



Fall 2023 Application to Commence the Professional  
Phase of the Nursing Education Program in Spring 2024

**Instructions:** Complete this form and be sure to answer all questions. Submit the completed form via the nursing program website ([www.mccc.edu/nursing](http://www.mccc.edu/nursing)) between September 1st and October 1st , 2023. **Please type or print clearly.**

Name: \_\_\_\_\_ MCCC ID#: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

County: \_\_\_\_\_

MCCC student e-mail: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Date Attended Nursing Education Program Information Session \_\_\_\_\_

Have you applied to the professional phase of the nursing education previously? ☐ No ☐ Yes

If yes, during which application period? \_\_\_\_\_

Are you currently enrolled in the Equal Opportunity Fund (EOF) program at MCCC? ☐ No ☐ Yes

Do you wish to be considered for admission based on your date of matriculation? ☐ No ☐ Yes

Were you previously enrolled in the professional phase of the nursing education program and are applying through the second chance program option\*? ☐ No ☐ Yes

\*Second change program applicants must also submit an essay.

***Please initial each of the following:***

1. \_\_\_\_\_ I understand that the spring program is on an evening/weekend schedule, with classes held primarily during the evening hours, and clinicals on the weekend. Students will be required to begin as clinicals as early as 6:45 a.m. In limited circumstances, students may be required to attend a clinical experience in the evenings, up to 11 p.m. for a short duration of time.
2. \_\_\_\_\_ I understand that the application process is unique for each year and submitted applications do not "carry over" to another year. I understand that if I am not accepted into the program this time and I wish to apply in the future, I will need to submit a new application.

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***Please initial each of the following:***

3. \_\_\_\_\_ I understand that acceptance into the professional phase of the nursing education program is contingent on successful completion of the first semester courses (ENG101: English Composition, MAT125: Elementary Statistics, BIO103: Anatomy and Physiology I, and PSY101: Introduction to Psychology) and second semester courses (ENG102: English Composition II, CHE107: General and Physiological Chemistry, BIO104: Anatomy and Physiology II, and PSY207: Developmental Psychology.)
4. \_\_\_\_\_ I acknowledge that BIO201: Microbiology must be successfully completed prior to the second professional phase nursing course. This may be completed prior to beginning the nursing coursework (preferred) or concurrently with the first semester of nursing coursework.
5. \_\_\_\_\_ I have reviewed the Essential Functions for Nursing Students, available on the nursing website [www.mccc.edu/nursing](http://www.mccc.edu/nursing). Some of the essential functions may be accomplished with the use of assistive technology or other reasonable accommodations. Please contact the MCCC Center for Accessibility Resources in LB216 on the West Windsor campus for information regarding support services.
6. \_\_\_\_\_ I understand that there are standards of behaviors expected from nursing students, in accordance with the American Nurses Association Code of Ethics. I have reviewed the Health Professions Code of Conduct, available on the nursing website [www.mccc.edu/nursing](http://www.mccc.edu/nursing).
7. \_\_\_\_\_ I understand that a criminal background check, including sex offender registry is part of the requirement for clinical placement. Students with a criminal conviction within the past seven years are not be eligible to participate in the Nursing Education Program. Any criminal history may limit my ability to obtain state licensure as a registered professional nurse.
8. \_\_\_\_\_ I understand that drug screening is required as part of the initial medical clearance process and annually thereafter. Non-prescription use of controlled substances will make a student ineligible to complete the Nursing Education Program.
9. \_\_\_\_\_ I understand that in order to participate in the Nursing Education Program, I must have a valid social security number in order to complete the required background check.
10. \_\_\_\_\_ I understand that the NJ Board of Nursing determines who is eligible for licensure. Applicants who are not U.S. citizens will be required to submit additional immigration documents. Completion of the Nursing Education Program is no guarantee that the applicant will be eligible for licensure in New Jersey or any other state.

Provide your current status in the following courses. If you are currently registered or enrolled, write "IP" for in progress. If the course was taken at another college than Mercer County Community College, please attach your informal transcript. If not already completed, official transcripts must be sent to the Mercer County Community College student records office.

If you are planning to take a Semester 2 course during the summer session, please indicate that. If you plan to take the course at another college than Mercer County Community College, please submit your registration documentation and academic course catalog description.

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**Semester 1 Courses**

	<u>Semester</u>	<u>Year</u>	<u>Grade</u>	<u>College Taken At</u>
MAT125: Elementary Statistics	_____	_____	_____	_____
BIO103: Anatomy & Physiology I	_____	_____	_____	_____
ENG101: English Composition I	_____	_____	_____	_____
PSY101: Introduction to Psychology	_____	_____	_____	_____

**Semester 2 Courses**

	<u>Semester</u>	<u>Year</u>	<u>Grade</u>	<u>College Taken At/Registered For</u>
ENG102: English Composition II	_____	_____	_____	_____
BIO104: Anatomy & Physiology II	_____	_____	_____	_____
PSY207: Developmental Psychology	_____	_____	_____	_____
CHE107: General & Physiol. Chem.	_____	_____	_____	_____

I affirm that the information on this form is accurate and request consideration for acceptance into the professional phase of the Nursing Education Program.

Signature \_\_\_\_\_

Date: \_\_\_\_\_



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