The Associate Degree Nursing major is a program designed to prepare people to become registered nurses. Requirements for application to the program are as follows:

1. Must be legal resident of the Santa Barbara Community College District OR a legal resident of Santa Barbara County with an interdistrict permit from the Allan Hancock District.

2. Must be a high school graduate (or meet equivalency criteria).

3. Must have completed a course in elementary algebra with a 'B' grade or better. One year of high school algebra or one semester or one quarter of college elementary algebra. (Math 7 at S.B.C.C. or equivalent)

4. Must have completed a course in chemistry with laboratory within last five years with a grade of 'C' or better. One year of high school chemistry or one semester or quarter of college chemistry with laboratory. (Chemistry 4 or 1 at S.B.C.C. or equivalent)

Note: If at any time before or after admission, the professional staff feel there is reasonable doubt of a student's knowledge of basic English, algebra, or chemistry, he/she may be required to take a competency examination. Failure to demonstrate competency will result in denial or dismissal from the program.

5. Must have S.C.A.T. scores taken no more than two years prior to application deadline:
   a. The sum of the Verbal percentile and Quantitative (math) percentile must be at least 100,
   AND
   b. must have minimums of: Verbal percentile - 50
      Quantitative percentile - 30

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6. A health examination must have been completed and proven to be satisfactory within 19 months of the application deadline. If, at any time (either before or after acceptance into the program), the physical or emotional health is such that it is a potential threat to the well-being of patients, the applicant will be denied admission to the nursing major or subsequently dismissed from the program.
PROCEDURES:

--Applications will be available from the Admissions Office on the first working day following October 1st. Deadline for submission of application and other required materials will be the last day of November of that same year. There is no need to be first in line on a specific date.

--A completed form of the physical examination, official copy of S.C.A.T. results, and a self-addressed, stamped postcard must be submitted with completed application.

--Official high school transcripts are required of all applicants; official college transcripts are required if necessary to confirm completion of algebra or chemistry. All of these transcripts must be received by the Admissions Office by February 1st. If an applicant is still taking a required course, he/she will submit a "work in progress" form from the appropriate school.

--If an applicant has any question regarding his status, he/she may request clarification within two weeks following notification. Should an applicant disagree with an ineligibility status, he/she may submit his/her written concern to a committee which will include representation from Student Services, Instruction Office, and the Nursing Program.

--Applicants meeting all entrance requirements must attend a group information session. Applicants will be notified of the date and time they will be required to attend.

--A pool will be established containing the names of all qualified applicants. Students will then be named according to random selection.

--All applicants will be notified of their status by April 1st.

--Unsuccessful candidates must reapply to the program each year. There will be no holdovers. Transcripts and test scores will be retained for a three year period.
APPLICATION FORM - ASSOCIATE DEGREE NURSING PROGRAM

NAME

First

Middle

Last

Maiden

ADDRESS

Number

Street

Apartment Number

City

State

Zip

TELEPHONE

SOCIAL SECURITY NUMBER

ETHNIC GROUP: It is your option whether you wish to indicate your ethnic background.

American Indian or Alaskan Native

Anglo

Asian or Pacific Islander

Black

Filipino

Hispanic

EDUCATION

HIGH SCHOOL LAST ATTENDED

City

STATE

DATE OF GRADUATION

LIST ALL OTHER HIGH SCHOOLS ATTENDED (IF ANY):

HIGH SCHOOL

CITY/STATE

DATES ATTENDED

HAVE YOU ATTENDED S.B.C.C.? YES____ NO____ CURRENTLY ENROLLED?

LAST DATE ATTENDED

LIST ALL OTHER COLLEGES ATTENDED (IF ANY):

COLLEGE

DATES ATTENDED

DEGREE OR NUMBER OF UNITS COMPLETED

CHECK OFF THE FOLLOWING COMPLETED COURSES:

ALGEBRA____ WHERE TAKEN? ___________ WHEN? ___________ UNITS____ GRADE____

CHEMISTRY____ WHERE TAKEN? ___________ WHEN? ___________ UNITS____ GRADE____

(Please complete reverse side)
Have you taken the S.C.A.T. test? Yes____ No____ When?_________ Where?_________

Are you a veteran? Yes____ No____

Have you ever applied to a Health Technology program at S.B.C.C.? Yes____ No____
If so, which program? ___________________________ When?______________

WORK EXPERIENCE

List chronologically from five years to present. Start with current employment.
Note: This data will not be used regarding selection of students, but will be used for research purposes related to the nursing program.

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If accepted, I understand that I must furnish my own transportation for clinical experience in the community. Yes____ No____

I am a legal resident of Santa Barbara Community College District. Yes____ No____
If not a resident of Santa Barbara Community College District, of which community college district are you a resident? ________________________________

I certify under penalty of perjury that I have included in this application all high schools and colleges attended and that all information is true and correct.

SIGNATURE ____________________________

AFTER you have completed this form, please return WITH:

1. Completed health examination form
2. Stamped, addressed postcard
3. Official S.C.A.T. scores

TO: ADMISSIONS OFFICE
Santa Barbara City College
721 Cliff Drive
Santa Barbara, CA 93109

REMINDER: The applicant must be responsible for being certain that all necessary transcripts are received in the Admissions Office by the designated date as indicated on Information Sheet.