NURSING RE-ENTRY APPLICATION PROCEDURE

1. Students who receive a grade less than a "C" in any required nursing course will not progress to the next semester and must apply for re-admission to the nursing program. **If a period of more than one year lapses before the course is retaken, the student will not be granted re-admission to the nursing program.**

2. A student may re-apply one time in only one of the four major area Nursing courses required for the associate in applied science in nursing degree. The four major areas must be successfully completed within a three year period.

3. Nursing students who fail, withdraw or are unable to progress in the nursing program may seek readmission. The student will be required to submit a re-admission application by March 15th for the fall semester re-entry (only applicable for NURS 2219) and November 1st for spring semester re-entry (only applicable for NURS 1129 and NURS 2229).

4. The re-admission application form must be complete and legible to be considered.

5. All requests for re-admission will be reviewed by the nursing faculty for selection. Each applicant will be evaluated on an individual basis. The nursing department does not guarantee re-admission. Applicants will be notified in June for the fall semester and in November for the spring semester by letter of re-admission status. Selected applicants will be required to sign an academic contract and complete all admission requirement standards including ALL clinical requirements prior to course enrollment.

6. The following criteria will be considered for re-admission:
   a. Participation in activities which would improve the probability of success in the program, such as:
      - Working in a healthcare setting
      - Taking courses which could improve weak areas
      - Resolving personal crisis that contributed to performance
   b. Space availability:
      - Students requesting readmission into classes that have reached maximum enrollment may be denied the opportunity to re-enroll.
   c. Exit interview:
      - The record made of the exit interview at the time of withdrawal from the program with the Director of Nursing. This interview will identify areas of weakness and suggestions for improvement provided by the faculty.
   d. Application Packet for Re-Admission complete with plan for improvement.
      - The plan of academic readiness MUST address, in detail, how the student plans to be successful if re-admitted to the nursing program. The plan must be signed and becomes a contract that the student will follow throughout the remainder of the nursing program. If at any time the student fails to follow their plan of academic readiness, they may be dismissed from the nursing program. **Intent for re-admission WILL NOT be considered if the applicant does not submit a detailed plan of academic readiness.**
7. Successful completion of progressive re-admittance testing is required as indicated prior to re-entry:

   a. Dosage Calculation Exam:
      - A score of 100% is required.
      - Only one attempt will be allowed.
      - Exam will consist of 30 dosage calculation questions.
      - Questions will cover all areas of dosage calculations including:
        1. Oral Dosages
        2. Parenteral Dosages
        3. Reconstitution of Solutions
        4. Dosages based on body weight (both adult and pediatric)
        5. Intravenous solutions and calculations (both simple and complex)
        6. Interpretation and understanding of drug labels

   b. Care Plan Competency:
      - A score of 84% is required.
      - Only one attempt will be allowed.
      - A case scenario will be provided.
      - Applicants will be required to complete the following:
        1. Maslow’s Hierarchy
        2. Objective Data
        3. Subjective Data
        4. Nursing Diagnosis (written in proper format and prioritized)
        5. Short-Term and Long Term Expected Outcomes (must be measurable)
        6. Nursing Interventions and Rationales
        7. Evaluation of Outcomes

   c. Skills Competency Check-Off:
      - Only one attempt will be allowed.
      - Students are encouraged to practice in the skills lab prior to check-off date.
      - Skills assessed will include the following:
        1. Hand Hygiene
        2. Administering Partial Bed Bath
        3. Change Occupied Bed
        4. Range of Motion
        5. Transferring Client from Bed to W/C or Chair
        6. Physical Assessment
        7. Vital Signs
        8. Strict Isolation
        9. Foley Catheter Insertion
        10. Enema Administration
        11. Nasogastric Tube Insertion
        12. Suctioning
        13. Oxygen Administration
        14. Wound Care
        15. PO Medication Administration
d. Completion of a comprehensive examination:
   - An overall score of 76% is required.
   - Only one attempt will be allowed.
   - Exam will consist of 50 to 150 multiple-choice type questions.
   - Exam content will be based on the un-successful completion level of the student.
   - The exam for students applying for re-admission into NURS 1129 will include the following:
     1. 50 questions covering nursing fundamentals = 50 total questions
   - The exam for students applying for re-admission into NURS 2219 will include the following:
     1. 50 questions covering nursing fundamentals
     2. 25 questions covering obstetrics
     3. 25 questions covering pediatrics = 100 total questions
   - The exam for students applying for re-admission into NURS 2229 will include the following:
     1. 50 questions covering nursing fundamentals
     2. 25 questions covering obstetrics
     3. 25 questions covering pediatrics
     4. 25 questions covering mental health nursing
     5. 25 questions covering medical-surgical nursing* = 150 total questions
     *This content will contain topics covered in NURS 2219
   - Applicants preparing to take the above exams are encouraged to utilize an NCLEX-RN examination preparation book to review content and practice questions.

