STUDENT APPLICATION AND SELECTION

Student Registration

1. Applicants are to submit the form showing the testing dates and the $50.00 non-refundable application fee.

2. All applicants must take the pre-entrance test. The applicant must receive a passing score on the pre-entrance examination. **TESTING WILL BE DONE BY ON-LINE COMPUTER ONLY!!!!**

Application Process

**Step 1.** Once the applicant has passed the test, the applicant will fill out an application. An official high school transcript or GED diploma and/or scores must than be submitted to the Practical Nursing Office. (If a GED was obtained from an out of state institution or outside the United States, it is necessary to apply for a Secondary Education Credential. (there will be a fee to obtain your GED transcripts from out of state). Transcripts from any other educational program attended must be submitted.

**Step 2.** Two (2) employer references must be submitted on the forms given to the applicant by the Nursing Program. References are **not** to be written by family or friends. They should be from teachers, employers, past employers, etc.

**Step 3.** When the necessary information is received by the Practical Nursing Program (Application, Transcripts and References), the applicant will be contacted so that an interview can be scheduled with the coordinator of the program.

Enrollment Process

1. Applicants:
   …must be certified in Basic Life Support (CPR)
   …must have satisfactory references
   …must be in good physical condition as determined by a physical examination, laboratory test results, and titres
   …must obtain a clear drug screen
   …must have basic computer skills (required)
   …Criminal Background check, Child Abuse clearance, and FBI Fingerprinting. Do not obtain the Criminal Background check and Child Abuse Clearances on your own.
   …will not be discriminated against because of creed, ethnic origin, race, sex or handicap.

2. Acceptance is tentative until the results of a physical exam, lab tests, drug screen, and clearances are submitted and meet requirements. The physical exam must be signed by a physician, PA or CRNP. In cases of special health problems, additional information regarding the status of the applicant's health may be requested. If the results of the physical would not permit the applicant to practice nursing, the acceptance may be withdrawn.

3. Applicants must be certified in either Basic Life Support (for Health Care Professionals) by the American Heart Association or Basic Life Support for the professional rescuer by the American Red Cross (Health Care Provider). Certification must be kept current throughout enrollment in the Practical Nursing Program.

4. Selection of the applicant is made by the Practical Nursing faculty. Students are informed of their status in writing.

5. The number of applicants is determined by availability of educational and clinical resources.
APPLICATION FOR ADMISSION TO NURSING PROGRAM

Full-Time January ____
Full-Time August____
Part-Time January____

NAME_______________________________________________________________

Last First Middle Maiden

Any other name you have used in which information may be received_____________________________________________________________

ADDRESS____________________________________________________________________________________

Number Street Apt.#

City State Zip Code County

TELEPHONE NUMBER_____________________

Home Cell E-mail address

SOCIAL SECURITY # ___________________________

Are you authorized to work in the U.S.? Yes _____ No _____

ACADEMIC BACKGROUND:

HIGH SCHOOL ATTENDED:

GRADUATED: Yes _____ No _____ IF NOT, NUMBER OF YEARS ATTENDED ________

G.E.D. CERTIFICATE: Yes _____ ISSUING STATE OF GED CERTIFICATE ________________________

OTHER EDUCATIONAL INSTITUTIONS OR PROGRAMS ATTENDED Date Graduated Degree

________________________________________ __________________________

________________________________________ __________________________

________________________________________ __________________________

The Central Pennsylvania Institute of Science and Technology is an equal opportunity education institution and will not discriminate on the basis of race, color, national origin, sex, handicap, age or religion in its activities, programs, or employment practices as required by Title VI, Title IX and Section 504. For information regarding civil rights or grievance procedures and services, activities and facilities that are accessible to and usable by handicapped persons, contact Mrs. MaryAnn E. Volders, Director of Secondary Education, Central Pennsylvania Institute of Science and Technology, 540 North Harrison Road, Pleasant Gap, PA 16823, (814) 359-2793.
LIST VOLUNTEER WORK OR COMMUNITY AGENCY PARTICIPATION YOU HAVE EXPERIENCED:

Type of work, Name of Agency or experience, How long

LIST ALL EMPLOYMENT YOU HAVE HAD (FULL OR PART TIME) (Begin with the most current employer)

Name

Address

Name

Address

Name

Address

ACT 33 and ACT 34 COMPLIANCE (Background Checks of Prospective Applicants)
Each Pennsylvania resident must submit prior to acceptance, a copy of their Criminal Record Check from the Pennsylvania State Police or a statement from the State Police Central Repository stating that their record contains no information relating to that person and a Pennsylvania Child Abuse History Clearance from the Department of Public Welfare. These two clearances will be applied for by the PN Program. Each Applicant must obtain his or her FBI Fingerprinting.

