ROGUE COMMUNITY COLLEGE
Associate Degree Nursing Program Application and Agreement
Spring 2024 Accelerated and Fall 2024 Entry Programs
Applications for Fall 2024 Entry are not accepted until after November 1 2023.

Reading and following directions are critical to success in the Associate Degree Nursing Program. It is required for applicants to apply for admission to RCC, and obtain an RCC Student ID and an RCC student email address to apply to this program.

Applicants are to complete the Checklist and Agreement Form, Prerequisite/Course Completion Chart, Point Criteria Form, and email to AASNursing@roguecc.edu.

RCC ID_____ RCC Student Email _____

Last Name_____ First Name _____ Middle Initial _____

Other Last Names _____

(Important Note: official notifications will occur by email to the applicant's formal RCC student email address. No information will be sent to personal emails regarding admission as they are not considered "secure" emails. It is the applicant's responsibility to obtain, activate, and utilize their RCC student email address.

I am applying to the Spring 2024 Accelerated Program. Application deadline October 15, 2023, 11:59 PM.

I am applying to the Fall 2024 Entry Program. Application Deadline February 15, 2024, 11:59 PM.

Check if you wish to be rolled over to the next programs' open application if you remain a non admitted alternate. Application, points, and fees will be applied to the next open nursing application.

TO BE ELIGIBLE TO APPLY:

- Applicants must be admitted to RCC, and acquire an RCC Student ID and RCC Student email address. Students can find the admissions process at www.roguecc.edu/Recruitment/.
- Transfer applicants that have left another nursing program with an F or a W for any nursing course on my transcript or was dismissed from a program before a grade was transcripted or was in any disciplinary process for classroom behavior or clinical performance such as clinical probation or documented performance at less than the expected level will not be considered for admission to the program.
- Applicants must be in good academic standing at RCC (can not be on academic suspension the term before application).
- Applications will not be processed for any student who has a financial hold at RCC. Applications will be held until the hold is cleared. Un-cleared holds will result in disqualification if not taken care of by the application deadline.
- Applicants must have passed the ATI TEAS exam with a score of 58.7% or higher.
- Applicants must have completed a minimum of 30 credits of the required prerequisite/preparatory coursework, including MTH95 (equivalent or higher) and BI231 (or equivalent within the past seven years) by the term before application deadline with a cumulative prerequisite GPA of at least 3.0.

Transcripts:

- Submit OFFICIAL electronic transcripts of non-RCC colleges and universities to the Enrollment Services office by 11:59 PM, of the application deadline. Students with transcripts outside of RCC must complete the online Transfer Credit Evaluation Request to trigger an official evaluation. RCC transcripts do not need to be submitted for the application.

- Students with sealed hard copies of official and sealed transcripts may mail them to:
  Rogue Community College, Attn: Registrar, 3345 Redwood Highway, Grants Pass, OR 97527.
  (Envelope must be postmarked by 5:00 PM on the application deadline; Send certified/return receipt if verification is desired.)
- Applicants who have submitted official transcripts previously and have requested a transfer credit evaluation do NOT have to request this again unless it is a transcript with NEW courses that need to be evaluated.

ATI TEAS Exam:

- ATI TEAS is the most widely adopted admissions exam in nursing education because it effectively evaluates students' academic readiness for the rigors of nursing studies. During the TEAS, students answer multiple-choice questions, measuring preparedness in reading, math, science, and English and Language Usage. The questions are designed to test the basic academic skills students will need to perform in class. ATI TEAS is proven to be a statistically significant predictor of early and ongoing nursing program success.
- Applicants must contact ATI Testing, schedule the TEAS Exam, and include results with their application or email them directly to AASNursing@roguecc.edu by the application deadline of the program they are applying to.
- To qualify to apply, applicants must have a composite score of 58.7% or higher. It is recommended that the TEAS exam be taken before submitting an application and fees.
- Study and exam preparation materials are available from ATI Testing for additional fees. Applicants are required to take the TEAS Exam online, Proctored online by ATI, and choose the Nursing option. TEAS exams should be pre-scheduled through ATI so that an available testing date is BEFORE program application deadline. Attempts to retake the TEAS for improved scores are required to have a two-week interval between testing dates.
- Scores of previous TEAS exams can be used within the last two years of the application deadline.

