Applications are subject to change 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 health care needs of people in a variety of settings under the direction of qualified health professions. 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 health care 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 November. 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 course work, which the student can complete on their schedule.

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

Students commit to a full week of Class 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 in the completion of assignments will be needed. Furthermore, learning in an online environment requires the student be self-motivated, resilient, and quickly adaptable to learning new technology.

PROGRAM EXPENSES

The PN students will be required to purchase textbooks, ATI resources, personal equipment, supplies, and uniforms, pay fees, and pay for transportation to clinical sites. If needed, students should begin planning early for financial aid to meet their educational needs. Students will need a reliable computer with camera and microphone, and access to reliable high-speed internet.
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

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 eligibility 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 be 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 Registrar’s Office. Attach 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 40 or higher (see application scoring)
- All requirements stated on the application.

The PN applications are DUE by 5:00 pm Dec. 2, 2022. Completed program application packets may be hand delivered or dropped through our mail slot, at 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.
<table>
<thead>
<tr>
<th>CONTACT INFORMATION</th>
<th>MAILING ADDRESS</th>
<th>SUBMIT ONLINE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Assistant</td>
<td>Helena College University of Montana</td>
<td>Completed Applications may be submitted by the due date and time to:</td>
</tr>
<tr>
<td>Nursing Department</td>
<td>Attention: PN-CAS</td>
<td><a href="mailto:nursingapplications@helenacollege.edu">nursingapplications@helenacollege.edu</a></td>
</tr>
<tr>
<td>Room 107</td>
<td>Nursing Program</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1115 N Roberts</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Helena, MT 59601</td>
<td></td>
</tr>
</tbody>
</table>

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 November.

NOTIFICATION OF ACCEPTANCE

Students will be notified of acceptance into the program via email and written letter. Accepted students must notify the nursing department of their intent to accept their admission, by the date indicated on the acceptance notification letter.

Accepted students will be required to provide proof of CPR certification, background check (information provided in letter of acceptance), current negative tuberculosis test and flu shot, before the beginning of the semester. Flu shots are required yearly and CPR must be current. Covid19 vaccine is highly recommended. Helena College Nursing follows the vaccination policies and requirements of our clinical partners.

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 are in compliance 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 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 nor re-entry at a particular time.

Accepted students should plan on attending the mandatory nursing global orientation, and students new to Helena College will be required to register for and attend the school’s orientation as well.

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 they will permit the students in the clinical setting. To meet these requirements, the program requires that the check be done prior to starting the program.
• Background checks are done at the student’s expense. 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 our program.

Equal Opportunity Policy

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.

Students may substitute College Algebra for Math for Allied Health and both A&P I /A&P II for BIOH 104.

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIOH 104</td>
<td>Basic Human Biology w/Lab</td>
<td>4</td>
</tr>
<tr>
<td>PSYX 100</td>
<td>Introduction to Psychology</td>
<td>3</td>
</tr>
<tr>
<td>M120</td>
<td>Math with Healthcare Apps</td>
<td>3</td>
</tr>
<tr>
<td>WRIT 101</td>
<td>College Writing I</td>
<td>3</td>
</tr>
</tbody>
</table>

Pre-requisites 13 credits

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.

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

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Name</th>
<th>Credits</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>NRSG130</td>
<td>Fundamentals of Nursing</td>
<td>3</td>
<td>Remote/Online</td>
</tr>
<tr>
<td>NRSG 131</td>
<td>Fundamentals of Nursing Lab</td>
<td>3</td>
<td>Bitterroot or Helena</td>
</tr>
<tr>
<td>NRSG 135</td>
<td>Nursing Pharmacology</td>
<td>3</td>
<td>Remote/Online</td>
</tr>
<tr>
<td>NRSG 136</td>
<td>Nursing Pharmacology Lab</td>
<td>1</td>
<td>Bitterroot or Helena</td>
</tr>
<tr>
<td>NRSG 152</td>
<td>Gerontology and Community Nursing</td>
<td>2</td>
<td>Remote/Online</td>
</tr>
<tr>
<td>NRSG 153</td>
<td>Gerontology and Community Nursing Clinical</td>
<td>2</td>
<td>Bitterroot or Helena</td>
</tr>
</tbody>
</table>