8. Applicants who fail ANY portion of the progressive re-admittance testing is indicated by the criteria above WILL NOT be allowed entry into the nursing program. Future admission into the nursing program will require that such students complete the general application packet and be considered with the other applicants seeking admission.

9. Campus placement of returning students will be based on space availability. Efforts will be made to place returning students on their desired campus but currently enrolled students will be given priority.

CONTACT INFORMATION AND MAILING ADDRESS:
Western Oklahoma State College
Department of Nursing Education
2801 North Main Street
Altus, Oklahoma 73521
Heather Hill 580-477-7830
GENERAL STUDENTS

You MUST have the following pre-requisites completed, with appropriate transcript grades, to enter the program:

- Human Anatomy with a lab - (must have a grade of “C” or better)
- College Algebra
- General Chemistry with a lab - (must have a grade of “C” or better)

LPN STUDENTS

Procedures for LPN entry to the program differ because of program accreditations, Cooperative Agreements, etc. Each LPN applicant will need to contact the department to have LPN credits assessed for entry purposes, as additional mobility testing may be required. To receive advance standing credit, LPN applicants must hold a valid LPN license, be in good standing and currently practicing as an LPN. LPN students must have completed the following courses with appropriate grades to be considered for selection:

- Human Anatomy with lab** - (must have a grade of “C” or better)
- College Algebra**
- General Chemistry with lab** - (must have a grade of “C” or better)
- Human Physiology with lab** - (must have a grade of “C” or better)
- Microcomputer Applications
- General Psychology
- LPN to RN Transition Course* -This course is offered the summer before entry into NURS 2219

*This is mandatory and will be offered during the 2nd 4 week session of the summer semester.

** These courses must be complete prior to beginning the LPN to RN Transition Course.

HESI EXAM REQUIREMENT FOR PROGRAM COMPLETION

All students are required to take the HESI Exit Exam during both their NURS 1129 and NURS 2229 semesters. All students will take the test a total of three scheduled times, as indicated in the syllabus, and the initial cost is included in the course fees. WOSC requires a score of 850 on the HESI Exit Exam. If a score of less than 850 is obtained, a remediation plan must be developed. This must be a written plan that is discussed with the classroom instructor. Once remediation is complete, a student must re-take the HESI Exit Exam until his/her score is equal to or greater than 850. The HESI Exit Exam can be taken a fourth time. The cost for the fourth additional test is the student’s responsibility and is NOT included in the semester tuition.

If a score of 850 is not achieved, the student will receive an Incomplete in the course until it is achieved. If a score of 850 cannot be achieved by the fourth attempt, the student will not successfully pass the course or complete the nursing program. At this point, the student must apply for re-admission to NURS 2229, successfully complete a dosage calculation exam, care plan competency exam, skills competency check offs and a comprehensive exam in order to be accepted back into the program.
HIGH SCHOOL & COLLEGE TRANSCRIPTS

An official copy of **ALL high school transcripts** and/or **GED AND college transcripts** for each college attended (including WOSC transcripts) must be submitted with the nursing application. Combined college transcripts will not be accepted. A **cumulative GPA of 2.0** out of a possible 4.0 is required. Applicants with a cumulative GPA less than 2.0 are considered ineligible for acceptance into the nursing program. Applications submitted without **ALL** transcripts will be incomplete and will not be considered for selection.

**LPN students** must also submit a copy of their LPN Program Transcript of Certificate of Completion along with a copy of their current LPN license.

