

Moorpark College Associate Degree Nursing (RN) Beginning Program Application

1. Last Name: _____ First Name: _____ Middle Name: _____
Previous Name(s) if any _____

Per Ventura County Community College District (VCCCD) Policy, students that have passed NS M01/M01L at Moorpark College previously are not eligible for admission through the Beginning Program Application.

Previously applied to Moorpark College nursing program? No Yes: When? _____

Previously enrolled in any RN nursing program, including Moorpark? * No Yes

If Yes, what was the name of the program? _____ Semesters of attendance? _____

*If you are applying to return to the first semester of the Moorpark College nursing program, be sure to refer to the nursing website's "Admission Criteria" tab and item #6 of the PDF document also titled "Admission Criteria".

If you do not have a Moorpark College Student ID # or Email, please submit an application to the college and obtain one before submitting the nursing application. You must be at least 18 years old before applying to the nursing program.

MC Student ID#: _____ **Date of Birth _____ **For Statistical Purposes Only

I have a Social Security Number or Individual Taxpayer Identification Number: Yes SSN Yes ITIN

VCCCD Email address: _____ @my.vcccd.edu

Address _____

City _____ State _____ Zip Code _____ County _____

Daytime Telephone Number _____ Evening/Mobile Number _____

**Race/Ethnicity: Please check all that apply

**For Statistical Purposes Only

- African American/Black Hispanic/Latin-x White/Caucasian American Indian or Alaska Native
 Asian, non-Filipino Native Hawaiian Filipino Other non-Filipino, non-Native Hawaiian Pacific Islander
 South Asian (e.g. Indian, Pakistani, etc) Other Asian Other _____

**Primary Language Spoken at Home _____

**Gender: Female Male Non-binary

Veterans and spouses must attach a copy of form DD-214 if claiming eligibility.

- Veteran Eligibility: active military or discharged under conditions other than dishonorable.
Includes full-time National Guard.
 Spouse Eligibility: widow/er of a veteran that otherwise meets this criteria

2. Highest Degree held: _____ If no college degree, did you earn a: GED HS Diploma

3. Do you have a current CNA certificate? No Yes (if Yes, please attach a copy)

4. Do you have a current LVN license? No Yes (if Yes, please attach a copy)

5. Have you taken the ATI TEAS within the past 12 months?

- No
 No, but I have scheduled an appointment to take the ATI TEAS elsewhere on _____ (specify date)
 Yes, approximate date taken: _____

- If Yes, results must be sent via ATI to Moorpark College by the deadline indicated on the nursing website. If the ATI TEAS has been taken more than once in the past 12-month period, only the first exam result will be accepted.
- If No, qualified applicants may randomly receive an invitation to take the ATI TEAS at Moorpark College on a date following the application period. See the nursing website for dates, and what to do if not invited. It is strongly suggested that you take the ATI TEAS elsewhere due to the limited number of testing seats at Moorpark.

6. List **ALL** Colleges and Universities with **any** coursework attempted, completed, or in progress, regardless if they apply to the program. Include the approximate dates of attendance. Include any dual-enrollment/special admit (college courses completed during elementary school, middle school, or high school), or distance learning. If you attempted courses at a multi-college district, list each college separately. For example: list Moorpark, Ventura, and/or Oxnard College on separate lines if you attempted courses with any of them.

Colleges or Universities Attended (Attach a separate sheet if more lines are needed)	Approximate Dates of Attendance (which years or semesters?)

7. List **COMPLETED** prerequisite coursework required for application. All must be completed with a letter grade of “C” or better with a regionally accredited college or university. Core sciences must have been completed within the past 7 years. You may petition the recency requirement through the Health Science Counselor. There is no guarantee of approval.

Prerequisite Course	Units	Where Taken	When Taken	Grade
College Human Anatomy W/Lab, 4 units				
College Human Physiology W/Lab, 4 units				
College General Micro. W/Lab, 5 units				
ENG M01A English Composition, 4 units				
Math M03 Intermediate Algebra or higher, 5 units Or 2 years of High School Algebra with a grade of B or higher in each semester				

8. **OPTIONAL Elective Courses:** List if you **COMPLETED** any of the elective courses below with a letter grade of “C” or better with a regionally accredited college or university. These are optional courses, among many that promote success in nursing coursework. If you have not taken the course, leave the row blank.

Optional Elective Course	Units	Where Taken	When Taken	Grade
Medical Terminology				
Pharmacology				
Basic Pathophysiology or Pathophysiology (expected to pertain to humans)				

9. **Required Documentation to have at Admissions and Records: Must be on file with Moorpark College Admissions and Records PRIOR to submitting this application. Official electronic or official hard-copy (original, unopened envelope) method is acceptable.**

- Official transcripts for ALL college courses attempted outside of the VCCCD (Moorpark, Ventura, Oxnard Colleges), including all courses taken for credit or no credit even if not a part of the major or the prerequisites. Failure to have transcripts on file with all courses attempted and grades posted will result in disqualification.
- If you attempted courses with Los Angeles Community College District colleges, official hard copy transcripts are preferred instead of official electronic transcripts.
- All official high school or GED transcripts if no college degree
- [Official International transcript evaluation](#), if applicable
- Official Advanced Placement (AP) scores from College Board, if being used for satisfying a prerequisite course

10. Required Documentation to include with application

- o An opened official VCCCD transcript if courses were attempted with Moorpark, Ventura, or Oxnard College. Refer to the [Admissions and Records Transcript Request webpage](#) for directions on ordering a transcript for delivery to yourself. It is understood that this official VCCCD transcript is opened for submission with the application. Failure to include the transcript with all courses attempted within VCCCD and grades posted will result in disqualification.
- o All course descriptions from the *college catalog* for the semester and year of the above **prerequisite courses** if attempted outside of VCCCD. Include a PDF of the catalog page with the course description. Do not copy-paste the description into a word processing document, do not use the description from the Schedule of Classes, do not use the Syllabus course description, do not screen-snip a portion of the page. Include the entire page. If a webpage-only catalog and a PDF or hard-copy catalog is not available, make a PDF print that includes the headers and footers of the webpage. The header or footer often indicates the webpage is from the catalog, and includes the name of the school.

11. Optional Supporting Documentation for Multicriteria Selection Process: Include with application, if applicable. See the "Admission Criteria" at www.moorparkcollege.edu/nursing for details.

****Admission is dependent on clearance of clinical requirements including:
Health Appraisal, Background Check, and Drug Screen****

*I understand all official transcripts must be **on file with** (not just sent to) MC Admissions and Records **prior** to submitting this application. I authorize the use of this information to evaluate my qualifications. By signing this application, I certify under penalty of perjury that the information on this **application is complete and correct**. I understand that falsification or failure to report may result in my dismissal. **Incomplete application materials will result in your application not being considered, and all materials will be discarded.***

APPLICATION WILL NOT BE ACCEPTED IF NAME NOT PRINTED, NOT SIGNED, OR NOT DATED BY APPLICANT.
Signature must be handwritten, typed signatures will not be accepted.

Print Name: _____ Student Signature: _____ Date: _____

To be completed by Counselor after submission

Overall GPA: _____ Core Bio GPA: _____ Core Bio Repeats: _____ English GPA: _____ English Repeats: _____ Math GPA: _____ Math Repeats: _____

Success Score _____ Counselor Signature: _____ Date: _____