Semester 1 14 credits

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Name</th>
<th>Credits</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>NRSG 140</td>
<td>Adult Health Nursing</td>
<td>4</td>
<td>Remote/Online</td>
</tr>
<tr>
<td>NRSG 141</td>
<td>Adult Health Nursing Clinical</td>
<td>2</td>
<td>Bitterroot or Helena</td>
</tr>
<tr>
<td>NRSG 142</td>
<td>Nursing Care of Women and Children</td>
<td>3</td>
<td>Remote/Online</td>
</tr>
<tr>
<td>NRSG 143</td>
<td>Nursing Care of Women and Children Clinical</td>
<td>1</td>
<td>Bitterroot or Helena</td>
</tr>
<tr>
<td>NRSG 148</td>
<td>Leadership Issues for Practical Nurses</td>
<td>2</td>
<td>Remote/Online</td>
</tr>
<tr>
<td>NRSG 149</td>
<td>Leadership Issues for Practical Nurses Clinical</td>
<td>1</td>
<td>Bitterroot or Helena</td>
</tr>
</tbody>
</table>

Semester 2 13 credits

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Name</th>
<th>Credits</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total PN Program Credits 40</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Page intentionally left blank
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 taken any of the prerequisites more than twice? □ Yes  □ No

If yes, which ones and when?  ____________________________

• Max of 2 prerequisite retakes allowed.
• For applicants who have taken courses more than once, 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. Applications missing any of the items listed below will be declined.

• Initial Admission to Helena College – letter of acceptance, or student number on unofficial transcripts
• All transfer courses officially evaluated and accepted prior to application deadline
• Completion of pre-requisite coursework with proof of grades (copy of transcripts)
• Copy of TEAS Test
• Physical Form I and II completed within last 3 months
• Immunization Records: Childhood immunizations (Polio, DPT, MMR); Hep A; Hep B (series of 3); current Flu shot (seasonal), recent negative TB skin test or x-ray, Varicella vaccination or titer.
• Flu is required to be completed each fall. COVID19 is strongly recommended.

APPLICATION DEADLINES

Applications to the Licensed Practical Nursing Program are accepted once per year.

To be considered for admission beginning Spring Semester applications are Due by 5:00pm on the first Friday of December.

Turn completed applications in to Nursing Office or mail 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.
APPLICATION CRITERIA WORKSHEET

Please fill in the chart below to the best of your knowledge and submit proof of grades with 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 “current” status in the chart below. As soon as your final grade becomes available, submit proof of final grade to 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.

\[
\begin{align*}
(A) &= 4 \\
(A-) &= 3.7 \\
(B+) &= 3.3 \\
(B) &= 3 \\
(B-) &= 2.7 \\
(C+) &= 2.3 \\
(C) &= 2
\end{align*}
\]

<table>
<thead>
<tr>
<th>Pre-Requisite Course</th>
<th>Currently Taking</th>
<th>Grade</th>
<th>Credits</th>
<th>Calculations</th>
<th>*Points Possible</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIOH 104 Basic Human Biology w/ Lab</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M120 Math for Allied Health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PSYX 100 Introduction to Psychology</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WRIT 101 College Writing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Calculation score

Prerequisite GPA: Divide total calculation score by 13:

Prerequisite GPA points earned*: (see table below) 20-50

TEAS SCORE:

TEAS points earned*: (see table below) 10-30

Other points:
- Work experience (+1)
- HC/BC prereqs or COLS 101 (+1)
- Academic degree (up to +2) 1-4

For total score add GPA points, TEAS points and other points.

In case of a tie, we will consider the following criteria: First: Grade in BIOH 104, Second: Grade in Math 120, Third: Veteran service with proof

Min 40 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 40. The reason for this is to help ensure student success in both didactic testing and the NCLEX-PN exam required for licensure.

