FORM 1   CONDITIONS OF APPLICATION CHECKLIST

Complete all portions of Forms 1 & 2 as directed. Use name and email as indicated in myLane (verify myLane is correct)

L# _____   FIRST _____   LAST _____

E-mail address: _____   **Cell Phone** _____   **Home Phone** _____

Physical Address: _____   **City:** _____   **State:** _____   **Zip:** _____   **County:** _____

I have completed the following and submitted prior to the application deadline. (Read and check each box)

_____ A.   Submitted official, sealed transcripts from all colleges **other than LCC** (if needed) to Lane Enrollment Services.
I understand transcripts must be recorded as received by application close date OR all courses were taken at LCC.

_____ B.   Completed the LCC Credit Admission process https://www.lanecc.edu/apply for Fall term 2024 (application term) and have an L number.

_____ C.   I understand I must complete the RN Nursing Online Program Admission Application & Payment process including paying the **$60 non-refundable** application fee *and* will submit these fillable forms 1 & 2 and any supporting documents to HPApplicationCenter@lanecc.edu PRIOR to the deadline.

Conditions of Application: (Read and check each box)

_____ A.   I have read ALL information in the Fall 2024 RN Nursing Program Application Information Packet.

_____ B.   I have contacted an LCC Nursing advisor in person, via Zoom or email at HPadvising@lanecc.edu with specific questions pertaining to my application or I have attended an RN Preparing to Apply Workshop.

_____ C.   I understand that I must have a social security number to obtain an RN License from Oregon State Board of Nursing.

_____ D.   I understand that **I MUST attach copies of documents requested in Form 2** along with all of the data being filled in to receive additional points on my application. All files must be named with last name, first initial and document name, (i.e., JonesA DD214 or JonesA CNA License.)

_____ E.   I understand that my application will not be returned and that it is my responsibility to keep a personal copy.

_____ F.   I understand that I am NOT considered an applicant to the program unless all required admission steps, Forms 1 and 2, payment and requested documentation have been received prior to the application deadline.

_____ G.   I understand that points added to my application from the interview will not be available to me, as required by OCNE regulations.

_____ H.   I understand that should I be accepted into the program, conditions of enrollment require **completion** of all Fall Entry Course Requirements; **mandatory** attendance to the orientation session where I will find out more about the following requirements: immunizations, CPR certification, background check; drug/alcohol screening; medical insurance.

_____ I.   I affirm all application information and documentation submitted online and by email is accurate and authentic and understand that errors I have made on the forms will not be corrected by the Health Professions Application Department.

Be sure to use Google Chrome and latest version of Adobe Reader to complete and submit these fillable pdf forms. Forms 1 and 2 that are submitted scanned, via Google docs, handwritten or delivered in person **will not be accepted. Apple/Mac users** – do not use "Preview" to view or complete this Form. Save it first. **Set Adobe Reader as the default PDF reader** http://get.adobe.com/reader/

Submit Forms 1 & 2 and any and all supporting documentation attached to ONE email by the application deadline: Volunteer forms must be emailed by the supervisor or organization to HPApplicationCenter@lanecc.edu. **Submit fillable forms & supporting documents to:** HPApplicationCenter@lanecc.edu **E-mail Subject:** Last, First Name, LNumber, RN24 Application **Save this PDF and change the file name to:** LastNameFirstInitialLNumberRN24 (no spaces) **(i.e., SmithJL88888888RN24)**	**REMINDERS: Confirm all LCC courses are transcribed and/or transcripts were submitted to Enrollment Services that reflect any courses or degree(s) listed on Point Petition Sheet.** **Complete the Online Nursing Program Admissions Application and Payment.**

Form 2 Point Petition Sheet

Each course must meet the minimum credit requirement, as shown in column 1

RN Nursing Fall 2024

ALL FIELDS ARE REQUIRED, use N/A in the text fields or 0 in number fields if it does not apply to you.

Required Courses (Minimum 3.0 GPA on pre-requisites used for application & fall entry)	College Name, Course #, Course Name as it appears on transcripts OR N/A on each line below is required.	Term/Year (required)	Quarter Credits Taken	C or C+	B	A	GPA Credits	GPA Points
Required Prerequisite Courses by application and/or fall entry (30 quarter credits minimum required to apply)				C- or lower NOT accepted				
SAMPLE LINE:	Lane Community College (or LCC) BI 231 Human A&P 1	F 18	4	8	16	16	4	16
BI 231 (4 Credits) *Required to Apply				8	16	16	4	
BI 232 (4 Credits)				8	16	16	4	
BI 233 (4 Credits) Fall 2017 or later				8	16	16	4	
BI 234 (4 Credits) Fall 2017 or later				8	16	16	4	
MTH 095 or higher (4/5 Credits) *Required to Apply				8	12	16	4	
OR MTH option (no points given)								
WR 121 (3/4 Credits)(BA/BS may use Approved Electives in this section for max 4 credits)				6	9	12	3	
WR 122 (3/4 Credits)(BA/BS may use Approved Electives in this section for max 4 credits)				6	9	12	3	
FN 225 (3/4 Credits)				6	9	12	3	
PSY 215 (3/4 credits)				6	9	12	3	
Approved Elective (maximum of 45 credits allowed)				x2	x3	x4		
Approved Elective (maximum of 45 credits allowed)				x2	x3	x4		
Approved Elective (maximum of 45 credits allowed)				x2	x3	x4		
Total Credits & Points:								
Minimum of 30 quarter credits and maximum of 45 quarter credits may be used in Section 1							GPA:	

