San Jacinto College Vocational Nursing Application Process

Application Directions

This application and this checklist must be filled out completely and brought to the Vocational Nursing Department during the application period for the semester you want to attend. You must bring all the items listed below before we will accept your application. Please check all check boxes and circle bullets as each item is accounted for.

Applications will be accepted on the dates and times specified in the dated packet online. This application packet must include copies of the following:

- Show proof of admission into San Jacinto College. Provide the letter they sent you in the mail or by email or provide a transcript from San Jac as proof of admission.
  
  Last San Jacinto College Semester Attended (required): ________________________________

- Front & back copy of your Healthcare Provider CPR card from the American Heart Association (must not expire during the program)

- Copies of proof for all required shots (must not expire during the program)
  o  Tetanus (td/tdap) [within the past 10 years]
  o  TB (PPD) skin test or Chest X-ray [within the past year]
  o  Seasonal Flu shot [within the past year] or proof of allergy to the flu shot
  o  2 MMR shots or titer that shows immunity
  o  2 Varicella shots or titer that shows immunity or proof of chicken pox
  o  HEP B series of 3 shots or titer that shows immunity

- Copy of High School Transcript or GED or Spantran (BON requirement regardless of college)

- Copy of All College Transcripts (We Do Not accept online print outs & the department needs its own copy regardless of turning in transcripts to Enrollment Services)

- Proof of 2.25 or higher GPA - Cumulative GPA from all previous colleges attended. Validated with college transcript.

- IF using previous HESI scores (within one year) from San Jac or scores from another San Jac campus different from the campus you are applying to, please include a copy of the HESI reports (summary & critical thinking)

________________________________________
Student Signature
Vocational Nursing Application for Admission

Date_________________ Application for ___________________ Campus:___________________
Semester & Year

You are urged to give careful consideration on this form. It is to your advantage to complete the entire form accurately.

Please Print (blue or black ink only)

G00#_________________

Social Security Number ________________________________

Full Name__________________________________________

Last                  First                  Middle                  Maiden

Address ____________________________________________

Number/PO Box            Street            City            State            Zip

Home Phone_________________ Cell_________________ Work__________________

Active Email (required – print neatly): ________________________________

Friend Relative (In case of emergency, please list at least two)

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<th>Relationship</th>
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High School Diploma / GED / Span Tran (or other evaluation)
Year_______ Name of High School________________________ City/State/Country___________

College(s) Attended including San Jacinto College, if applicable

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<tr>
<th>Name of School</th>
<th>City/State</th>
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Are you or have you ever been on any academic probation or suspension? ____________________

Have you ever applied to this nursing program before? Yes □ No □ If Yes, When? ________________

Have you attended any other school of nursing? Yes □ No □ If Yes, When? ________________

Where? Name of school________________________________ City/State_____________________

Entrance Date ____________ Exit Date ____________ Reason for leaving_____________________