



NURSING PROGRAM APPLICATION PACKET For FALL 2008 ADMISSION

To Prospective Nursing Students:

Thank you for your interest in the Associate Degree Nursing (ADN) Program at Doña Ana Community College. This program is approved by the State of New Mexico Board of Nursing and is accredited by the National League for Nursing Accrediting Commission. The purpose of this program is to prepare a program graduate for a career as a Registered Nurse (RN) by providing entry-level nursing education. Graduates of the ADN program are eligible to take the NCLEX-RN licensure exam for Registered Nurses. **Graduation does not guarantee licensure.** After licensure as an RN, ADN graduates may pursue a Bachelor of Science in Nursing (BSN) at a four-year institution, if desired.

The nursing program has limited enrollment and accepts no more than twenty-four (24) students each semester for program entry. Prerequisite coursework must be completed prior to or during the semester in which the application to the program is submitted.

The following attached documents are to assist you in the application process:

1. Application for the Associate Degree Nursing Program.
2. Information regarding the Admission Process.
3. Checklist of Application Packet.
4. Test of Essential Academic Skills (TEAS) information.
5. TEAS receipt.
6. Caregivers Criminal History Screening for the New Mexico Department of Health.

The student is responsible for all deadlines required by the Nursing Program for admission. Notification of any changes in name, mailing address or telephone number is the responsibility of the student.

Students who plan to transfer to DACC when accepted to the nursing program may apply. However, even if accepted to the nursing program, students must be admitted to DACC prior to the start of nursing coursework. **Admission to NMSU or DACC does not guarantee admission to the DACC Associate Degree Nursing (ADN) program.**

Prospective students are required to complete and pass a New Mexico Department of Health security background check in order to take clinical courses. Past criminal violations may prevent a student from completing the degree and gaining a nursing license or employment in the field. Therefore, if the security background check reveals criminal activity, the prospective student shall not be admitted to this program. A copy of your clearance must be received by May 1, 2008.

An applicant who is not a U.S. citizen or who has been convicted of a felony should contact the appropriate State Board of Nursing regarding eligibility for licensure.

Applications are not retained. If you applied for admission at any prior time, were not selected and wish to be considered for admission, a new application must be submitted.

Applications for admission to the Fall 2008 class will be accepted on February 18, 2008. Hand delivered applications must be received by the Nursing Program Secretary no later than 4:30pm on Friday, April 18, 2008. Mailed applications must be post marked by April 18, 2008.

Directions for Completed Packet Submission:

- Place all required items for admission in a 10 x 12 plain manila envelope.
- On outside of sealed packet, print clearly your name plus "Nursing Program Admission Packet Fall 2008."
- Obtain a receipt from the Nursing Program Secretary for receipt of your application packet.
- Applications will be accepted until 4:30pm on April 18, 2008.
- If mailing application, address packet to "Nursing Program Admissions Committee, DACC Division of Health & Public Service, 3400 S. Espina, Las Cruces, NM, 88003-8001."

**Doña Ana Community College
Associate Degree Nursing Program**

SPRING 2008 PROGRAM ADMISSION INFORMATION

SELECTION CRITERIA FOR NURSING PROGRAM ADMISSION

Candidates with the *highest* number of total points will be chosen for admission to the ADN program.