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**ESL – ENGLISH AS SECOND LANGUAGE**

Students for whom English is a second language shall be required to present evidence of proficiency in the English language prior to admission.

Per the 2013-2014 WOSC College Catalog:

> “Students seeking enrollment in a state system college or university must meet the admission standards in the admission policy, the retention policy, and the policy on admission of transfer students, and must present evidence of proficiency in the English language prior to admission, either as first-time students to the state system or by transfer from another non-system college or university.

> This policy is adopted to ensure that students will have a reasonable chance to succeed at a higher education institution based on their ability to comprehend, read, and write the English language.”

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**DRUG SCREEN**

Applicants accepted into the nursing program will undergo annual drug screening prior to entry into the enrolled course. Positive drug screens will be reported to licensing governing bodies if applicable and clinical agencies. Students with positive drug screens, not cleared by a Medical Review Officer, will not be able to complete the clinical component of the nursing program and therefore be required to withdraw from the nursing program.

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**AFFIRMATIVE ACTION COMPLIANCE STATEMENT**

Western Oklahoma State College, in compliance with Title VI and Title VII of the Civil Rights Acts of 1964, Title IX of the Education Amendments of 1972, Section 503 of the Rehabilitation Act of 1973Section 402 of the Readjustment Assistance Act of 1974, and other federal laws and regulations, does not discriminate on the basis of race, color, national origin, sex, age, religion, handicap, or status as veteran in any of its policies, practices or procedures. This includes, but is not limited to admissions employment, financial aid, and educational services.
INTERNATIONAL STUDENTS

Applicants classified as an international student using a F-1 Student Visa may attend at one of Western’s campuses. **However, all initial processing & paperwork must be completed with the Office of the Registrar at the Altus campus.** Oklahoma law only allows a license to be issued to U.S. citizens, U.S. nationals, and legal permanent resident aliens. Other qualified aliens may be issued a temporary license that is valid until the expiration of their visa status, or if there is no expiration date, for one year. For more information regarding this matter, applicants can contact the Oklahoma Board of Nursing.

STATEMENT CONCERNING THE AMERICAN WITH DISABILITY ACT

According to the ADA (Americans with Disabilities Act), each student with a disability is responsible for notifying the College of his/her disability and requesting accommodations. If you think you have a qualified disability and need classroom accommodations, contact the Counseling Office (C-1E). To receive services, you must submit appropriate documentation and complete an intake process during which the existence of a qualified disability is verified and reasonable accommodations are identified. Please call (580) 477-7710, or email april.dill@wosc.edu for more information.

Please advise the instructor of your disability as soon as possible to ensure timely implementation of appropriate accommodations. The faculties have an obligation to respond when they receive official notice of a disability from the Counseling Office but are under no obligation to provide retroactive accommodations.

CRIMINAL BACKGROUND INFORMATION

All students (General, LPN and Transfer Students) will be required to complete a criminal background check **annually.** The completion of the criminal background checks will be performed on those students who are accepted into the program. The background checks will be handled by a private company in which the WOSC Nursing Department has a contract. Students **WILL NOT** be required to complete separate FBI or OSBI background checks. The contracted company which is utilized will be solely responsible for all criminal background checks required by the clinical facilities.

Applicants admitted to the nursing program should be aware that a felony conviction, arrest, pending charges, judicially declared incompetence, or disciplinary action might affect eligibility for registered nurse licensure. Various clinical agencies also have restrictions regarding individuals with a criminal record. Criminal background information is reviewed and decisions are made based on the clinical agency’s policies and guidelines. The failure of a clinical facility to accept a student based on their criminal background will result in the student’s inability to complete the clinical portion of the program. Because the student will be unable to participate in clinical rotations, the student will be withdrawn from the nursing program.
WESTERN OKLAHOMA STATE COLLEGE
DEPARTMENT OF NURSING EDUCATION

