

A.S.R.N. - Nursing

ASSOCIATE OF SCIENCE REGISTERED NURSE



Graduating Class of December 2023

Student Information and Application Packet

Helena College University of Montana Associate of Science Nursing

Registered Nurse

Updated for **SPRING 2026 Start**Application DUE by Dec 1, 2025 5:00 p.m.

Revised 7/22/2025

*Applications are subject to change from year to year. It is the student's responsibility to obtain the most current information/application packet prior to applying to the A.S.R.N. Nursing Program

OVERVIEW

The Associate of Science Registered Nurse (A.S.R.N.) Program is approved by the Montana State Board of Nursing and is accredited through the Accreditation Commission for Education in Nursing (ACEN). Helena College is also accredited by the Northwestern Commission on Colleges and Universities. After prerequisite coursework is completed, the A.S.R.N. - Nursing Program at Helena College consists of four consecutive semesters. The coursework is competency-based and has the primary goal to prepare graduates with the knowledge, skills, and values to enter the direct care workforce as a Registered Nurse.

EDUCATIONAL PROGRAM

This is a competitive enrollment program. Student cohort size is limited by the availability of lab and clinical space. A.S.R.N. - Nursing applications are accepted twice per year in the spring and fall, up to 20 students per semester. Applicants are accepted based on the criteria found in this packet. **Should the number of qualified applicants exceed the available spaces, not all qualified applicants will be accepted.** Nursing skills labs, simulations, and clinical experiences will occur face-to-face primarily in Helena and the surrounding area. There are times when an exception can be made for some clinicals to be arranged in the student's hometown at the discretion of the Nursing Director.

Students commit to a full week of Class, Lab, or Clinical work each week. This program, while very exciting, is fast-paced and challenging. There are many tests, quizzes, and assignments each week to complete prior to class/clinical outside of class time. Students in the Nursing Program should plan for 2+hours of preparation time, reading, and assignments for each class credit per week. Because of this, students are encouraged to reduce or eliminate outside work if possible.

PROGRAM EXPENSES

A.S.R.N. - Nursing students will be required to purchase textbooks, software resources, personal equipment, supplies, and uniforms, pay any associated student tuition and course fees, and pay for transportation to clinical sites. Students will need a reliable computer with a camera and microphone, and access to reliable high-speed internet, a stethoscope, and a pulse oximeter. Accepted students must complete a background check prior to the start of the program. Background checks are done at the students' expense, through Castlebranch (information will be sent upon acceptance). The cost of the background check is approximately \$75.00. If needed, students should begin planning early for financial aid to meet their educational needs.

ADMISSION TO HELENA COLLEGE UNIVERSITY OF MONTANA

Students must be admitted to the college **prior to** submission of the A.S.R.N. - Nursing Program application and be in good academic standing with the institution. No application will be reviewed if the applicant has not applied to Helena College. Please allow yourself time to obtain all official transcripts and/or transfer information from any prior college courses to be submitted prior to your application, and allow time for the Registrar's Office to review and approve your official transcript and transfer information. Transfer work must be from a regionally accredited institution.

An application to the college may be obtained in one of three ways: 1) by visiting the campus, 2) by calling Helena College (406) 447-6900, or 3) applying online at http://helenacollege.edu/admissions_enrollment/default.aspx

ELIGIBILITY FOR ADMISSION INTO THE A.S.R.N. - NURSING PROGRAM

*All application forms and documents are included in this application packet.

APPLICATION AND PROGRAM ENTRY

The A.S.R.N. Program prepares graduates to provide direct care to clients, individuals, or groups in a variety of structured settings with clear policies and procedures. Due to limited clinical sites for client care experiences and State Board of Nursing regulations regarding student-to-faculty ratio, the Director and nursing Faculty will determine acceptance into the program.

Prerequisite coursework must have been taken within the last fifteen years (within the last 5 years for science courses) prior to admission to the Nursing Program to fulfill program requirements. Exceptions will be considered on a case-by-case basis by the Registrar's Office and may include the discretion of the Director of Nursing. Students may repeat TWO general education courses to achieve a "C" grade or above, prior to the student's admission to the nursing program and courses. *A maximum of 2 prerequisite retakes will be allowed.* Written permission from the Director of Nursing is required before taking any prerequisite course a third time. If permission is not obtained, the second grade will be used to calculate GPA. Students must obtain a minimum of 2.75 GPA in the prerequisite courses to apply to the A.S.R.N. Program.

Admission to the Helena College A.S.R.N. Nursing Program is competitive. **Meeting eligibility requirements does not guarantee admission.** The RN program standards and requirements in relation to the grading scale and attendance are stricter and more rigorous than general college requirements, which is necessary to prepare students for the NCLEX RN exam and to ensure graduates are prepared for professional employment in the nursing field.

