



# Practical Nursing (C.A.S)

CERTIFICATE OF APPLIED SCIENCE



## Student Information and Application Packet

HELENA COLLEGE UNIVERSITY OF MONTANA PRACTICAL NURSE  
CERTIFICATE OF APPLIED SCIENCE

Updated for SPRING 2025 Start

Application DUE DATE Dec 2, 2024

Revised 3/1/2024

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 PN CAS program

*The practical nurse (PN) uses specialized knowledge and skills that meet the healthcare needs of people in a variety of settings under the direction of qualified health professionals. The curriculum focuses on preparation for employment. Students learn practical nursing skills through independent study, lectures, simulation demonstrations, and practice in the skills lab. Under instructor supervision, students also provide patient care in a variety of healthcare settings. The program is approved by the Montana State Board of Nursing.*

## EDUCATIONAL PROGRAM

The PN program admits 16 students (eight in Helena and eight in Hamilton-Bitterroot College) every year. Applications are accepted each fall. PN students start classes in the spring, with completion of the CAS at the end of the fall semester.

All coursework is competency-based and is designed to prepare graduates with knowledge, skills, and attitudes to successfully enter the workforce after graduation.

This is a limited enrollment program. Student cohort size is limited by the availability of lab and clinical space. Because of this, the application process is competitive and program applicants are accepted based on criteria found in this packet. **Should the number of qualified applicants exceed the available spaces, not all qualified applicants will be accepted.**

In the PN program, all didactic courses are taught in a **Virtual-Blended format (VB)** by Helena College Nursing Faculty. Exams and standardized tests, skills labs, and clinical experiences will occur face-to-face in the student's home community (Helena-Helena College or Hamilton-Bitterroot College).

### Practical Nurse CAS Virtual Blended Remote program

In this VB remote delivery method, most of the didactic course instruction will be done in a virtual synchronous mode (**occurs at the same time**) via the internet platform TEAMS. There will be some online asynchronous assignments and coursework, which the student can complete on their schedule.

The face-to-face component of the course, when students **MUST** be on campus (Helena College or Bitterroot College), is used for specific testing and skills labs.

**Students commit to a full week of Class, Lab, or Clinical work each week.** This program, while very exciting, is extremely fast-paced and challenging. There are many reading assignments, quizzes, and written assignments each week. These must be completed outside of class time. Students need to make sure they can dedicate enough time to be successful. A good rule of thumb is that for every class hour, at least 3 hours in

preparation or the completion of assignments will be needed. Furthermore, learning in an online environment requires the student to be self-motivated, resilient, and quickly adaptable to learning new technology.

## PROGRAM EXPENSES

The PN students will be required to purchase textbooks, software resources, personal equipment, supplies, and uniforms, pay 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. Accepted students must complete a background check prior to the start of the program. Background checks are done at the student's expense, through Castlebranch (information will be sent upon acceptance). The cost of the background check is \$67.00. 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 nursing program application and be in good academic standing with the institution. Therefore, no applications will be reviewed unless the applicant applies first to the college and the official transcripts are reviewed by the Registrar.

Acceptance to Helena College requires a completed admissions application file. An application to the college may be obtained by visiting the campus, calling the college (406) 447-6900, or applying online at

[https://helenacollege.edu/admissions\\_enrollment/default.aspx](https://helenacollege.edu/admissions_enrollment/default.aspx)

All transfer work has to be from a regionally accredited institution and official transcripts are required to be on file with Helena College's Registrar Office.

## ELIGIBILITY FOR ADMISSION INTO THE PRACTICAL NURSE-CAS PROGRAM

**All application forms and documents are enclosed in the application packet.**

Admission to the Helena College PN CAS program is competitive. **Meeting eligibility requirements does not guarantee admission.**

To be eligible to apply for admission into the Practical Nurse CAS Program, applicants must have the following:

- Evidence of admission to Helena College, a completed admissions file, and being in good academic standing.
- Completed all prerequisite coursework with a "C" grade or higher, and a minimum overall prerequisite GPA of 2.50. Prerequisite coursework can be taken at other institutions, but it is the applicant's responsibility to confirm those 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.**
- Only students in good academic standing will be eligible for program acceptance.
- Taken the TEAS and received a 65 or higher. (Sign up and pay at the cashier's office)
- Total calculated points 45 or higher (see application scoring)
- All requirements, including immunization records, CPR certifications and others as stated on the application.

The PN applications are **DUE by 5:00 pm Dec. 2, 2024**. Completed program application packets may be hand delivered to the Nursing Department in Helena College, mailed directly to the college, or submitted online.

**Late applications will not be accepted.**

Please send all application items as a completed packet. Items sent separately and at random are easily lost or misfiled. Incomplete applications may result in disqualification. We are not responsible for any late, lost, or missing information.