LICENSURE

The Western Oklahoma State College Department of Nursing Education is approved by the Oklahoma Board of Nursing. Graduates of this state-approved program are eligible to apply for the National Council Licensure Examination (NCLEX) for registered nurses. Applicants for Oklahoma licensure must meet all state and federal requirements to hold an Oklahoma license to practice nursing. In addition to completing a state-approved nursing education program, requirements include submission of an application for licensure with a criminal history records search and successfully passing the licensure examination. [59 O.S. §567.5 & 567.6]. To be granted a license, an applicant must have the legal right to reside in the United States (United States Code Chapter 8, Section 1621). In addition, Oklahoma law only allows a license to be issued to U.S. citizens, U.S. nationals, and legal permanent resident aliens. Other qualified aliens may be issued a temporary license that is valid until the expiration of their visa status, or if there is no expiration date, for one year. Applicants who are qualified aliens must present to the Board office, in person, valid documentary evidence of:

1. A valid, unexpired immigrant or nonimmigrant visa status for admission into the United States;
2. A pending or approved application for asylum in the United States;
3. Admission into the United states in refugee status;
4. A pending or approved application for temporary protected status in the United States;
5. Approved deferred action status; or
6. A pending application for adjustment of status to legal permanent resident status or conditional resident status.

The Board has the right to deny a license to an individual with a history of criminal back-ground, disciplinary action on another health-related license or certification, or judicial declaration of mental incompetence [59 O.S. §567.8]. These cases are considered on an individual basis at the time application for licensure is made, with the exception of felony charges. An individual with a felony conviction or who had sentencing terms imposed by the court related to a deferred sentence for a felony offense cannot apply for licensure for at least five years after completion of all sentencing terms, including probation and suspended sentences, unless a presidential or gubernatorial pardon is received [59 O.S. §567.5 & 567.6].

RE-ADMISSION TESTING

Students granted re-admission into the WOSC Nursing Program will be required to complete re-admission testing as stated above. The testing will be scheduled through the Director of Nursing Education. Testing dates and times will be set-up based upon the availability of the nursing faculty. Failure to obtain the required score on any portion of the testing criteria will result in a student’s inability to re-enter the nursing program.
WESTERN OKLAHOMA STATE COLLEGE  
DEPARTMENT OF NURSING EDUCATION

Re-Entry APPLICANT CHECKLIST  
THIS IS FOR THE APPLICANTS INFORMATION ONLY  
DO NOT TURN IN WITH APPLICATION

________ OFFICIAL UPDATED COLLEGE TRANSCRIPT(S) ATTACHED  
________ COPY OF LPN LICENSE ATTACHED (if applicable)

CURRICULUM COMPLETED

**NURS 1129**  
must have all pre-requisite (indicated by the * symbol) courses completed and transcripts submitted to the nursing department on the Altus campus **NO LATER THAN** August 1, 2014.

**NURS 2219 or NURS 2229**  
must have all shaded courses completed **BEFORE** August 1, 2014 and submitted transcripts **NO LATER THAN** August 1, 2014 showing completed coursework to the nursing department at the Altus campus.

<table>
<thead>
<tr>
<th>COURSE</th>
<th>COURSE NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>*BIOL 2104</td>
<td>Human Anatomy with lab</td>
</tr>
<tr>
<td>*BIOL 2304</td>
<td>Human Physiology with lab</td>
</tr>
<tr>
<td>*CHEM 1115</td>
<td>General Chemistry with lab</td>
</tr>
<tr>
<td>*MATH 1513</td>
<td>College Algebra</td>
</tr>
<tr>
<td>COSC 1153</td>
<td>Microcomputer Applications</td>
</tr>
<tr>
<td>PSY 1113</td>
<td>General Psychology</td>
</tr>
<tr>
<td>NURS 1123</td>
<td><strong>LPN to RN Transition Course</strong></td>
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<td></td>
<td><em>(if required)</em></td>
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<tr>
<td>ENGL 1113</td>
<td>English Comp I</td>
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<tr>
<td>POLS 1113</td>
<td>Federal Government</td>
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<tr>
<td>HIST 1483/93</td>
<td>American History</td>
</tr>
</tbody>
</table>

________ READMISSION APPLICATION TURNED IN BY MARCH 15TH FOR FALL SEMESTER

________ READMISSION APPLICATION TURNED IN BY NOVEMBER 1ST FOR SPRING SEMESTER

Re-admission testing will occur on the following date: ________________________________
WESTERN OKLAHOMA STATE COLLEGE
DEPARTMENT OF NURSING EDUCATION