LPNs INTERESTED IN BECOMING RNs

For applicants currently licensed as LPNs who wish to become an RN, please complete the entire A.S.R.N. - Nursing Application. LPNs must have completed 12 months of full-time work experience *prior to applying* to the A.S.R.N. Program. LPNs may take the NLN NACE Fundamentals exam or the TEAS test as their entrance exam. Requests for credit for prior learning will be reviewed by the Registrar's Office, with final approval at the discretion of the Director of Nursing.

TRANSFER STUDENTS

Transfer Students are required to have their transcripts evaluated by the admissions department prior to applying to the nursing program. Transferability and acceptance of non-core curriculum nursing credits into the Helena College Nursing Program are not guaranteed.

To be eligible to apply for admission into the A.S.R.N. - Nursing Program, applicants must:

- Have evidence of admission to Helena College with a complete admissions file. (Please check that you have provided all required documentation before submitting your application.)
- Be in good academic standing with Helena College.

- Have completed all prerequisite coursework with a "C" (not C-) grade or higher, and a
 minimum overall prerequisite GPA of 2.75. It is the applicant's responsibility to confirm
 with the Registrar's Office that transfer courses are equivalent to the program's
 prerequisites and are transferable to Helena College.
 - Regarding Transferable Courses send official transcripts to the Registrar's Office. Attach unofficial copies to this application.
- Print a copy of the TEAS test results with a score of 70% or higher, or the NLN NACE Foundations of Nursing exam with a score of 65% or higher, and attach it to the application.
- Achieve a Total calculated application points of 58 or higher for preference admission (see application scoring). Applicants scoring 55-57 may be accepted at the discretion of the Director of Nursing.
- Submit all required documents, including immunization records, BLS/CPR certification, and others as stated in the application.

APPLICATION DEADLINES

Applications for admission for **Spring 2026 are due by 5:00 pm on December 1, 2025.** Please include all application items as a completed packet. Incomplete applications may result in disqualification. Helena College is not responsible for any late, lost, or missing information. Please submit completed applications to the Nursing Department in person, by mail, or online with the information below.

CONTACT INFORMATION

Program Coordinator Nursing Department Room 113 406.447.6946

MAILING ADDRESS

Helena College University of Montana Attention: A.S.R.N. -Nursing Program 1115 N Roberts Helena, MT 59601

SUBMIT ONLINE

Completed Applications may be submitted by the due date and time to:
nursingapplications@helenacollege.edu

It is the applicant's responsibility to ensure that all requirements are met by the established deadline. Deadlines, guidelines, and policies apply equally to all students. **Late applications will not be accepted.**

Helena College A.S.R.N. - Nursing Program does not maintain a waiting list. Applicants must reapply each semester.

NOTIFICATION OF ACCEPTANCE

Students will be notified of acceptance into the Nursing Program via the email provided on the application. Students who have been accepted must respond to the Nursing Department of their intent to accept their admission by the date indicated on the acceptance notification letter. **All future correspondence will be sent to the students' Helena College email**. Students accepted to the Nursing Program are required to attend the mandatory Nursing Orientation, and students new to Helena College should also plan to attend New Student Orientation.

NURSING PROGRAM POLICY: STUDENT IMMUNIZATIONS AND CERTIFICATIONS

Helena College of Nursing is required to comply with the vaccination policies and requirements of our clinical partners for all student clinical experiences. A complete list of vaccinations and certifications can be found on page 7 of the application. Proof of these vaccinations and certifications must be completed and submitted along with your application to the A.S.R.N. – Nursing Program.

Helena College of Nursing cannot guarantee clinical placements for students who are not compliant with clinical agency requirements. If a clinical agency requires vaccination for its employees, as a student learner, you will not be allowed in the facility for clinical learning unless you comply with the facility guidelines. Vaccination declinations/waivers are at the discretion of each of the clinical facilities. If you cannot complete clinicals, you will not be able to meet the course learning objectives and, hence, cannot successfully pass the course. We are committed to your education and hope that the student's clinical compliance issues can be resolved at a future date. We will make every effort to facilitate your successful re-entry into the Helena College nursing program to complete your degree; however, because of space limitations, we cannot guarantee placement or re-entry at a particular time.

NURSING PROGRAM POLICY: STUDENT BACKGROUND CHECKS

To promote patient safety and decrease institutional liability, most clinical agencies require students to have a clear background check before students are permitted in the clinical setting. To meet these requirements, the program requires that the check be done prior to starting the A.S.R.N. - Nursing Program.

