

*Division of Math, Science and Health Professions
Nursing Program*

MEMORANDUM

TO: All Graduating Students

FROM: Stephanie Horner
Nursing Program Specialist

DATE: January 2016

RE: Pinning

In order to place the order for your pins, we need some information from you. Please fill in below the initials you would like engraved on the back of your school pin. You are allowed 3 letters maximum.

This form must be turned into Stephanie Horner in the Nursing Office by February 15, 2016.

STUDENT NAME (please print)	INITIALS FOR YOUR PIN

Also, upon completion of the nursing program, the New Jersey State Board of Nursing requires that we send completion letters for each graduate, confirming program completion, prior to allowing them to take the NCLEX. Please provide the information below so that the completion letter reflects the correct information.

Address:

SS#:

MERCER COUNTY COMMUNITY COLLEGE
DIVISION OF MATH, SCIENCE AND HEALTH PROFESSIONS
NURSING EDUCATION PROGRAM

NRS 240 PRECEPTED CLINICAL PREFERENCE REQUEST FORM
SPRING 2016

Name: _____

Cell phone # _____

Alternate email address (other than MCCC email) _____

Please indicate your choice preference for clinical site, unit and shift. There is no guarantee that requests can be honored.

1. Clinical Facility Preference (list first choice as 1, second choice as 2)

RWJ Hamilton _____

University Medical Center of Princeton _____

2. Type of Unit Preference (list 1, 2 and 3)

Medical-Surgical _____

Critical Care (ICU/ER) _____

Maternity (UMCP only) _____

Telemetry _____

3. Shift Preference ((list first choice as 1, second choice as 2)

7 am to 7 pm _____

7 pm to 7 am _____

Please email completed form to Donna Penn at pennd@mccc.edu or drop completed form off to MS125.

Application for Graduation



Date _____ Student ID # _____

Clearly **PRINT** your name **EXACTLY** as you want it to appear on your diploma.

Name _____

First	Middle	Last
Address _____		()
Street	Apt #	Home/Permanent Primary Phone #
_____		()
City	State	Zip Code
_____		Cell/Alternate Phone #

Program of Study (Major) _____

Month and Year for which you are applying to graduate with all your degree requirements completed (circle one) **May** **August** **January** Year: 20_____

Degree applying for (circle one) **AA** **AAS** **AFA** **AS** **Certificate**

If you are applying for more than one degree and/or certificate for the same month and year, you must fill out multiple forms and pay one \$40 application fee. Submit the completed application(s) with the \$40 payment to:

Bursar's Office
 Mercer County Community College
 PO Box 17202
 Trenton, NJ 08690

The fee is **NON-REFUNDABLE** and partially pays for the cost of diplomas, graduation attire, the ceremony and graduation certification processing. Each application **NOT** filed for the same month and year requires payment regardless of prior applications! See your academic advisor **PRIOR** to submittal to ensure graduation readiness. A **GPA of at least 2.0** is required to be eligible to graduate. The deadline for this application is as follows:

May Graduation	February 1*
August Graduation	April 1* (if you are attending the May graduation ceremony)
	June 1* (if you are not attending the May graduation ceremony)
January Graduation	October 1*

* If this date falls on a weekend the deadline will be the next business day.

Information about graduates will be published in the program, commencement brochures, and the news media. This information will include name, address, degree(s) awarded, honors, major field of study, or other information classified as "Directory Information" by the college and in accordance with the Family Educational Rights and Privacy Act (FERPA – see the current catalog for further information). If you do not wish to have this information released you must file a written request at the Student Records office to withhold the release of directory information.

Commencement is held once a year in May. Students who complete requirements in January or August may participate in this ceremony. All financial obligations must be cleared before diplomas will be released. Your diploma will be mailed to the above address if it is not picked-up within 45 days of notification. The college is not responsible for any lost or damaged diplomas. All degree/certificate requirements must be completed by the end of the term for which you are applying.

If all degree requirements are **NOT** satisfied by these dates it is the student's responsibility to file another Application for Graduation and pay an additional \$40 fee.

Student Signature: _____

BURSAR'S OFFICE USE ONLY

Accepted by: _____

Amount Paid: _____ Date: _____

FEE IS NON-REFUNDABLE

Date _____
 Diploma received by _____



SAVE THE DATE

**MERCER COUNTY COMMUNITY
COLLEGE'S NURSING EDUCATION
PROGRAM**

PINNING CEREMONY

**Tuesday
May 17, 2016
6:00 P.M.**

KELSEY THEATRE

MARK YOUR CALENDARS