2014 APPLICATION FOR RE-ENTRY INTO
THE ASSOCIATE DEGREE NURSING PROGRAM

Date: ________________

1. Name: ____________________________ ____________________________ ____________________________
   (Last) (First) (Middle) (Maiden)

2. Social Security #: _______ - _______- _______  3. Date of Birth: _____ / _____ / _______

4. Mailing Address: __________________________________________________________
   _____________________________________________ (City) (State) (Zip)

5. Permanent Address: _________________________________________________________
   _____________________________________________ (City) (State) (Zip)

6. Phone: (______)________________________(home) (______)________________________(cell)
   (______)________________________(work)

7. Email Address: ____________________________

9. Emergency Contact: Name: _____________________________________________
   Relationship: _____________________________________________
   Address: _____________________________________________
   _____________________________________________
   Phone: (______)_____________________________________
   (______)_________________________________________
WESTERN OKLAHOMA STATE COLLEGE
DEPARTMENT OF NURSING EDUCATION

NURSING COURSE I AM REQUESTING RE-ADMISSION TO: ________________________________

NURSING CAMPUS I AM REQUESTING TO BE RE-ENROLLED AT: ____________________________

PLEASE COMPLETE EACH OF THE FOLLOWING QUESTIONS:

1. REASONS I HAVE IDENTIFIED THAT WERE POTENTIAL AND REAL CAUSES FOR MY WITHDRAWAL OR FAILURE FROM PREVIOUS NURSING COURSE:

____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

2. PLAN FOR ACADEMIC AND CLINICAL COMPETENCY SUCCESS IF RE-ADMITTED INTO THE NURSING PROGRAM:

____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

_________________________________________ _______________________________________________________

__________________________
3. OTHER THINGS I WOULD LIKE FOR YOU TO CONSIDER (MAY INCLUDE THINGS YOU HAVE DONE TO PREPARE FOR THE ACADEMIC YEAR, ADDITIONAL COURSES TAKEN, TRAINING COMPLETED, ETC…)

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

*May continue on additional paper if needed

PLEASE INITIAL BEFORE EACH STATEMENT OF UNDERSTANDING AND SIGN AND DATE APPLICATION PRIOR TO SUBMITTING.

______ I CERTIFY THAT THE INFORMATION IN THIS APPLICATION IS COMPLETE TO THE BEST OF MY KNOWLEDGE.

______ I CERTIFY ACKNOWLEDGEMENT THAT THE ACADEMIC PLAN FOR SUCCESS WILL BE CONSIDERED A CONTRACT SHOULD I BE RE-ADMITTED INTO THE NURSING PROGRAM AND ANY DEVIATION FROM THE PLAN MAY RESULT IN MY IMMEDIATE DISMISSAL FROM THE NURSING PROGRAM.

______ I UNDERSTAND THAT SUBMISSION OF FALSE INFORMATION IS GROUNDS FOR DENIAL OF RE-ADMISSION TO OR DISMISSAL FROM THE WESTERN OKLAHOMA STATE COLLEGE NURSING PROGRAM. I ALSO UNDERSTAND, IF MY APPLICATION PACKET IS NOT COMPLETE, INCLUDING COPIES OF TRANSCRIPTS FROM EACH COLLEGE I HAVE ATTENDED, THAT I WILL NOT BE CONSIDERED FOR ADMISSION INTO THE PROGRAM.

ALL INFORMATION IN THIS APPLICATION IS CONFIDENTIAL AND WILL BE USED BY THE NURSING ADMISSION COMMITTEE AND THE DIRECTOR OF NURSING ONLY.

PLEASE BE AWARE THAT DUE TO CURRENT ECONOMIC CRISIS & BUDGET SHORTFALLS, THERE IS THE POSSIBILITY OF AN OFF-SITE CAMPUS CLOSING. IF A CAMPUS CLOSING DOES OCCUR, APPLICANTS WILL BE NOTIFIED AND MAY BE RELOCATED TO ANOTHER CAMPUS.

________________________________________________________
STUDENT SIGNATURE/DATE