Pre-requisite GPA Calculation - 25 points possible, 3.0 minimum GPA to apply.		C- or lower NOT accepted	
Prerequisite GPA from Section 1	Divide the total # of GPA points by the total # of GPA credits and round to the hundredth.	**GPA:**	

Prerequisite GPA Points	4.00 - 3.67 = 25 points 3.19 - 3.15 = 17 points	**GPA Points:**	
	3.66 - 3.33 = 23 points 3.14 - 3.00 = 15 points		
	3.32 - 3.20 = 20 points		

Additional Application Points

Anatomy & Physiology & Microbiology	BI 231, BI 232, BI 233, & BI 234 Completed (16 credits)	5 pts	**A&P & Micro Points:**	
(233 & 234 within 7 years to receive points)	BI 231, BI 232 & 233 Completed (12 credits)	3 pts		

Prerequisite Credits	45 Credits	5 pts	**Pre-Req Points:**	
	36-44 Credits	3 pts		

Prior College Degree	Must be Associates Degree or Higher. Transcript must be on file, indicate degree awarded and be from an accredited institution.	1 pt	**Degree Point:**	
	Name of Institution, Type of Degree, Term/Sem & Year Completed (required)			

Medical Terminology Course	HO 100/HP 100 or equivalency (C- or better accepted)	2 pts	**Med Term Point:**	
(Pass grades only accepted for Med Term if transcripted by Fall 2018)	**College Name, Course #, Course Name, Term/Year (required)**			

Technical Writing Course	WR 227 or equivalency (C- or better accepted)	3 pts	**Technical Writing Points:**	
	College Name, Course #, Course Name, Term/Year (required)			

Statistics Course	MTH 243/STAT 243z or equivalency (C- or better accepted)	2 pts	**Statistics Point:**	
	College Name, Course #, Course Name, Term/Year (required)			

Lane County Resident	Resident of Lane County at least 90 days prior to application	3 pts	**Lane County Points:**	
Must be current at time of application	https://www.lanecc.edu/administration/enrollment-services/residency			

Military Service	Veteran - Active or Honorable Discharge	3 pts	**Military Points:**	
	Must provide scanned copy of DD-214 as documentation to receive points		**Form Attached:**	

Persistence (Interviewed for F2023, not selected.)	Were selected for an interview for Fall 2023, but not selected to join the Fall 2023 class.	1 pt	**Persistence Point:**	

Additional Application Points (cont.)

Preparing to Apply Workshop	I registered for and attended a Preparing to Apply Workshop	1 pt	**Preparing to Apply Pt:**
Must be present for entire workshop	*(CRN Must be entered in the box to the right.)*		**CRN Registered for:**

Lane Community College Credits	36+ LCC credits completed in Section 1	5 pts	**LCC Credit Points:**
Prerequisite credits completed at LCC	24-35 LCC credits completed in Section 1	4 pts	
(Use only courses listed in Section 1)	12-23 LCC credits completed in Section 1	3 pts	
	3-11 LCC credits completed in Section 1	2 pts	

Foreign Language Competency	Proof of "Advanced" proficiency	4 pts	**Language Fluency Points:**
(See application info pkt for details) C- or better accepted.	2 terms/1 semester of **same** language, college level, transcripted	2 pts	
	2 years of the same language, high school transcript required	1 pt	

Language (required)

You MUST attach a copy of your HS Transcript or Language Competency Test and submit it along with your Forms Packet in order to receive these points. Outside College Transcripts must be received by the deadline.

College Name, Course #, Course Name, Term/Year (required) or attach HS transcript.

Work Experience in a Health Care Setting (See application info pkt for details)	Applicants may earn 3 points for 500+ healthcare work experience hours completed in the last 10 years.	3 pts	**HC Wk Exp Points:**
	Completed and signed 2024 Healthcare Experience Form showing 500+ hours is required to be submitted by the organization to HPApplicationCenter@lanecc.edu directly to receive points.		**Form Sent:**

Allied Health License/Certification	<u>Current</u>, <u>unencumbered</u> license or certification for:	4 pts	**License/Cert. Points:**
	See Approved Healthcare Credentials for full list of accepted certifications/licenses		**Form Attached:**

Certification type:

You MUST attach a copy of your license and submit it along with your Forms Packet in order to receive these points.

State, License # & Date Issued:

NOTES to HP Application Center: (below)	Be sure to complete the Online Application and Payment Process to complete your final step to apply to the RN Nursing Program **TOTAL APPLICATION POINTS:**