<table>
<thead>
<tr>
<th>Prerequisite GPA: 10-60 points</th>
<th>ATI TEAS Exam: 10-30 points</th>
<th>Work Experience (min 1 year): 1 point for this column</th>
<th>Taken at least 3 prerequisites from HC: 1 point</th>
<th>Academic Degree: 1-2 points</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.75—4.00</td>
<td>85—100%</td>
<td>• CNA</td>
<td>Taken at least 3 prerequisites from Helena College or Bitterroot College: OR Taken COLS101 <em>Transcripts</em></td>
<td></td>
</tr>
<tr>
<td>3.50—3.74</td>
<td>80—84%</td>
<td>• Med Tech</td>
<td></td>
<td>Associates = 1 Bachelors or /higher = 2</td>
</tr>
<tr>
<td>3.25—3.49</td>
<td>75—79%</td>
<td>• MA, Surgical Tech, EMT, Military medic. (Any other experience used will be at the discretion of the nursing program director.)</td>
<td></td>
<td>*Provide documentation with nursing application</td>
</tr>
<tr>
<td>3.00—3.24</td>
<td>70—74%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.75—2.99</td>
<td>65—69%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.50—2.74</td>
<td>20</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Provide printout of TEAS exam results

*Provide documentation with nursing application

*Transcripts
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: ________________
Page left blank intentionally
HELENA COLLEGE – DEPARTMENT OF NURSING EDUCATION
PHYSICAL EXAMINATION FORM PART I (TO BE FILLED OUT BY STUDENT)

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Primary Phone</th>
<th>Message Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student ID</th>
<th>Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Emergency Contact:</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- 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 causing 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

LIFE STYLE QUESTIONS

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- 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 results of this examination to Helena College Nursing Department.

Signature of Student __________________________ Date____________________

PAGE 12
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, patients’ families, physicians and staff
7. Hear vital signs with 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 carry out patient care
18. Demonstrate the ability to move in small spaces in emergency situation

If you are unable to perform any of these activities please circle the number of the ones which you cannot perform. The Nursing Admission Committee will review and consult with you.

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)

Significant Medical History
_____________________________________________________________________________________________
________________________________________________________________________________________
_____________________________________________________________________________________________

Significant Family History
____________________________________________________________________________
_____________________________________________________________________________________________

Are there abnormalities in the following?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Describe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head, Ear, Nose, or Throat</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Respiratory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardiovascular</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gastrointestinal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hernia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eyes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Genitourinary</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Musculoskeletal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Metabolic / Endocrine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neuropsychiatric</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skin</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Allergies</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 to be in the nursing program? Yes ____ No ____

Please indicate any Restrictions / Precautions (Refer to Statement of Functional Abilities)

________________________________________________________________________________________

________________________________________________________________________________________

Height ___/____ Vision: Glasses: Yes ____ No ____  Contact lenses: Yes ____ No ____

Right 20/____  Left 20/____

Weigh ___ lbs  Blood Pressure _____________ Pulse ___ Resp ___

Lab work (if indicated by Health Provider):

HB/HCT _______________ UA ___________ Other _________________

Recommended for students over 40 years of age: EKG ______________________________

Height ____ lbs  Blood Pressure _____________ Pulse ____ Resp ___

Lab work (if indicated by Health Provider):

HB/HCT _______________ UA ___________ Other _________________

Recommended for students over 40 years of age: EKG ______________________________

Physician/Provider Signature / Clinic ___________________________ Date ________________

Height ____ Vision: Glasses: Yes ____ No ____  Contact lenses: Yes ____ No ____

Right 20/____  Left 20/____

Weigh ____ lbs  Blood Pressure _____________ Pulse ___ Resp ___

Lab work (if indicated by Health Provider):

HB/HCT _______________ UA ___________ Other _________________

Recommended for students over 40 years of age: EKG ______________________________