- Background checks are done at the student's expense through Castlebranch. Approximate cost, \$75. Students with background checks that reveal a finding will be evaluated individually to determine whether they will be eligible for clinical placement and state licensure for their respective degree program.
- Students are required to go to castlebranch.com for their background check. Do not do this before being accepted into the program.
- Nursing students are required to provide a copy of their background check to the nursing office before the beginning of the semester.

EQUAL OPPORTUNITY POLICY

Helena College University of Montana is committed to the provision of equal opportunity for education, employment, and participation in college activities without regard to race, color, religion, national origin, sex, age, marital and family status, physical or mental disability, sexual orientation, or political belief, service in the uniformed services (as defined in state and federal law), and veteran status.

Associate of Science Registered Nurse Curriculum

PREREQUISITE COURSEWORK

The following courses must be completed prior to admission into the A.S.R.N. - Nursing Program. All prerequisite work must be completed with a minimum grade of "C" (not a C-) in each course and a minimum cumulative GPA in prerequisite coursework of 2.75. Applicants may retake two courses (one retake each) for a higher grade. **A maximum of 2 prerequisite retakes are allowed**. The most recent verifiable grade will be used for scoring (We use the retake grade...even if it is lower).

Prerequisites	14 credits	
Course Number	Course Name	Credits
BIOH 201	Anatomy & Physiology with Lab	4
M 121	College Algebra	3
CHMY 121	General Chemistry with Lab	4
WRIT 101	College Writing I	3

A.S.R.N. - Nursing Program Coursework after Formal Acceptance

Once enrolled in the A.S.R.N. - Nursing Program, a minimum of a C in all courses is required to continue in the program. In all courses, students must achieve a grade of 78% or higher for each lecture, lab, and clinical course. Students must pass all classes each semester in order to progress to the next semester.

For General Education classes (A&P II, Intro to Psychology, Sociology, and Microbiology), grading will be based on the college (not nursing) grading scale.

The courses for the program are required and are laid out in the following sequence:

Semester 1	15 credits	
Course #	Course Name	Credits
BIOH 211	Anatomy & Physiology with Lab II	4
NRSG 230	Nursing Pharmacology	3
NRSG 231	Nursing Pharmacology Lab	2
NRSG 232	Foundations of Nursing	3
NRSG 233	Foundations of Nursing Lab	3
Semester 2	14 credits	
Course #	Course Name	Credits
NRSG 256	Pathophysiology	3
NRSG 234	Health and Illness of Adult Nursing I	3
NRSG 235	Health and Illness of Adult Nursing I Clinical	2
NRSG 236	Health and Illness of the Childbearing Family	2
NRSG 237	Health/ Illness of Childbearing Family Clinical	1
PSYX 100	Introduction to Psychology	3
Semester 3	15 Credits	
Course #	Course Name	Credits
NRSG 244	Health and Illness of Adult Nursing II	3
NRSG 245	Health and Illness of Adult Nursing II Clinical	2
NRSG 254	Health and Wellness of Mental Health Nursing	3
NRSG 255	Health /Wellness Mental Health Clinical	1
NRSG 246	Health and Illness of Child and Family Nursing	2
NRSG 247	Health /Illness of Child /Family Nursing Clinical	1
SOCI 101	Introduction to Sociology	3
Semester 4	14 Credits	
Course #	Course Name	Credits
NRSG 259	Health and Illness of Adult Nursing III	3
NRSG 260	Health and Illness of Adult Nursing III Lab	1
NRSG 261	Health and Illness of Adult Nursing III Clinical	2
	Managing Client Care for the DN	2
NRSG 266	Managing Client Care for the RN	
NRSG 266 NRSG 267	Managing Client Care for the RN Clinical	2
NRSG 266		