<p><b>CONTACT INFORMATION</b></p> <p>Program Assistant Nursing Department Room 112 406.447.6985</p>	<p><b>MAILING ADDRESS</b></p> <p>Helena College University of Montana Attention: PN-CAS Nursing Program 1115 N Roberts Helena, MT 59601</p>	<p><b>SUBMIT ONLINE</b></p> <p>Completed Applications may be submitted by the due date and time to: <a href="mailto:nursingapplications@helenacollege.edu">nursingapplications@helenacollege.edu</a></p>
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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; thus, there can be no exceptions.

Helena College PN CAS Program does not maintain a waiting list. Applicants must reapply each fall.

## NOTIFICATION OF ACCEPTANCE

Students will be notified of acceptance into the program via the email listed on the application. Accepted students must notify 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 address.** Accepted students should plan on attending the mandatory nursing orientation, and students new to Helena College will be required to register for and attend the school's orientation as well.

Helena College Nursing is required to comply with the vaccination policies and requirements of our clinical partners for all students doing clinicals. A complete list of vaccinations and certifications can be found on the application on page 7. **Proof of these vaccinations and certifications needs to be completed and submitted along with your application to the PN program.**

Helena College Nursing is not able to 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 facility guidelines.** 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 cleared a background check before students are permitted in the clinical setting. To meet these requirements, the program **requires that the background check be done prior to starting the program.**

- Background checks are done at the student's expense through Castlebranch. 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 programs.
- Students are required to go to [castlebranch.com](https://castlebranch.com) to create an account for background checks. More information will be sent after acceptance into the program. **Do not do this before being accepted into the program.**

### **EQUAL OPPORTUNITY POLICY**

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

# Practical Nursing Curriculum

## PREREQUISITE COURSEWORK

The following courses must be completed prior to admission into the Practical 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 2.50. Grades in prerequisite courses are a major factor in ranking applications for program acceptance. Applicants may retake two courses (one retake each) for a higher grade.

**Maximum of 2 prerequisite retakes allowed.** The most recent verifiable grade will be used for scoring. (We use the retake grade...even if it is lower)

Students may substitute M121-College Algebra for M120-Math for Allied Health and **both** BIOH 201 A&P I /BIOH 211 A&P II for BIOH 104.

Pre-requisites 13 credits		
Course #	Course Name	Credits
BIOH 104	Basic Human Biology w/Lab	4
PSYX 100	Introduction to Psychology	3
M120	Math with Healthcare Apps	3
WRIT 101	College Writing I	3

## PN PROGRAM COURSEWORK AFTER FORMAL ACCEPTANCE

Once enrolled in the Practical Nursing program, a minimum of a C (Not C-) in all courses is required to continue in the program. Students must achieve a grade of 78% or higher in all courses (didactic and clinical) to successfully pass and progress to the next semester. Additionally, students must maintain a 78% average on course exams, in order to successfully pass the course.

The courses for the program are required and must be completed in the following sequence:

Semester 1 Spring 14 credits			
Course #	Course Name	Credits	Location
NRSG130	Fundamentals of Nursing	3	Remote/Online
NRSG 131	Fundamentals of Nursing Lab	3	Bitterroot or Helena
NRSG 135	Nursing Pharmacology	3	Remote/Online
NRSG 136	Nursing Pharmacology Lab	1	Bitterroot or Helena

NRSG 152	Gerontology and Community Nursing	2	Remote/Online
NRSG 153	Gerontology/ Community Nursing Clinical	2	Bitterroot or Helena
<b>Semester 2 Fall 13 credits</b>			
<b>Course #</b>	<b>Course Name</b>	<b>Credits</b>	<b>Location</b>
NRSG 140	Adult Health Nursing	4	Remote/Online
NRSG 141	Adult Health Nursing Clinical	2	Bitterroot or Helena
NRSG 142	Nursing Care of Women and Children	3	Remote/Online
NRSG 143	Nursing Care of Women/Children Clinical	1	Bitterroot or Helena
NRSG 148	Leadership Issues for Practical Nurses	2	Remote/Online
NRSG 149	Leadership Issues for PN Clinical	1	Bitterroot or Helena
<b>Total PN Program Credits 40</b>			



The following pages are to be completed and submitted as your application. Please retain pages 1-5 for your records and submit pages 7-14 as the application.

#### APPLICATION DEADLINES

Applications for admission to Spring 2025 are Due by 5:00 pm on December 2, 2024.

Turn completed applications into the Nursing Office or mail them to Attention: Nursing Department, 1115 North Roberts Street, Helena, MT 59601. Questions? Call 406-447-6985. Applications are also accepted by email at: [nursingapplications@helenacollege.edu](mailto:nursingapplications@helenacollege.edu).



