at ECCC= 1 point

2. ACT

ACT composite	Points
score	
25 & above	4
22-24	3
19-21	2
16-18	1

ACT scores below 16 will not be considered for admission into the PN program.

3. GPA: College or High School

GPA	Points
4.0	3
3.0-3.9	2
2.0-2.9	1
Below 1.9	0

4. Pre-entrance Exam Score

Pre-entrance Exam	Points
Cumulative Score	
81% and above	4
71% - 80%	3
61% - 70%	2
51% - 60%	1
50% and below	0

5. A & P I with Lab

Grade	Points
А	3
В	2
С	1

6. A & P II with Lab

Grade	Points
А	3
В	2
С	1

7. 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	71% to 79%	1
699 or below	0	70% or below	0

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EAST CENTRAL COMMUNITY COLLEGE HEALTHCARE EDUCATION PRACTICAL NURSING PROGRAM

Instructions/Checklist for Application

In order to be considered for admission into the Practical 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 or currently enrolled at 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. <u>ALL</u> applicants must complete the **PRACTICAL NURSING ADMISSION APPLICATION**. <u>Hand Deliver</u> or <u>Mail</u> all PN 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: <u>BOTH OFFICES (A and B) NEED YOUR TRANSCRIPTS</u>
 - (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 the Office of Admissions & Records at East Central Community College before <u>January 31st</u>. The minimum ACT score accepted for the PN Program is a <u>composite score of 16</u>. A cumulative score less than 16 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). <u>Receipt of \$62</u> 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 PN program in March 2023 (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 <u>EMAIL</u>.

__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 your 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.

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Please return to: Office of Healthcare Education East Central Community College P.O. Box 129	EAS	ST CEN	Date received			
Decatur, MS 39327		CARE PROGR DN APPLICAT				
Please mark which Program you a	re applying for:					
Associate Degree Nursing (A	.DN)	Practical Nurs	sing (PN) _	Both	ADN and PN	
*IF you are applying		PN, please ra r ADNP	1 0	pice as <u>#1</u> and	d <u>#2</u> .	
	APPLICAN	T INFORMA	TION			
NameLast First			SS#	/	/ 00B	
Address Street/ Apartment Number	or PO BOX	City	State	Zip	County	
Telephone ()Cell	Telephone () ()					
	ACADEMI	C INFORMA	TION			
High School Attended			Graduation	n Date		
City State _	GE	ED or High Sch	nool Equivalency H	Exam	YESNO	
GED Graduation or Exam Completion	n Date and State w	here it was tak	en:			
ACT: Date Taken Score	: Validated	results on file	Date in Office of Admi	ssions and Re	State ecords?	
List all colleges/universities currently	y or previously atter	nded, includin	g ECCC:			
Name and Location of Instit	ution	Dates of Att	endance Degree	e 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.

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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 <u>deverett@eccc.edu</u>

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 <u>deverett@eccc.edu</u> 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 Practical Nursing program, you will be required to take the HESI Admission Assessment Exam for Practical 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 <u>http://www.hesia2test.com/</u> **Chemistry and Biology sections are not tested**.

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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

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

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

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Date

Date

Date