PLEASE RETAIN PAGES 1 THROUGH 6 FOR YOUR RECORDS AND SUBMIT APPLICATION PAGES 7-12

HELENA COLLEGE NURSING - ASSOCIATE DEGREE REGISTERED NURSE APPLICATION

		Applicant Information	
Full Name	:		
	Last	First	Middle Initial
Address: _	Mailing Address		Apartment/Unit #
_	City	State	ZIP Code
Home Phor	ne: _()	Cell Phone: _(.)
Helena Col	lege Student ID:	Email:	
lf y		Program? Yes No	
	S	Max of 2 prerequisite retakes allowed)	
-			
	For applicants who has used for scoring GPA	nave retaken a prerequisite course, the m A calculations	nost recent verifiable grade will be
		Applicant Requirements	
Initial A	Admission to Helena College	e – letter of acceptance, or student numb	per on unofficial transcripts
All tran	sfer courses are officially ev	valuated and accepted by HC Admission	s prior to application deadline
Comple	etion of prerequisite coursev	work with proof of grades (include an und	official copy of transcripts)
Сору о	of TEAS Test or NLN NACE	results - must be taken within the last 3	years
Physic	al Form I and II completed w	vithin last 6 months	
Immun	ization Records: *For stude	ents unable to locate childhood immu	nization records titers/boosters are
_	_ Childhood immunizations	(Polio, DPT, MMR)	
	 Hepatitis A		
	Hepatitis B (series of 3)		
		e (Flu) or signed declination	
 ch	_ Negative TB skin tests (tweet x-ray indicating no active	wo-step at least one week apart). Negative disease also accepted	ve QuantiFERON TB gold or negative
	_ Varicella vaccination or tit		
	t CPR card: BLS with AED for accepted)	for Healthcare providers (must have in	n person skills test. Online only

APPLICATION CRITERIA WORKSHEET

Please fill in the chart below to the best of your knowledge and submit proof of grades with the application. Use the points worksheet on the net page to calculate points. If you are currently taking a required prerequisite course and will not receive a grade in that course before the application deadline, please indicate your "current" status in the chart below and write your current grade. As soon as your final grade becomes available, submit proof of your final grade to the Nursing Department to be attached to your application. Grade points are calculated using the current catalog criteria, which include +/-weighing (i.e., B+ = 3.3, B = 3, B- = 2.7). Grade x Credits = Calculations. Add up all Calculations for the Total Calculation Score. Divide by 13 = prerequisite GPA

(A) = 4 (A-) = 3.7 (B+) = 3.3 (B) = 3 (B-) = 2.7 (C+) = 2.3 (C) = 2

Prerequisite Cour	se	Currently Taking	Grade	Credits	Calculations	*Points Possible
Anatomy & Physiol Lab BIOH 201	logy w/			4		
College Algebra M 121				3		
College Writing WRIT 101				3		
General & Inorgani Chemistry w/ Lab CHMY 121	ic			4		
				ulation Score		
		(sum of all Calculations) Prerequisite GPA: (Divide total calculated score by 14)				
				points earned: ee table below)		30-50
TEAS or NACE Score:				points earned: ee table below)		10-25
Other points earned (*see table below): Work experience (1 point) Completed embedded co-requisite courses: BIOH 211 (A&P II w/lab): (1 point) BIOM 250 (Micro with lab) (1 point) Academic Degree (1-2 points)					1-5	
Total Score: add GPA points + TEAS/NACE points + Other points In case of a tie, we will consider the following criteria: First: Grade in BIOH 201; Second: Grade in CHMY; Third: Veteran Service with proof.			= Total Score	Preference for 58 points or higher. Scores of 55- 57 may be considered		

APPLICATION POINTS

Selection into this nursing program is competitive. To assure you receive credit for all earned points, please have **ALL** documentation attached to your application by the application deadline.

Use this rubric to identify points earned for each category and enter those numbers in the worksheet above. **The minimum number of points eligible to apply is 45**. The reason for this is to help ensure student success in both didactic testing and the NCLEX-PN exam required for licensure. Meeting the minimum requirements does not guarantee admission into the Nursing Program.

Prerequisite GPA points: 30-50 points	TEAS Points: 10-25 points	Other Points: Work Experience (min 12 mos. full time) 1 point	Other Points: Prerequisites from HC 1-2 points	Other Points: Academic Degree 1-2 points
3.65—4.00 50 3.50—3.64 45 3.25—3.49 40 3.00—3.24 35 2.75—2.99 30	87—100% 25 81—86% 20 76—80% 15 70—75% 10 NLN NACE (for current LPNs only) 85—100% 25 80—84% 20 73—79% 15 72—65% 10	CNA Med Tech CMA, Surgical Tech, EMT, Military medic. (Other experience used will be at the discretion of the Nursing Director. Letter from employer confirming work experience required.)	Has taken BIOH 211 A&P II w/Lab and/or Has taken BIOH 250- Microbiology w/Lab	Prior Associates Degree(s)= 1 Bachelor's or higher = 2
*See Catalog for Criteria	*Attach printout of TEAS or NACE exam results	*Attach documentation from employer	*Attach a copy of HC Transcripts	*Attach Transcripts showing the degree awarded

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PHYSICAL EXAM FORM - PART I (filled out by student) Take all 3 pages to the provider appointment