PRACTICAL NURSING-CAS APPLICATION

APPLICANT INFORMATION

Full Name: \_\_\_\_\_

*Last*

*First*

*M.I.*

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

*Mailing Address*

*Apartment/Unit #*

*City*

*State*

*ZIP Code*

Cell Phone: ( ) \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

Helena Student ID: \_\_\_\_\_ Email: \_\_\_\_\_

Have you ever attended an LPN or RN program? ☐ Yes ☐ No If yes, where \_\_\_\_\_ - \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

Have you **retaken** any of the prerequisites? ☐ Yes ☐ No

If yes, which ones and when? \_\_\_\_\_

- **Max of 2 prerequisite retakes allowed.**
- For applicants who have retaken a prerequisite course, the most recent verifiable grade will be used for scoring/GPA calculations.

Application Requirements

The items listed below are **required and must be submitted with your application** for you to be considered for program entry.

**Checklist:**

\_\_\_ Initial Admission to Helena College – letter of acceptance, or student number on unofficial transcripts

\_\_\_ All transfer courses are officially evaluated and accepted prior to application deadline

\_\_\_ Completion of pre-requisite coursework with proof of grades (include an unofficial copy of transcripts)

\_\_\_ Copy of TEAS Test results

\_\_\_ Physical Form I and II completed within last 3 months

\_\_\_ Immunization Records:

\_\_\_ Childhood immunizations (Polio, DPT, MMR)

\_\_\_ Hepatitis A

\_\_\_ Hepatitis B (series of 3)

\_\_\_ Current Flu shot or signed declination

\_\_\_ Documentation of COVID-19 (initial vaccination and any boosters) or signed declination form

- \_\_\_ Negative TB skin tests (two-step at least one week apart). Negative QuantiFERON TB gold or  
negative chest x-ray indicating no active disease also accepted
- \_\_\_ Varicella vaccination or titer.
- \_\_\_ Current CPR card: BCLS with AED for Healthcare providers

## APPLICATION CRITERIA WORKSHEET

Please fill in the chart below **to the best of your knowledge** and submit proof of grades with the application. If you are currently taking a required pre-requisite course and will not receive a grade in that course before the application deadline, please indicate your "current" status in the chart below. As soon as your final grade becomes available, submit proof of final grade to the Nursing Department to be attached with your application.

Points and GPAs will be calculated by the Program Director and grade points will be calculated using the current catalog criteria which includes +/- weighing. Multiply grade by Credits = **calculations**. Divide by 13 = GPA

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

Pre-Requisite Course		Currently Taking	Grade	Credits	Calculations	*Points Possible
BIOH 104 Basic Human Biology w/ Lab				4		
M120 Math for Allied Health				3		
PSYX 100 Introduction to Psychology				3		
WRIT 101 College Writing				3		
		Total Calculation score				
		Prerequisite <b>GPA</b> : Divide total calculation score by 13:				
		Prerequisite <b>GPA points</b> earned*: (see table below)				20-50
<b>TEAS SCORE:</b>		<b>TEAS points</b> earned*: (see table below)				10-30
<b>Other points (See table below):</b> <ul style="list-style-type: none"><li><b>Work experience (+1)</b></li><li><b>HC/BC prereqs or COLS 101 (+1)</b></li><li><b>Academic degree (up to +2)</b></li></ul>						1-4
For total score add GPA points, TEAS points and other points.						
In case of a tie, we will consider the following criteria: <b>First:</b> Grade in BIOH 104, <b>Second:</b> Grade in Math 120, <b>Third:</b> Veteran service with proof						45 Min. to apply
					Total score	

### APPLICATION POINTS\*

**Selection into this nursing program is competitive.** To assure you receive credit for all of your points we strongly recommend that you have ALL documentation to the nursing department 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 to the Nursing program.

Prerequisite GPA: 10-60 points	ATI TEAS Exam: 10-30 points	Work Experience (min 1 year): 1 point for this column	Taken at least 3 prerequisites from HC/BC: 1 point	Academic Degree: 1-2 points
3.75—4.00 50 3.50—3.74 45 3.25—3.49 40 3.00—3.24 35 2.75—2.99 30 2.50—2.74 20	85—100% 30 80—84% 25 75—79% 20 70—74% 15 65—69% 10  *Provide printout of TEAS exam results	<ul style="list-style-type: none"> <li>• CNA</li> <li>• Med Tech</li> <li>• CMA, Surgical Tech, EMT, Military medic.</li> </ul> (Any other experience used will be at the discretion of the nursing program director.)  *Provide documentation with nursing application	Taken at least 3 prerequisites from Helena College or Bitterroot College: OR Taken COLS101  *Transcripts	Associates= 1  Bachelor's or /higher = 2  *Provide a copy of transcripts showing the degree awarded with nursing application



## DESIGNATED SITE REQUEST

I, \_\_\_\_\_, wish to be considered for admission to Helena College Nursing Program (PN-CAS) for Spring Semester 20\_\_ at the following location:

Choose one:

\_\_\_\_\_ Helena College, Helena Clinical locations

\_\_\_\_\_ Bitterroot College, Hamilton, and area Clinical locations

I understand that all didactic classes are online and that I will attend clinicals and onsite labs/exams at my assigned campus.