PLEASE READ:
"The Board" (meaning State Board of Nursing) "shall not issue a license or certificate to an applicant who has been convicted of a felonious act prohibited by the act of April 14, 1972 (P.L.233, No.64), know as "The Controlled Substance, Drug, Device and Cosmetic Act," or convicted of a felony related to a controlled substance in a court of law of the United States or any other state, territory or country unless:

(1) at least ten (10) years have elapsed from the date of conviction;
(2) the applicant satisfactorily demonstrates to the board that he/she has made significant progress in personal rehabilitation since the conviction such that licensure of the applicant should not be expected to create a substantial risk of harm to the health and safety of patients or the public or a substantial risk of further criminal violations; and
(3) the applicant otherwise satisfies the qualifications contained in, or authorized by, this act.

As used in this section the term "convicted" shall include a judgment, an admission of guilt or a plea of nolo contendere. An applicant's statement on the application declaring the absence of a conviction shall be deemed satisfactory evidence of the absence of a conviction, unless the board has some evidence to the contrary.

(No. 1985-110 Section 5)
I have read and understand the information regarding a felony involving a controlled substance and nursing licensure.

SIGNATURE OF APPLICANT

_________________________________________________________ DATE________________
Applicants may apply online for financial aid. The website is www.studentloans.gov. Look for the “FaFsa” in the drop-down area. The FAFSA will automatically trigger the Federal Pell Grant application. There is no financial obligation in filing for FAFSA.

One year Practical Nursing programs are NOT eligible for the Pennsylvania State Grant programs. Please ignore the letter from AES, you will receive regarding ineligibility for State Grants.

The FAFSA cannot be filled out until AFTER you have filed your income taxes. Financial Aid is based on the previous year tax information. Once your FAFSA is complete you must select a lender and file a Master Promissory Note, which is the actual loan document. If you have any questions or do not have access to a computer, please contact the Adult Financial Aid Officer at 814-359-2793.

*** CPI’s school code for the FAFSA is 015445 ***

ITEMIZED COSTS FOR 2013

**Student Costs**

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition*</td>
<td>$13,480</td>
</tr>
</tbody>
</table>

*The Commonwealth Of Pennsylvania has provided a portion of the Practical Nursing budget. Without this financial assistance, tuition charges would be significantly increased.

**Program Fees:**

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Malpractice Insurance</td>
<td>$25.00</td>
</tr>
<tr>
<td>Technology Fee</td>
<td>$100.00</td>
</tr>
<tr>
<td>Lab Fee</td>
<td>$100.00</td>
</tr>
<tr>
<td>Comprehensive Testing Package</td>
<td>$350.00</td>
</tr>
</tbody>
</table>

**Activity Fees:**

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCLEX</td>
<td>$200.00</td>
</tr>
<tr>
<td>Graduation</td>
<td>$70.00</td>
</tr>
</tbody>
</table>

Total Fees $845.00

**TOTAL AMOUNT DUE CENTRAL PA INSTITUTE OF SCIENCE AND TECHNOLOGY $14,325.00**

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uniforms</td>
<td>$225.00</td>
</tr>
<tr>
<td>Books</td>
<td>$610.00</td>
</tr>
</tbody>
</table>

**TOTAL COSTS $15,160.00**

The school reserves the right to increase the costs as necessary, as this is based on a tentative budget. Student fees are non-refundable.

Students with an out-of-state G.E.D., or records from foreign or Army High School will need certified record of Secondary Education from the Pennsylvania Department of Education. The cost is $15.00.

To verify accreditation or cost of the program please contact The National League for Nursing Accrediting Commission - 61 Broadway, New York, NY, 10006, (212) 363-5555.