Last Nar	me	First Name	Middle Initial	
Primary	Phone	Message Phone		
Student ID Date of Birth				
Emerger	ncy Contact (Name & Phone)			
o.go.	noy contact (Hame at Hone)			
YES NO	IAL MEDICAL HISTORY: If YES,	please provide additional detail	lS.	
TES IN		ant medical illness injury or wei	ight loss in the past 12 months?	
	Are you taking any medication		git 1000 iii tilo paot 12 montilo.	
		care for continuing medical prol	blems?	
		in a hospital in the last 12 mon		
		ent that resulted in a disabling in		
	Have you ever had a fracture		. ,	
	Have you ever had a surgica	, ,		
			recurrent dizzy spells, heat exhaustion/heat	
	Do you wear eyeglasses, co	ntact lenses, dentures, or a hea	aring aid?	
	Do you have any allergies to	medications, food, or the environment	onment? (list)	
	Are you missing any organs	or other body parts?		
			, irregular heart rate, palpitations,	
	diabetes, thyroid condition, I			
		in your family? (under age 50)		
		ical exam for military service, en	nployment, insurance, or athletic	
LIEEST	competition? YLE QUESTIONS			
YES N				
120 11	Do you smoke?			
	Do you exercise regularly?			
		medication to relieve stress?		
	Do you have a problem with			
	Do you go for routine medica	al/dental checkups?		
	Have you ever gone for cand			
	Is your immediate family in g	good health?		
	Have you or a member of yo	our family ever been a victim of a	a violent crime?	
		cy room for routine medical pro		
HEALTH	INSURANCE: Private Insurance	e Medicaid Stud	dent Health Insurance	
All informa	ation on this physical examination for	m is confidential and cannot be relea	ased without a student's written consent.	
	ve information is complete and co		ge. I authorize the release of this ursing Department.	
Signatur	Signature of Student: Date:			

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STATEMENT OF FUNCTIONAL ABILITIES

To be completed by student and reviewed by healthcare provider

Helena College Nursing Department requires each student to be able to regularly perform the following activities:

- 1. Stand for long periods of time
- 2. Work at a fast pace for long periods of time
- 3. Lift heavy objects (25 pounds or more) three or more times a day
- 4. Speak clearly and distinctly
- 5. Respond appropriately to stressful situations (physically, emotionally, and mentally)
- 6. Communicate effectively with patients, patients' families, physicians, and staff
- 7. Hear vital signs with a stethoscope to assess blood pressure, heart rate, and lung, vascular, and abdominal sounds; hear the telephone
- 8. Hear the patient calling for help
- 9. Hear beepers, alarms, etc., requiring quick responses
- 10. Read very fine or small print on medication containers, and read physician's orders
- 11. See nurse call/emergency light
- 12. Visually assess the patient appropriately
- 13. Read monitors and other equipment
- 14. Demonstrate manual dexterity to don sterile gloves and gown
- 15. Demonstrate manual dexterity to prepare medications aseptically (i.e., IV, PO, and IM)
- 16. Demonstrate manual dexterity using sterile technique (i.e., insert catheters, IV, etc.)
- 17. Demonstrate the ability to utilize equipment needed to carry out patient care
- 18. Demonstrate the ability to move in small spaces in emergency situation

Your signature below indicates that you have read and understand the "Functional Abilities"	requirements
and can perform them unless otherwise indicated.	

Print Student Name		
Student Signature	Date	

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HELENA COLLEGE - DEPARTMENT OF NURSING

PHYSICAL EXAMINATION FORM - PART II (to be completed by primary health provider)

		1100 00 0011	ipiotoa by primary moditir pi	011401/
Height Weight Lab work /tests (<i>if indicate</i>	Right 20/	Left 20/	Contact lenses: Yes	No
Hgb/Hct	UA	C	Other	
Blood Pressure/_				
Significant Medical Histor	у			
Significant Family History	,			
Are there abnormalities in	n the following?			
		No De	escribe	
Head, Ear, Nose, or Throa	t			
Respiratory				
Cardiovascular				
Gastrointestinal				
Hernia				
Eyes				
Genitourinary				
Musculoskeletal				
Metabolic / Endocrine				
Neuropsychiatric				
Skin				
Allergies				
Depression screening: Y	es Score	No	_	
Is this person pregnant?	Yes No			
Do you have any recomm If yes, describe	nendations regarding	g the care o	of this student? Yes N	No
Is the student currently ur If yes, describe	nder treatment for ar	ny medical	or emotional condition? Ye	s No
Is this student physically/o	emotionally capable	of being in	the nursing program? Yes	s No
Please indicate any Restr	rictions / Precautions	s (Refer to	Statement of Functional Ab	pilities):
Physician/Provider Name	& Clinic Name		Provider Signature	Date