

# HEALTH SCIENCES // APPLICATION 2017-2018

APPLICATION FOR PROGRAM \_\_\_\_\_

DATE \_\_\_\_\_

NAME \_\_\_\_\_

SSU ID \_\_\_\_\_

ADDRESS STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE NO \_\_\_\_\_ CELL PHONE NO \_\_\_\_\_

PREFERRED EMAIL ADDRESS \_\_\_\_\_

---

## HEALTH SCIENCES ADMISSIONS COORDINATOR

**BOBBI MASSIE**

Health Sciences Building Room 126

740.351.3209 or 740.370.9776 texting // [healthsciencesadmissions@shawnee.edu](mailto:healthsciencesadmissions@shawnee.edu)





**Inquiry and Admission Packet  
Associate Degree Nursing Program**

**Minimum requirements for admission**

<b>Applicants with less than 20 hours of college credit</b>	<b>Applicants with 20 or more hours of college credit</b>
<ul style="list-style-type: none"> <li>• Submit high school transcript/ GED certificate</li> <li>• Have a GPA of 2.0 or higher on a 4.0 scale in high school or college credit</li> <li>• Achieve a minimum composite ACT score of 22 with an 18 or above in all four areas of concentration</li> <li>• Have a “C” or better in high school or college Algebra, Chemistry, and Biology</li> </ul> <p>Note: Students who have met the above minimum requirements with an overall ACT score of 24 or better are eligible for automatic acceptance into the associate degree nursing program provided they meet the deadline for application.</p>	<ul style="list-style-type: none"> <li>• Submit high school and college transcripts</li> <li>• Have a college GPA of 2.5 or higher</li> <li>• Have a “C” or better in high school or college Algebra, Chemistry, and Biology</li> <li>• Achieve an SSU English Placement score or transfer credit equivalent in ENGL 1101 and an SSU Math Placement score or transfer credit equivalent in MATH 1010</li> </ul> <p>Note: Students who have met the above minimum requirements with an overall ACT score of 24 or better are eligible for automatic acceptance into the associate degree nursing program provided they meet the deadline for application.</p>

**Instructions:**

1. You must first submit an application for admission to Shawnee State University. If you are already enrolled at SSU, a change of major form should be submitted to Office of Registrar requesting major be changed to Associate in Natural Sciences.
2. The Associate Degree Nursing Program application must be printed, completed, and returned along with the Health Science Application Fee (\$30 cash, check or money order payable to Shawnee State University) to the Office of Admission by March 1<sup>st</sup>\* (Fall Admission.) If you have previously applied to a Health Science program, you are not required to pay the \$30 application fee. The application fee is a one-time payment only.

Note: Applications received after the deadline will not be considered unless a vacancy occurs.

**Shawnee State University**  
**Application and Acceptance of Responsibility**  
**Associate Degree Nursing Program**

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_

Indicate academic year to enter Program: Fall Semester \_\_\_\_\_  
Year

If you are a LPN, you must list your license number: # \_\_\_\_\_

I understand that if admitted to the Nursing program, I will be responsible for:

1. Caring for clients of all ages, ethnic, and social backgrounds.
2. Traveling to a clinical site up to 75 miles away from campus and arriving at designated clinical time.
3. Securing a reliable source of transportation.
4. Devoting up to 12 hours a day to my education, including reading, group study, and clinical preparation.
5. Spending up to 20-30 hours a week in classroom, lab, or hospital setting.
6. Scheduling time off work or from clinical 24 hours prior to an assigned clinical time during the obstetrical rotation.
7. Providing Federal and State Background Checks, a 5-panel quick drug screen, proof of flu immunization, and any other documentation needed to comply with clinical site's policies and procedures and meet clinical affiliation requirements.
8. Providing a completed SSU Confidential Physical form prior to first day of class, maintaining required current immunizations as requested, and proof of Basic Life Support (BLS) Provider CPR.
9. **I understand that a felony conviction on my record may disqualify me as a candidate for licensure as a registered nurse. Certain felonies restrict clinical site placement. Clinical attendance is a requirement of the program and failure to meet those requirements could lead a student to unsuccessful completion of the program.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return this application form with \$30 application fee to:  
Shawnee State University  
Office of Admission  
940 Second St.  
Portsmouth, OH 45662

Board of Trustee Policy 5.01

**This policy serves to ensure that there are University structures and processes in place that promote equal opportunity for students and employees and prohibit discrimination against any individual because of race, color, genetic information, religion, age, disability, national origin, ancestry, sex, pregnancy, sexual orientation, veteran status or military status.**