



Spoon River College Associate Degree Nursing With Practical Nursing Exit Option

APPLICATION - NURSING PROGRAM

STEP ONE **This section is to be completed with SRC Advisor:**

- SRC Application.
- Official copy of high school transcript or GED test scores (directly from high school to SRC).
- Official copies of all college transcripts (directly from college(s) to SRC).
- Complete Request for Evaluation of College Transcript form.
- Complete COMPASS test.
- Prerequisite Biology – Must meet the prerequisites for BIO 200 and BIO 206 – High School Biology within the past five years, or BIO 105, BIO 101, or BIO 155 with a grade of “C” or better. Student able to apply to Nursing Program if registered or completed by end of Summer Semester.
- Must have completed all first year required general education courses (BIO 200, BIO 201, ENG 101 and PSY 130) with grades of ‘C’ or better. (*advanced standing students only*)
- Must have a minimum 2.0 CGPA in required program coursework (*advanced standing students, re-entry and transfer students only*).

STEP TWO **When above section is complete, student registers to take Pre-entrance test.** These tests are given in a group setting and you can register on our website, src.edu and on the home page click on Pre-Entrance Testing. Or it can be done on a walk-in basis from 8:00 a.m. to 1:00 p.m. Monday thru Friday in the Student Services Department at all four campus locations of Canton, Havana, Macomb and Rushville.

- Pre-entrance nursing exam (ATI-TEAS V **minimal percent score: Overall 58.7**. Arrangements for this test should be made through the Department of Nursing Office Assistant, Sherry Nelson, at (309) 649-6227 or on SRC on-line.
- NLN-ACE I pre-entrance exam (National League of Nursing Acceleration Challenge Exam I with a **minimal 75 decision score percentage** (*advanced standing students only*). Arrangements for this test should be made through the Department of Nursing Office Assistant, Sherry Nelson, at (309) 649-6227 or on SRC on-line.

STEP THREE **Once you have completed Step One and passed the Pre-Entrance test (Step Two), complete the Nursing Application (page 2) and send to Spoon River College Nursing Department, Office Assistant, 23235 N. County 22, Canton, IL 61520. Your application will be evaluated and ranked for admission into the program. You will receive either an Acceptance or Denial letter.**

Application Evaluation Process

First round applications evaluated – February 1st (applications must be received by January 31st). Evaluation of other round applications will occur on the first day of the next month with applications being received by the last day of the previous month.

Applications are **not** held from year to year. Applicants, who are not eligible or not admitted, must reapply and go through the entire admissions process again.

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Directions: Complete all blanks. Print legibly.

1st year Applicant _____ **Advance Standing Applicant (PN to RN)** _____

Complete legal name: _____
Last First Middle Initial

SRC ID or last 4 of SSN: _____ **DOB** _____

Current mailing address: _____
Number, Street, Apt. #, or P.O. Box #, City, State, Zip Code

Telephone: Day: () _____ Alternative: () _____

E-mail address: _____

Desired Campus? _____ Canton _____ Macomb

**Required information for federal/state statistical reporting on the annual nursing report:*

***Gender:**

- Male
 Female

***Ethnic origin:**

- Asian Pacific Islander
 African American
 Caucasian
 Indian American/Alaskan
 Hispanic American
 Non-resident Alien
 Other

LPN'S (advanced standing only):

LPN license (State) _____ (Number) _____ (Attach current copy to this application.)

Official transcripts from high school, GED, and/or any other colleges must be sent directly from the schools to Spoon River College, Department of Nursing, 23235 N. County 22, Canton, IL 61520.

I certify with my signature below, that the information provided on this application is accurate. I understand that withholding of information or giving false information will result in a denial of my application by the Spoon River College Nursing Department.

Applicant's Signature: _____ **Date:** _____