

## IVC Vocational Nursing Program - Checklist

(This form must accompany the application packet)

### Required documents needed to submit an application packet:

- \_\_\_\_\_ **Application**
- \_\_\_\_\_ **Proof of U.S. High School graduate, GED certificate, or Equivalent**
- \_\_\_\_\_ **IVC Webstar Transcript or Official transcripts of courses** (if outside IVC) verifying completion of following courses:
  - ENG 101 (3 units) Reading & Composition
  - PSY 101(3 units) General Psychology
  - BIOL 090 (3 units) Anatomy & Physiology for Health Occupations (no lab)
  - AHP 100 (3 units) Medical Terminology
- \_\_\_\_\_ **Transfer Form** – If attended another school of nursing (RN or LVN)
- \_\_\_\_\_ **Counselor's Education Plan** or major sheet (copy acceptable)

### Required documents needed for additional points: (Please check all that apply)

- \_\_\_\_\_ **Academic degree(s)** (official transcripts indicating Associates, Bachelors or Masters Degree)
- \_\_\_\_\_ **Allied Health Certificate(s)** (a copy of the certificate is required)
- \_\_\_\_\_ **Relevant work or volunteer experience in Health care within the past 3 years & more than 25 hours** (documentation from the employer or volunteer supervisor must be submitted on company letterhead indicating experience).
- \_\_\_\_\_ **Documented proficiency or advanced level of coursework in languages other than English, including American Sign, in a health care setting** (official transcripts indicating advanced level coursework or a letter from your employer on company letterhead verifying proficiency)
- \_\_\_\_\_ **Veteran Status** (a copy of the DD214 form must be included)
- \_\_\_\_\_ **Refugee** (copy of the card indicating refugee status)
- \_\_\_\_\_ **Documented disability** (a copy of a DSPS evaluation or a letter from a Physician describing the disability)
- \_\_\_\_\_ **Low Family Income** (a documented copy of eligibility for Financial Aid, Cal Works, BOGFW-B, Federal Pell Grant or EOPS)
- \_\_\_\_\_ **Need to Work while completing prerequisites** (documentation from employer on company letterhead verifying dates of employment)
- \_\_\_\_\_ **First generation of family to attend college** (statement from applicant, no other documentation is required)
- \_\_\_\_\_ **Disadvantages, social or educational environment** (statement from applicant documenting disadvantages)
- \_\_\_\_\_ **Difficult personal and family situations or circumstances** (statement from applicant documenting difficulty)