- **CNA competency requirement may be met as follows:**
 Certified Nursing Assistant (CNA) certificate (current or issued within past 5 years)
OR
 Receive B or higher in OENA 104/OENA 105 in past three years
OR
 Certificate/degree in another allied health field **AND**
 Demonstrated competency in each area on CNA Competency Test established by ADN Program Faculty **AND**
 Have 6 months or more recent experience providing direct patient care
- **Electives:**
Applicant to designate 4 electives in application for consideration in the selection process.
 - **NOTE: Transfer credits from another institution which you plan to use to meet prerequisite and elective course requirements** must be validated by the NMSU Registrar prior to program application. If an “NMSU Evaluation of Transfer Credit” form is not available, documentation must be provided showing transfer credits with original grades.
- **Points for Grade Point Average (G.P.A.):**
Minimum G.P.A. for selection to the nursing program is 2.759.
The GPA will be calculated on coursework applicable to the nursing program admission process.
 3.5 – 4.0 = 4 points
 3.0 – 3.499 = 3 points
- **Points for Coursework:**
CNA Competency Requirements:
 OENA 104/OENA 105 with B or better = A – 2 points, B – 1 point
 Certified Nursing Assistant Certification = 2 points
Pre-requisite coursework:
 A = 5, B = 4, C = 2
Elective coursework fulfilling pre-requisites for the NMSU BSN program:
 A = 4, B = 3, C = 1
Other Science and Math coursework appropriate to nursing:
 A = 4, B = 3, C = 1
Designated Electives: OEHO 120, OEHO 202
 A = 4, B = 3, C = 2
Other electives which meet nursing program guidelines for program application:
 A = 2, B = 1, C = 0
- **Points for Residency:**
 Validated Dona Ana County Resident = 3 points
 (Validation by Voters Card **OR** Utility Receipt **OR** Rent Receipt)
 (must include your name or letter of explanation)
- **Points for TEAS Test Score**
 TEAS may be taken a maximum of three times with a minimum of thirty (30) days or more between each test.
 Cost of the test is the responsibility of the student.

Overall Score	Pts	Science	Pts	English	Pts	Math	Pts
90 - 100	3	90 - 100	3	90 - 100	3	90 - 100	3
80 – 89.99	2	80 – 89.99	2	80 – 89.99	2	80 – 89.99	2
70 – 79.99	1	70 – 79.99	1	70 – 79.99	1	70 – 79.99	1
60 – 69.99	0	60 – 69.99	0	60 – 69.99	0	60 – 69.99	0
59.99 & below	0	59.99 & below	0	59.99 & below	0	59.99 & below	0



Associate Degree Nursing Program

CHECK LIST FOR NURSING PROGRAM APPLICATION

(include this checklist with your application)

Each nursing program application for admission is reviewed based on the information provided in the program application. The Nursing Program faculty put together this checklist to assist each applicant to submit a complete application packet. **Incomplete applications will not be reviewed by the Admission Committee.**

- Completed Fall 2008 application form for the Nursing Program.**
 - Read and complete each section.
 - Identify the electives you want used as part of the application. Please note that if no electives are designated, no points will be given for electives in the admission process.
 - Sign application.
 - If applying for advanced placement, please submit a cover letter requesting 2nd, 3rd or 4th level placement.
 - Enclosed is an Authorization for Release of Information Form, three fingerprint cards and an instruction sheet. Please carefully follow the instruction sheet in filling out your fingerprint cards and form. Also, enclosed is a Background Check Fee Form/Receipt. Fingerprint Fee is \$65.00. Please take receipt to the cashier's office, pay the \$65 and return receipt with completed fingerprint forms. You may have your fingerprints taken at the Las Cruces Police Department.
 - Submit a copy of your clearance from the New Mexico Department of Health Caregivers Criminal History Screening.

- Unofficial transcript** from each college/university where you took course work that you want considered providing evidence of completion of required pre-requisite coursework.

IMPORTANT:

 - **This requirement includes a transcript for any coursework at DACC and/or NMSU.**
 - **You will not be considered for admission if your prerequisite courses are not validated.**
 - **Transfer credits from another institution** must be validated by the NMSU registrar prior to program application. Documentation from NMSU must be provided showing transfer credits with original grades.

- Official score sheet for Test of Essential Academic Skills (TEAS)**

- Evidence of Certified Nursing Assistant (CNA) Competency:**
 - Copy of CNA certificate (current or issued within past 5 years).
 - OR**
 - Grade of B or higher in OENA 104/OENA 105 on transcript.
 - OR**
 - Copy of certificate/degree in another allied health field AND
 - Certificate of CNA Competency Testing by ADN Program Faculty AND
 - Letter from employer on company letterhead verifying six (6) months or more recent experience providing direct patient care.

