

SUNY Orange Health Professions Application

SPRING 2013 SPRING NURSING PROGRAM APPLICATION

This form must be filled out by students wishing to be considered for entry in the Nursing Program for Spring 2013 and **must be returned to the Admissions Office by October 1, 2012**.

| 1. INDICATE STATUS: Current* | □ New □ Trans (Freshman) | sfer Readmit | ☐ Seeking 2 nd SUNY | Y Orange Degree |
|---|---------------------------------|---------------------------------|--------------------------------|--------------------------|
| | NOTE: If you indicate any one | of the above four categories, | you must also complete a gen | eral college application |
| Your student ID# (if known) A | Name | on educational records (if di | fferent) | |
| □Mr 2. NAME: □Ms | | | | |
| First | Middle | | Last | |
| 3. MAILING ADDRESS: Number and St | rreet | City | State | Zip Code |
| 4. LEGAL COUNTY OF RESIDENCE: | | 5. <u>E-MAIL</u> : | | |
| 6. DATE OF BIRTH: Month D | ayYear | 7. TELEPHONE: | Area Code and Nun | shor |
| 8. Have you ever been enrolled in | a Health Professions prog | gram at an Associate's | degree level or higher | either at SUNY |
| Orange or another college? | No Yes (answer que | estions 9 and 10) | | |
| 9. PROGRAM: | | 10. <u>Did you successfully</u> | complete the program? | ☐ Yes ☐ No** |
| ** If you did not complete | the program, you mus | st explain the circu | mstances on a separ | ate sheet** |
| 11. COLLEGE EDUCATION: List all collaborations process. ALL TRANSCRIP | | | | iewed as part of the |
| Name of Institution | City/State | Dates A | tended Number | of Credits Earned |
| | | | | |
| | | | | |
| 12. NURSING PRE-ADMISSION SEMINA | <u>\R</u> : | | | - |
| ☐ I have attended a Nursing pre-adm Include date attended (mm/yy) | ission seminar within 3 years o | of the program application | deadline (Spring 2010 seme | ester or later). |
| ☐ I will be attending a Nursing pre-ad | dmission seminar on (mm/yy)_ | | | |
| 13. <u>CERTIFICATION</u> : I hereby certify that I have read and accept the admission | | | nd complete. My signature | also acknowledges |
| Signature | | | Date | |

*CURRENT STUDENTS: If the address you are entering on this form is different than the address entered on your most recent SUNY Orange application, YOU MUST submit a change of address with the Bursar Office.

NURSING ADMISSION REQUIREMENTS

| Academic | Req | uirem | ents: |
|-----------------|-----|-------|-------|
|-----------------|-----|-------|-------|

| $\supset \Lambda$ | lew, Transfer, Readmit and Seeking 2 nd SUNY Orange Degree Studen | ts ONLY: Must have a curr | ent college application on file |
|-------------------|--|---------------------------|---------------------------------|
| □ F | High School Diploma or GED | | |
| □ E | Eligible to take Freshman English 1 (ENG 101) | | |
| □ E | Eligible to take Intermediate Algebra (MAT 102) or have successfully co | mpleted Elementary Algeb | ora (MAT 101), or equivalent, |
| V | vith a "C" or higher | | |
| □ C | Completed one or more of the following: | | |
| | Intro to Biology (BIO 110) | all must be | |
| | General Biology I (BIO 101) <u>and</u> General Biology II (BIO 102) | with a grade of | |
| | Anatomy & Physiology I (BIO 111) | "C" or higher | |
| | Anatomy & Physiology II (BIO 112) | | |

- Passing grade on the Biology CLEP examination
- High School AP Biology (score of 3 or higher) submit the official AP transcript from College Board

□ Completed High School Regents (New York State) or College Prep Chemistry with a grade of 75 or higher or a college Chemistry course (with a lab), all with a grade of "C" or higher and all within 10 years of the application deadline

☐ Students must attain a minimum cumulative GPA of 2.75

Department Specific Requirements:

| Ш | Applicants for the Nursing program will be required to take the Test of Essential Academic Skills (TEAS) prior to the |
|---|--|
| | deadline. You must achieve a minimum ATI Academic Preparedness Level of BASIC for admission consideration. Students who |
| | place higher will receive stronger consideration. Visit www.sunyorange.edu/testing/teas.shtml for test scheduling and payment |
| | information. Review frequently asked questions at http://www.sunyorange.edu/admissions/programs/docs/TEASFAQ2012.pdf |
| | Attendance at a Numerica and admission comings within 2 years of the application deadline. At this comings students will receive |

- □ Attendance at a Nursing pre-admission seminar within 3 years of the application deadline. At this seminar, students will receive and sign off on information pertaining to health forms, drug testing, and criminal record policies.
- ☐ The Nursing Department will review transcripts of those students who have been enrolled in a Health Professions program at SUNY Orange or another college.

Selection Process:

Students will be considered for admission into this program based on the completion of all academic and department specific requirements, highest combination of cumulative GPA, TEAS score, and credits completed towards the program (see below), and seats available.

All Nursing Academic and Department Specific Requirements must be completed by $\underline{October\ 1^{st}}$ in order for a student to be considered for acceptance into the program for the fall semester.

Though not admissions requirements, completing the courses below will enhance your admission eligibility (31 credits total):

Please note that if you have not taken the course(s) within the timeframe listed below, you must retake the course(s).

| | | COURSES | CREDITS | NOTES |
|-----|-----|--|---------|---|
| ENG | 101 | Freshman English I | 3 | |
| ENG | 102 | Freshman English II | 3 | |
| PSY | 101 | General Psychology I* | 3 | Must have been completed within 10 yrs of program entry |
| | | Social Science Elective (see online catalog) | 3 | Any social science other than psychology |
| BIO | 111 | Anatomy and Physiology I | 4 | Must have been completed within 5 yrs of program entry |
| BIO | 112 | Anatomy and Physiology II | 4 | Must have been completed within 5 yrs of program entry |
| MLT | 106 | Microbiology for the Health Prof. | 3 | Must have been completed within 5 yrs of program entry |
| | | Elective | 3 | |
| | | Elective | 3 | |
| PES | 100 | Concepts of Physical Wellness | 1 | |
| PES | | Physical Ed. (Activity Course) | .5 | |
| PES | | Physical Ed. (Activity Course) | .5 | |

^{**}Pre-Admission seminar dates are available online at www.sunyorange.edu/admissions/healthforms.shtml