

TRI-COUNTY ROP VOCATIONAL NURSING PROGRAM APPLICATION CHECK LIST

Recruiting Dates for Adult Student:

Recruitment period will begin on Monday, June 3, 2024.

All applications must be completed and submitted **before 5:00 PM on Friday, 6/14/2024**.

All applications must be submitted in person to the front desk office of Sutter County One Stop at 950 Tharp Road, Building 1000, Yuba City, California, 95993. Normal office hours are Monday – Friday 8:00 AM – 5:00 PM.

Application Check List:

When submitting your application, you must include all the required paperwork listed below:

- _____ Completed application
- _____ Current CNA - Copy of Official State Certificate _____ Exp. Date _____
- _____ One official transcript verifying High School Diploma or GED
- _____ ATI TEAS –**MINIMUM SCORE OF BASIC. Priority given to scores Proficient or Higher.**
- _____ Anatomy & Physiology (48 hours minimum) - One official transcript – no older than 5 years.
- _____ Medical Terminology (20 hours) - One official transcript – no older than 5 years.
- _____ Proof of Basic Computer Literacy (on transcript, “Prove It” test score, or letter from Employer attesting your skills)
- _____ Proof of 2 step negative TB test or a negative chest x-ray – **no older than June 2024 or later.** Expiration Date _____
- _____ Physical Exam – **no older than June 2024 or later.** Expiration Date _____
- _____ Hepatitis B Vaccination Series (Hep 1, Hep 2, Hep 3) – Must be current or titer done if vaccine is older than 7 years.
- _____ Current Healthcare Provider CPR – Expiration Date _____
- _____ Proof of MMR (measles, mumps, and rubella) Vaccination – Must be current or titer done if vaccine is older than 7 years.
- _____ Proof of Tdap (Tetanus, Diphtheria, and Pertussis) Vaccination – Must be current or titer done if vaccine is older than 7 years.
- _____ Proof of Varicella shot – Must be current or titer done if vaccine is older than 7 years.
- _____ Proof of complete COVID-19 vaccination and all other COVID-19 mandated vaccines.
- _____ Two letters of recommendation – Must be from professional contacts. Letters from family members will **not** be accepted.
- _____ Current Driver’s License – Staff will make a copy and include with application.
- _____ Social Security Card – Staff will make a copy and include with application.
- _____ Verification of employment history (if applicable) on company letterhead and signed by the employer.

To be completed after acceptance into the Program

- _____ Negative Drug Screen
- _____ Influenza vaccine

INCLUDE THIS CHECKLIST ON THE TOP OF YOUR PACKET—PLACE REQUESTED ITEMS IN ORDER AS LISTED BEHIND CHECKLIST

All applications will be reviewed and scored using the Rubric; interviews will be scheduled with selected applicants.

Incomplete or late application packets will not be considered.

List of accepted applicants for the next VN class will be posted Monday, October 7, 2024.

OFFICIAL USE ONLY

Student’s Name: _____ Fees Paid: \$ _____

Date & Time Stamp: _____ Staff Initials: _____

Date of interview: _____

Time of interview: _____

Date of Class applying for: _____

TRI-COUNTY ROP VOCATIONAL NURSING PROGRAM APPLICATION

Please print legibly and use ink.

Last Name	First Name	MI
Mailing Address	City	State Zip Code
Phone Number	Alternate Phone	Date of Birth
Email Address	Social Security Number	

Educational History

Do you possess a high school diploma or high school equivalency? Yes No

	Name & Location of School	Year Attended	Certificate/Diploma/Degree Earned	Subject Areas Studies
Trade/Career Technical School				
College				
Other Schools				

Two (2) official transcripts required and must be included in the application packet. Foreign transcripts must be translated for U.S. equivalency by an official U.S. service to be granted credit.

Employment History

Dates	Name of Employer	Address	Position	Reason for Leaving

MEDICAL INFORMATION

If you wear a MEDIC ALERT BRACELET, please provide your number. If not applicable, please put N/A.

Do you acknowledge a disability/impairment for which you may need assistance using classroom equipment or during a written or oral test? If yes, what assistance might you need? i.e.: hearing, sight, learning disability, ESL, etc. If not applicable, please put N/A.