Submission of Payment and Verifications:

- Applicants must pay the application fee of $100 online by using by February 15, 2024 5:00 p.m. After November 1, submit a non-refundable $100 Fee to Rogue Community College Marketplace. Once payment is received, MarketPlace sends an auto-generated email to Enrollment Services verifying that the application fee has been paid.
- If applying for military veteran points, email a copy of your certified Form DD214 – Service 2, verifying your honorable discharge. Applicants currently on active duty in one of the armed services must submit appropriate documents showing active military duty and good standing.
- Applicants seeking selection points for healthcare work experience must email proof of licensure, state or national certification, and verification forms completed by their employer/supervisor or HR personnel. The form must be completed in its entirety by the supervisor/ employer with specific work hours filled in and all questions answered, signed, checked, and dated. Work experience points can only be earned by performing authorized duties with appropriate supervision to qualify the applicants for recertification/renewal of licensure or certification of their current profession.

Please note: RCC Advisors can answer questions but cannot help you fill out your application

RCC Associate Nursing Program
Checklist and Agreement
(for Spring and Fall Entry)

Applicant Name: _____ RCC ID:_____ RCC Student Email: _____
(Official notifications will occur by email to student's RCC student email address only.)

Applicant: You must complete and submit this checklist as part of your nursing application. Please **initial** each statement below indicating that you have read, understand, and agree to the application requirements for the RCC Nursing Program—and make a copy for your records.

Initial each item below:

____ 1. I understand that the 2023-2024 nursing application process is an online process. The Application and Agreement form and all supporting documentation are to be emailed to the AASNursing@roguecc.edu email address by the application deadline of each program (Fall entry applications are to be submitted after November 1). I understand that I do NOT need to submit a transcript from RCC.

____ 2. I understand that reading and following directions are critical to success in any nursing program and that incomplete applications will result in disqualification.

____ 3. I have been officially admitted to RCC and have obtained my 7-digit RCC ID# and my RCC student email address.

____ 4. I understand I must have a minimum of 30 graded credits of prerequisites completed by the term before application to qualify to apply. My prerequisite grades must be a C or better, and that BI231 Anatomy & Physiology I with lab and MTH95 or higher-level math course (or equivalent transfer courses) must be a part of the 30 minimum credits.

____ 5. I understand that I will receive notice of status in the selection process by: Spring Accelerated - November 15 and Fall Entry - June 1. If accepted or offered alternate status, the deadline to respond is: Spring Accelerated - November 30 and Fall Entry - June 15.

____ 6. I understand that I am to communicate with studentrecords@roguecc.edu in regard to the receipt of transcripts or questions concerning my transcript evaluation.

____ 7. I understand that if I have a financial hold on my RCC account, my application will be **disqualified** unless the financial hold is removed before 11:59 PM on the respective program application deadline. My $100 application fee will be applied toward the outstanding financial hold.

____ 8. I understand to earn additional selection points for being a military veteran or for active military duty, I must attach a copy of proof of my honorable discharge (Certified Form DD214 – Service 2) or proof of active military duty in good standing.

____ 9. I have completed the Prerequisite/Course Completion Chart and understand it is a document that must be emailed to AASNursing@roguecc.edu.

____ 10. I have reviewed the Nursing Program Map for entry requirements and admission criteria. I have reviewed the requirements for a negative urine drug screen and criminal background check for admitted students. I know that a history of certain crimes might result in my being denied entry to the program. I understand the importance of transparency and self-disclosure of past arrests, charges, citations, and convictions that may not appear on my background check. I am aware that expunged charges/crimes do appear on a criminal background check, although noted "expunged," and that I will need to provide an explanation in a self-disclosure statement if they are reported.

____ 11. I understand that by making an application to the Rogue Community College Nursing Program, I am also applying for co-admission to the Oregon Health & Science University School of Nursing (OHSU) and I am authorizing the release of my application and academic information to OHSU as needed to facilitate my program of study. If I choose to transition to OHSU after completing the RCC Nursing Program, an additional Criminal Background Check for OHSU will be required, and any criminal history may negatively impact my ability to enroll in OHSU.

____ 12. I give my permission to release the proper application and academic information to the OCNE partner schools, Oregon Center for Nursing, and the Oregon State Board of Nursing for only statistical, research, and evaluative purposes.