Name: \_\_\_\_\_

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

City, State, & Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

PHYSICAL EXAMINATION FORM PART I (TO BE FILLED OUT BY STUDENT)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
 Primary Phone \_\_\_\_\_ Message Phone \_\_\_\_\_  
 Student ID \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Emergency Contact (Name and phone): \_\_\_\_\_

PERSONAL MEDICAL HISTORY: If your response to any of the following is YES, please provide additional details.

Yes	No	
		Has there been any significant medical illness, injury, weight loss in the past 12 months
		Are you taking any medication? If yes, please list:
		Are you under a physician's care for continuing medical problems
		Have you been an in-patient in a hospital in the last 12 months
		Have you ever had an accident resulting in a disabling injury
		Have you ever had a fractured bone (list and date)
		Have you ever had a surgical operation (list and date)
		Any history of a concussion, blackout, fainting, convulsion, recurrent dizzy spells, heat exhaustion/heat stroke
		Do you wear eyeglasses, contact lenses, dentures, or a hearing aid
		Do you have any allergies to medications, food, or the environment (list)
		Are you missing any organs or other body parts
		Do you have a history of high blood pressure, heart disease, irregular heart rate, palpitations, diabetes, thyroid condition, liver or kidney problems
		Any history of sudden death in your family (under age 50)
		Have you ever failed a physical exam for military service, employment, insurance, or athletic competition

LIFESTYLE QUESTIONS

YES	NO	
		Do you smoke
		Do you exercise regularly
		Do you drink alcohol or take medication to relieve stress
		Do you have a problem with your weight
		Do you go for routine medical/dental checkups
		Have you ever gone for cancer screening
		Is your immediate family in good health
		Have you or a member of your family ever been a victim of a violent crime
		Have you used the emergency room for routine medical problems

Health Insurance: Private Insurance \_\_\_\_\_ Medicaid \_\_\_\_\_ Student Health Insurance \_\_\_\_\_

ALL INFORMATION ON THIS PHYSICAL EXAMINATION FORM IS CONFIDENTIAL AND CANNOT BE RELEASED WITHOUT A STUDENT'S WRITTEN CONSENT.

The above information is complete and correct to the best of my knowledge. I authorize the release of this information and the results of this examination to Helena College Nursing Department.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

## STATEMENT of FUNCTIONAL ABILITIES

HC 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, patient's 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, 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 needles, etc.)
17. Demonstrate the ability to utilize equipment needed to carryout patient care
18. Demonstrate the ability to move in small spaces in an emergency situation

If you are unable to perform any of these activities, *please circle the number of the ones which you cannot perform.*

**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:** \_\_\_\_\_



**HELENA COLLEGE – DEPARTMENT OF NURSING EDUCATION**

**PHYSICAL EXAMINATION FORM PART II (TO BE COMPLETED BY PRIMARY HEALTH PROVIDER)**

Height ____/____ Vision: Glasses: Yes ____ No ____ Contact lenses: Yes ____ No ____	
Right 20/____ Left 20/ ____	
Weigh ____ lbs. Blood Pressure _____ Pulse ____ Resp. ____	
Lab work /tests (if indicated by Health Provider):	
HB/HCT _____	UA _____ Other _____
For students over 50 years of age: EKG _____	

Significant Medical History

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Significant Family History

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Are there abnormalities in the following?

	Yes	No	Describe
Head, Ear, Nose, or Throat			
Respiratory			
Cardiovascular			
Gastrointestinal			
Hernia			
Eyes			
Genitourinary			
Musculoskeletal			
Metabolic / Endocrine			
Neuropsychiatric			
Skin			
Allergies			

Depression screening: Yes \_\_\_\_ Score \_\_\_\_ No \_\_\_\_

Is this person pregnant: Yes \_\_\_\_ No \_\_\_\_

Is the student currently under treatment for any medical or emotional condition? Yes \_\_\_\_ No \_\_\_\_  
If yes, describe \_\_\_\_\_

Is this student physically / emotionally capable of being in the nursing program? Yes \_\_\_\_ No \_\_\_\_  
Please indicate any **Restrictions / Precautions** (Refer to Statement of Functional Abilities)

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\_\_\_\_\_  
Physician/Provider Signature / Clinic Name

\_\_\_\_\_  
Date