



Bachelor of Science Degree NURSING

PROGRAM ELIGIBILITY CHECKLIST

- ☐ Complete an Associate Degree in Nursing from a regionally accredited institution.
- ☐ Complete an Associate in Arts Degree from a regionally accredited institution.
- ☐ Possess and submit a **valid, unrestricted, unencumbered** RN license from the state in which the applicant is practicing, to be kept current throughout the duration of the required course of study.
- ☐ Earn a 2.5 cumulative GPA in all college coursework.
- ☐ Complete a total of 36 semester hours of General Education Courses as noted in F.S. 1007.25.
- ☐ Earn a "C" or better in all Gordon Rule classes as well as-
 - o BSC 2010, BSC 2011, CHM 1030, CHM 1045, CHM 1046, PHY 1053 OR PHY 1054
 - o MCB 2010
 - o HUN 1201
 - o SOCIAL SCIENCE
 - o STA 2122 OR STA 2023 STATISTICS
 - o DEP 2004 HUMAN GROWTH AND DEVELOPMENT
- ☐ Minimum cumulative Grade Point (GPA) of 2.50 in all college course work and a minimum of "C" in all Florida Common Course Pre-requisites applicable to the AS to BSN degree program. However, if space is available, students with GPA of less than 2.50 may be admitted on a provisional basis.
- ☐ All pre-requisites must be completed PRIOR to applying to the program.

ADMISSION PROCEDURES

1. New students must submit a Chipola College general application for admission.
Former Chipola students, who have not attended Chipola in the past year, must submit an updated Chipola College general application for admission.
 2. All applicants must complete the Baccalaureate Supplemental Application **ONE** term prior to desired admittance.
 3. All applicants must request official transcripts from high school or a GED.
 4. All applicants must request official transcripts from **all** previous institutions (not including Chipola College).
 5. All applicants may meet additional program requirements for graduation based on previous credits earned.
- ❖ Students who have not taken two years of the same foreign language in high school must complete two semesters or 8 credit hours of the same foreign language at the college level to meet the state foreign language requirement before earning the BS degree.

Submit all documents and request all transcripts to be sent to:

Baccalaureate Admissions
Admissions and Records
Chipola College
3094 Indian Circle
Marianna, FL 32446-2053



NURSING
Baccalaureate Application Supplement

Name: _____
Last First MI Maiden (if applicable)

SSN _____ / _____ / _____ JID# _____

Mailing Address: _____

City State Zip

Home Phone: (_____) _____

Cell Phone: (_____) _____

Work Phone: (_____) _____

Place of Work _____

Primary E-mail Address: _____

When do you plan to enroll? Fall _____ Spring _____ Year: 20 _____

Attach copy of valid, unrestricted, unencumbered Florida, Georgia, or Alabama RN License.

LIST ALL COLLEGES YOU HAVE ATTENDED AND REQUEST OFFICIAL TRANSCRIPTS

Postsecondary Institutions Attended	City and State	Degree/Certificate Received (A.A., A.S., B.S., Diploma)

(Additional institutions must be listed on a separate sheet of paper and submitted with the application.)

SOCIAL SECURITY NUMBER ACKNOWLEDGEMENT

In compliance with Florida Statute 119.071(5), Chipola College issues this notification regarding the purpose of the collection and use of your Social Security Number. The college collects your Social Security Number for use in the performance of the College's duties and responsibilities. To protect your identity, the college will secure your Social Security Number from unauthorized access. The college will never release your Social Security Number to unauthorized parties. Federal legislation relating to the Hope Tax Credit requires that all postsecondary institutions report the Social Security Number of all postsecondary students to the Internal Revenue Service. This IRS requirement makes it necessary for colleges to collect the Social Security Number of every student. A student may refuse to disclose his/her Social Security Number to the College, but refusing to comply with the federal requirement may result in fines established by the IRS. In addition to the federal reporting requirements, the public school system in Florida uses the Social Security Number as a student identifier. This use is authorized by Florida Statute 229.559 and in School Code Section 1008-396. In a seamless K-20 educational system, it is beneficial for postsecondary institutions to have access to the same information for purposes of tracking and assisting students in the transition from one education level to the next. All Social Security Numbers are protected by federal regulations and are never released to unauthorized parties.

Chipola College does not discriminate against any persons, employees, students, applicants or others affiliated with the college with regard to race, color, religion, ethnicity, national origin, age, veteran's status, disability, gender, genetic information, marital status, pregnancy or any other protected class under applicable federal and state laws, in any college program, activity or employment. Should you experience such behavior, please contact the Associate Vice President of Human Resources, Equity Officer and Title IX Coordinator at (850) 718-2269, Building A, Room 183-A or by mail at 3094 Indian Circle, Marianna, FL 32446-2053.

I acknowledge by my signature I understand the College is collecting my social security number for the purpose of complying with federal and state statutes related to employment, financial and academic assistance, and inter-institutional articulation or transfer, and that the College may disseminate that information in some communications with outside organizations, while taking precautions to safeguard use of the number. I certify that the answers given herein are true and correct. I further understand that a false statement in this application or any admission document will subject me to penalties pursuant to 837.06, Florida Statutes; and is grounds for denial of admission or, upon further discovery, grounds for dismissal and invalidation of college credit or degree based on such credit.

Applicant's Signature (ink) _____

Date _____

03/25