- If applicable, **proof to validate residency in Dona Ana County**

Provide a copy for one of the following (must include your name or letter of explanation):
Voter Registration Card **OR** Utility Bill **OR** Rent Receipt

- ADDITIONAL REQUIREMENTS:**
 - If you have attended nursing classes within the last seven (7) years**, a personal reference letter or other appropriate validation from the institution is required and shall be submitted with this application packet.

IMPORTANT: Failure to provide attendance information for other nursing programs shall be considered fraud.

 - For all military nursing programs**, a letter of verification regarding the program will meet the requirement.

After completing the above checklist, do the following:

- Place all application packet materials together inside a 10 x 12 plain manila envelope. Include this checklist.
- On outside, clearly print your name and the following statement:
Nursing Program Admission Packet Fall 2008



Associate Degree Nursing Program

NURSING PROGRAM APPLICATION Fall 2008

Directions: Print legibly. Use black ink. Complete all sections.
Completed Applications Due No Later than 4:30pm on April 18, 2008

NAME _____ **SSN#** _____

CURRENT MAILING ADDRESS

_____ Street _____ Apt. / Box

_____ City _____ State _____ Zip code

Telephone _____

RESIDENCY: State of Legal Residence: _____

If a resident of New Mexico, County of Legal Residence: _____

CITIZENSHIP: U.S. Citizen Foreign _____

Permanent Resident Visa Number _____

HIGH SCHOOL LAST ATTENDED

_____ (Name of School) _____ (City and State) _____ Graduation: month/yr

If not a high school graduate, give date of G.E.D. Test _____

List other name(s) used in previous enrollment(s) at this or other institution(s) of higher education:

1. _____

2. _____

LIST ALL COLLEGES OR UNIVERSITIES YOU HAVE ATTENDED OR ARE NOW ATTENDING.

If more than three, attach a sheet with the information requested. Academic regulations require that students who have registered at other colleges or universities may not disregard their records at such institutions when making application for admission to credit programs in this college. **Students concealing attendance at another college or university and not submitting a transcript from that college or university will be SUBJECT TO SUSPENSION.**

****Note:** List all vocational programs and certifications, including military, which relate to health care. Use additional pages if needed.

COMPLETE NAME OF INSTITUTION(S)

Include Vocational/Technical Programs

FROM

(Month & Yr.)

TO

(Month & Yr.)

LOCATION

(City & State)

Are you eligible to return to the last college or university attended? Yes No

If no, please explain _____

Have you been awarded one or more university degrees or vocational/technical certificates? Yes No

Degree/Certificate

Year

Granting Institution

IMPORTANT NOTE ABOUT PROGRAM APPLICATION AND LICENSURES AS AN RN:

An applicant who is not a U.S. citizen or who has been convicted of a felony should contact the appropriate State Board of Nursing regarding eligibility for licensure. Acceptance in the nursing program does not guarantee licensure.

DESIGNATION OF FOUR ELECTIVES for consideration in the selection process

College/ University	Course Number	Course Name	Number of Credits	Grade	When Taken

I acknowledge my responsibility for understanding and complying with the following information:

- 1. Withholding or falsifying the requested information, documentation of academic dishonesty or failure to provide the required documentation will make me ineligible for admission to the Nursing Program.**
- 2. Filing this form does not guarantee acceptance into the Nursing Program.**
- 3. This application is only valid for consideration for the Fall 2008 Associate Degree Nursing classes.**
- 4. If admitted to the program, admittance is provisional until a criminal background check is done and I am cleared for full admittance. The New Mexico Department of Health requires a criminal background clearance through their Department. The cost, which may change, is \$65 at present. Examples of some of the disqualifying convictions are: homicide, trafficking, or trafficking in controlled substances, kidnapping, false imprisonment, aggravated assault, or aggravated battery, rape, criminal sexual penetration, criminal sexual contact, incest, indecent exposure, or other related felony sexual offenses, crimes involving adult abuse, neglect or financial exploitation, crime involving child abuse or neglect, crimes involving robbery, larceny, extortion, burglary, fraud, forgery, embezzlement, credit card fraud, or receiving stolen property, or an attempt, solicitation, or conspiracy involving any of the felonies in this subsection.**
- 5. Admittance to the program does not guarantee program completion and/or licensure as a Registered Nurse after program completion.**

