

Miles Community College Nursing Program Application



Year you desire to begin the Nursing Program: _____

Applicants who wish to be considered for the Miles Community College Nursing Program must take the Entrance Exams, submit a general MCC Application (Includes an application fee), have their official transcripts sent to the MCC Registrar's office, and submit a MCC Nursing Application. Applications may be mailed to the Miles Community College admissions office at: Miles Community College
2715 Dickinson St.
Miles City, MT 59301

Please list all Colleges and University attended, including Miles Community College:

NAME OF SCHOOL	LOCATION	DATES	CR. HRS.	DEGREES

Background information: Please answer the following questions by circling your response. **If you answer "Yes" to any of the questions, please provide a complete description of dates and circumstances on a separate piece of paper.** You must send supporting court documents that are applicable. The Miles Community College Nursing Department requires criminal background checks as part of conditional admission to the nursing program. Background checks will be performed only after the applicant has received notice of conditional admission. Drug screening checks may be required for licensure and/or clinical placement. Felony convictions may result in denial of acceptance to the program and/or eligibility of Registered Nurse (RN) licensure.

- Have you ever been convicted, pled guilty or no contest, or received a suspended imposition of sentence for any criminal offense excluding minor traffic violations? **Yes No**
- Have you ever been convicted, pled guilty or no contest, or received a suspended imposition of sentence for any felony? **Yes No**
- Are there any pending criminal proceedings against you? **Yes No**
- Have you ever been treated for abuse or misuse of alcohol or a chemical substance?
Yes No
- Have you experienced a physical, emotional, or mental condition that has endangered the health or safety of yourself or others? **Yes No**
- Have you ever had a professional license, certification, or registration in Montana or any other states denied, cancelled, limited, suspended or revoked? **Yes No**
- Have you ever appeared, or been requested to appear, before any licensure board concerning any violation by you of any law, rule or regulation of any state, district, territory, or province of the United States or Canada? **Yes No**

My answers to the above questions are true, accurate, and complete to the best of my knowledge. I understand that any falsification will be considered grounds from dismissal from the MCC Nursing Program should I be accepted. I understand that if I am convicted, pled guilty or no contest, or received a suspended imposition of sentence for a felony or other criminal offense (excluding minor traffic violations) while in the nursing program, I will report the offense in writing to the Nursing Program Director. The offense will be referred to the Nursing Admissions Committee. Further action would be subject to the jurisdiction of the Student Code of Conduct.

Applicant's Signature _____ **Date** _____



DESIGNATED SITE REQUEST

I, _____, wish to be considered for admission to the Miles Community College Nursing Program for Fall Semester 20__ at the following site:

Miles City _____

Glendive _____ (even numbered years only)

Sidney _____ (odd numbered years only)

I would consider attending clinicals at the other site if my first choice is not available.

Yes _____

No _____

Name: _____

Address: _____

City, State & Zip: _____

Phone: _____

Email: _____

Student Signature

Date

The following is a checklist which will assist you in the application process. This completed application and your official transcripts must be submitted by March 15th of the year you are seeking admission in order to be considered an eligible applicant to the Miles Community College Nursing Program.

Please initial checklist items and return this page with the Nursing application.

- ___ ATI TEAS exam taken. (Printout of score submitted with this application).
- ___ ATI Critical Thinking exam taken. (Printout of score submitted with this application).
- ___ Miles Community College General Admissions application & fee submitted.
- ___ Official Transcripts submitted to the MCC registrar's office by deadline date (March 15th)
- ___ Miles Community College **Nursing Program** Application (this form) submitted by March 15th.
- ___ Letter of reference from previous nursing program (if applicable).
- ___ Copy of court documents (if applicable).

LPN-RN Completion Students only:

- ___ ATI Fundamentals of Nursing exam taken. (Printout of score submitted with this application).
- ___ ATI Critical Thinking exam taken. (Printout of score submitted with this application).
- ___ Miles Community College General Admissions application & fee submitted.
- ___ Official Transcripts submitted to the MCC registrar's office by deadline date (March 15th)
- ___ Miles Community College **Nursing Program** Application (this form) submitted by March 15th.
- ___ Letter of reference from previous nursing program (if applicable).
- ___ Copy of court documents (if applicable).

Please contact us if you have questions.

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