____ 13. I have read the Oregon Administrative Rule (OAR) 409-030-011- 409-030-0250 about Health Profession Student Clinical Training Administrative Requirements and understand and agree to abide by the requirements stated therein.   By initialing and signing below, I allow sharing required documents and necessary evidence with clinical sites. This information may include information protected under HIPAA or other applicable laws. However, the dissemination of my personal health information and personal demographic information (birth date, full SSN, phone number, address) to RCC contracted clinical site human resource departments is necessary so that the administrative requirements for clinical placement are met. Nursing students will be placed at contracted facilities that provide the necessary clinical educational experience to meet program graduation and OSBN licensure requirements that may not allow medical or religious exemptions for COVID-19 for students.

____ 14. I understand that if I am a transfer student and I left another nursing program with an F or a W for any nursing course on my transcript or was dismissed from a program before a grade was transcripted or was in any disciplinary process for classroom behavior or clinical performance such as clinical probation or documented performance at less than the expected level will not be considered for admission to the program.

____ 15. I understand to receive any additional points for work experience in a healthcare field; I must attach the documents (including state licensure or national certification) located within this application and agreement.

____ 16. I verify that all statements on this application are complete and accurate, and I understand that falsifying any information may lead to disqualification or dismissal from the program.

____ 17. I understand that the Top 85 applicants in Phase I will be invited to participate in the Phase II Essay Portion of the application process and that I will be required to contact mweast@roguecc.edu to reserve an essay session if invited to participate. I understand that the date of the essays is as follows:

Accelerated Nursing Program		Fall Entry ADN Program	
Thursday, November 2, 2023	Friday, November 3, 2023	Tuesday, April 2, 2024	Wednesday, April 3, 2024
Session 1: 8:30-10:00 AM	Session 1: 8:30 -10:00 AM	Session 1: 8:30-10:00 AM	Session 1: 8:30 -10:00 AM
Session 2: 10:30-12:00 PM	Session 2: 10:30-12:00 PM	Session 2: 10:30-12:00 PM	Session 2: 10:30-12:00 PM
Session 3: 1:00 -2:30 PM	Session 3: 1:00-2:30 PM	Session 3: 1:00 -2:30 PM	Session 3: 1:00-2:30 PM
Session 4: 3:30-5:00 PM	Session 4: 3:30-5:00 PM	Session 4: 3:30-5:00 PM	Session 4: 3:30-5:00 PM
		Monday, April 8, 2024	Tuesday, April 9, 2024
		Session 1: 8:30-10:00 AM	Session 1: 8:30 -10:00 AM
		Session 2: 10:30-12:00 PM	Session 2: 10:30-12:00 PM
		Session 3: 1:00 -2:30 PM	Session 3: 1:00-2:30 PM
		Session 4: 3:30-5:00 PM	Session 4: 3:30-5:00 PM

_____   _____   _____
Applicant Signature Fall Entry Nursing Program   RCC Student ID   Date

If the applicant is less than 18 years old, a parent must also sign: _____
(Parent signature)

RCC Associate Degree Nursing Program
Prerequisite/Course Completion Chart
(for Spring Accelerated and Fall Entry Programs)

Applicant Name: _____   RCC ID:_____

Complete this form to the best of your ability—and be assured that entering something incorrectly on this page will not disqualify you. It serves as a double-check for the transcript specialists. Make sure you have met at least minimum eligibility: 30 graded credits of the required prerequisite/preparatory coursework, including **MTH95** or higher and **BI231** (or equivalent within the past 7 years) with a cumulative prerequisite GPA of at least 3.0 completed by the term immediately preceding application. For calculation of your application GPA, your most recent grade in a course will be used. Please also include planned courses for the term of which you will plan to complete remaining prerequisites before beginning the program, i.e.., Accelerated Program - Winter term; Fall Entry ADN Program - Summer term.

Exception: If you have completed more than one math or computer science course that would equally apply to a requirement, the course with a higher grade will be used. If you are admitted to the program, all prerequisite/preparatory courses (minimum of 45 credits) must be completed with a "C" or better by the end of the term preceding enrollment in a Nursing program retain acceptance. (NOTE: BI 234 is available fall, winter, and spring terms at RCC but not summer term.)