I acknowledge my responsibility for understanding the following information about submission of my application:

- 1. The deadline for submission of my application is April 18, 2008 at 4:30pm to the Nursing Program Secretary.**
- 2. All required information must be submitted at the same time in a 10 x 12 plain manila envelope.**
- 3. On outside of the sealed application packet, I must print my name plus “Nursing Program Admission Packet Fall 2008.”**
- 4. I must obtain a receipt from the Nursing Program Secretary when submitting my application packet. If there are questions, this receipt will provide proof that my application packet was submitted by the deadline date and time.**

Signature: _____ **Date:** _____

Questions concerning the program or the application process can be addressed by writing to the Nursing Department at the address or by calling (505) 527-7735.

RECEIPT
TEST OF ESSENTIAL ACADEMIC SKILLS
(TEAS) TEST

Directions:

1. Fill out this form (please print).
2. Pay for the TEAS at the DACC Cashier's Office, Room 118. Cost \$25.00
3. Have form stamped or signed by the Cashier.
4. Study for the TEAS. Read the study guide and take all practice tests in the study guide. It is acceptable to go to the tutoring center for assistance while studying (especially Math and Science).
5. Schedule a test time by calling Vicky Gonzales, 527-7569, Student Development, Room 116.
6. Take your completed form and receipt AND a photo ID to Room 116 when you take the exam.

DATE: _____

SSN: _____

(Last Name)

(First Name)

(M.I.)

AMOUNT RECEIVED

TEAS _____

HEALTH & PUBLIC SERVICES DIVISION

NURSING DEPARTMENT

TESTING/NURSING ACCOUNT NUMBER: 04-3-52127

Authorized Signature/Stamp Indicating Payment Received

RECEIPT
TEST OF ESSENTIAL ACADEMIC SKILLS
(TEAS) TEST



Associate Degree Nursing Program

INFORMATION FOR TEST OF ESSENTIAL ACADEMIC SKILLS

All student applicants to the DACC Nursing Program are required to take the Test of Essential Academic Skills (TEAS). ***Test results must be included in the application packet.*** The TEAS exam tests reading comprehension, math skills, science and technical reasoning, English and language usage all, at the college level.

A study guide is available in the Student Success Center and in the DACC Library. Students are encouraged to study prior to taking the TEAS. **Read the study guide and take all practice tests in the study guide. It is acceptable to go to the tutoring center for assistance while studying (especially Math and Science).** A study guide may be purchased via the ATI web site at www.atitesting.com

The TEAS exam may be taken up to three times. If you wish to repeat the exam, there is a thirty (30) day minimum requirement from the day one test is completed until the next test is taken. The applicant may select which exam score to submit in the application packet.

TEAS Exam Instructions:

1. Complete the attached TEAS form.
2. Take the completed form to the DACC cashier's office, room 118. **Pay \$25.00 for the exam and have your form completed by the cashier.**
3. The TEAS Study Guide is available through the DABCC tutoring center as well as the DACC Library.
4. Contact Ms. Vicky Gonzales at (505) 527-7569 to arrange a testing date and time. Testing times are limited; therefore, it is highly recommended that you contact Ms. Gonzales at least 4 weeks in advance of your desired test date.

On The Day of the Exam:

- Take a picture ID
- Take your completed receipt and form;
- Check your scheduled test day and time to ensure that you are there as scheduled.
- Arrive at least 15 minutes prior to the start of the test – no one will be admitted to the test site once the test has started.