Required Prerequisite/Preparatory Courses **RCC Course Number/Title**	**Your Completed or Planned Course #**	**College & Year Course Completed (or planned course)**	**Grade (if complete)**	**RCC Credits**
CIS120 Concepts in Computing (or documented proficiency within 10 years)				0-2
BI211 General Biology I w/lab (including genetics)				4
BI231 Anatomy & Physiology I (within 7 years)				4
BI232 Anatomy & Physiology II (within 7 years)				4
BI233 Anatomy & Physiology III (within 7 years)				4
BI234 Microbiology				4
MTH95 (Intermediate Algebra or higher)				4
NFM225 Nutrition				4
*PSY201 or 202 General Psychology I/II (or other 3-4 credit Social Science if PSY215 requirement has been met.				4
PSY215 Lifespan Human Development				4
*WR121z English Composition I				4
*WR122z English Composition II				4
**Humanities, Social Science, or Science Electives – (Will only be applied as needed to meet the minimum of 45 prerequisite/preparatory credits once all are completed)				0-6

*In some instances, 3 credits may be equivalent – see Official Degree Audit.
**See the RCC College Catalog for a list of acceptable Social Science, Humanities, and Science courses.

RCC Accelerated and Fall Entry ADN Programs
Point Criteria Notification

Applicant Name: _____   RCC ID:_____

The following information is to notify the application/selection committee that I am requesting certain local criteria points and providing the required information and forms on the following pages.

Possible Additional Selection Point Items	YES OR NO	Additional Information	Completed at (School Name)
I have previously earned an Associate Degree or higher at a regionally accredited College/University.		Highest Degree Completed: and month/year of graduation: _____ _____	
I have completed all prerequisite and preparatory credits (45+) as listed on the Nursing Program Map		Number of prerequisite credits completed: _____	
I have completed the entire series of Anatomy and Physiology (BI231, BI232, or BI233) in the past 7 years.			
I am a military veteran and have submitted my DD214 as proof of my honorable discharge from the service, or am on active duty and have attached proof of status.			
I am a current Josephine or Jackson County resident and have completed at least 12 credits at RCC.			
I have enrolled in fall term 2023 courses.			
I have/will enroll in winter term 2024 courses.			
I am seeking work experience points for working in healthcare with a national certification or license in the State of Oregon.		Requires form to be completed by a supervisor, proof of licensure/national certification to be attached.	
I am seeking points for alternate status in the previous 22-23 application year, having completed ALL required courses by summer term 2023 with a grade of C or better and was ready for matriculation if admitted to the fall 2023 cohort.		Applicant will be verified by RCC Nursing Program Support Services Specialist.	

RCC Associate Degree Nursing Program
Healthcare Work Experience Form
(for Spring and/or Fall Entry)

Applicant Name: _____   RCC ID:_____

Dear Employer/Supervisor/Human Resources Manager/Commanding Officer:

The above individual is planning to apply to the RCC Nursing Program(s). To earn additional points in the selection process, the applicant must have a minimum of **300 hours** or more of work experience within the last 5 years of application caring for **human** patients in a position requiring them to have an unencumbered certification or license. The positions considered are: Oregon Certified Nursing Assistant (CNA-1 or 2), or OSBN Licensed Practical Nurse (LPN), Respiratory Therapist, Emergency Medical Technician (EMT), Paramedic, Certified Medical Assistant, or service as a Medic or Corpsman in one of the Armed Services. Additional hours above 300 are awarded extra points in increments.

By providing this form to you to complete, this applicant permits you to provide the requested information. Please complete this form entirely and return it to the applicant. Incomplete forms (signature, description of duties, roles, hours, etc.,) will result in zero points for the applicant.

Applicants may earn points by submitting multiple work experience documents from multiple employers.

Applicants with work experience in any area of human patient care not listed above (or from another state or country) may be awarded points if this form is completed and an explanation of why their experience should be considered. Points for work experience in areas not listed above will be dependent on demonstrable similarity of experience to aspects of a Nursing role. Be sure to attach proof of training certification or other documented proof.

Supervisor/HR departments, please complete and return to the applicant to upload before their application due date of the program they are applying for. If you have any questions, you may contact the RCC Nursing Department at 541-956-7308. Thank you so much for being so helpful.

Sincerely,
Rogue Community College, Accelerated and ADN Nursing Program(s)

Please identify the healthcare role/position held by this applicant in your organization and who supervises the employee: Role:_____ Supervisor: _____

Did this position require Oregon certification, licensure, or national certification as indicated above?
Yes ____   No ____

If not one of the roles listed above, what degree or licensure or certification, or training was required for the role?
_____

Please describe the patient care role: _____
_____
_____
_____

Total Number of Hours Worked here: _____   _____ = _____
                                                                  Insert role above   *Insert total hours above*

_____   _____
Signature of Supervisor/HR Manager/   *Printed Name and Title Commanding Officer*

_____   _____   _____
Name of Facility/Organization   *Phone Number*   *Email address*