RELEASE OF INFORMATION

I, _____ give my consent to the individual and/or agency indicated below to release and exchange information with the instructor of the Tri-County Regional Occupational Program, Sutter County Superintendent of Schools Programs.

Names of individuals and /or agencies:

Since the age of 18, have you been convicted of a misdemeanor or a felony? YES NO

PHOTOGRAPHIC RELEASE

I, _____ give my consent to be photographed while participating in the Tri-County Regional Occupational Program Health Career Programs/Sutter County One Stop – Health Career Programs.

SIGNATURE

DATE

MEDICAL ETHICS CODE OF CONFIDENTIALITY

With regard to the Medical Ethics Code of Confidentiality, I understand that I do not at anytime, discuss the details of a patient's problem or history, the doctor's personal business, or a fellow student's personal business. I will abide with all HIPPA Regulations.

SIGNATURE

DATE

CRIMINAL BACKGROUND

The VN Program requires a fingerprint clearance by the Department of Justice and the FBI. Do you have any criminal convictions on record? YES NO

If yes, please explain and provide dates of convictions.

If yes, please refer to the BVNPT's website at www.bvnpt.ca.gov/enforcement to identify if the BVNPT will deny your clearance.

Name of the person we may contact in case of an emergency:

Name _____ Relationship _____

Address _____

Phone Number _____

Doctor _____ Phone _____

Mark any of the following medical conditions that apply:

- () Asthma () Seizure Disorder () Heart Disease
() Diabetes () History of Stroke

Do you have any other medical conditions that we should be aware of in case of emergency? If so please describe. When?

I learned about this program in the following way (check all that applies):

- | | |
|--|--|
| <input type="checkbox"/> School Brochure | <input type="checkbox"/> Newspaper |
| <input type="checkbox"/> Friend/Family Member | <input type="checkbox"/> Caseworker/Participation in another program |
| <input type="checkbox"/> Previous Tri-County ROP student | <input type="checkbox"/> Website |
| <input type="checkbox"/> Facebook/Craig's List | <input type="checkbox"/> Resource or Career Fair |
| <input type="checkbox"/> Other _____ | |

The information I have provided on this form is true to the best of my knowledge.

SIGNATURE

DATE

GENERAL INFORMATION

Please review and write your answers, in your own handwriting, on a separate sheet of paper, the following questions/items. Attach to VN application:

1. Why do you want to be accepted into the VN Program? Write a max 400 words essay stating why you should be accepted.
2. List your hobbies and special interests.
3. What experiences have you had in the medical industry?
4. What licenses or certificates have you possessed? Include expiration date(s).
5. List three personal strengths that would make you an asset to the nursing field and three personal challenges you would face in the nursing field.

Nursing Program Admissions Test - TEAS
Frequently Asked Questions

What is the TEAS?

Students applying for admission to the Vocational Nursing Program are required to take the **Test of Essential Academic Skills (TEAS)**. The TEAS is a multiple-choice assessment of basic academic knowledge in reading, mathematics, science, and English and Language usage. Each of the four sections is timed for a total of 209 minutes. Test results available 48 hours after completion of the test. Content and sub content areas are divided in the following manner:

Reading: (40 questions, 50 minutes) - section includes questions regarding paragraph comprehension, passage comprehension, and inferences/conclusions.

Math: (45 items, 56 minutes) - section includes questions regarding whole numbers, metric conversions, fractions, decimals, algebraic equations, percentages, and ratio/proportion.

Please be aware that calculators are NOT allowed

Science: (30 items, 38 minutes) - section includes questions regarding science reasoning, science knowledge, biology, chemistry, anatomy, physiology, basic physical principles, and general science.

English and Language Usage: (55 items, 65 minutes) - section includes questions regarding punctuation, grammar, sentence structure, contextual words, and spelling.

How can I prepare for the TEAS?

The TEAS is a crucial component in your nursing application. Therefore, you should prepare thoroughly for the exam. We strongly encourage applicants to utilize a combination of study guide and the online practice assessment that are available through ATI. In addition to the materials provided by ATI, listed below are several additional sites that offer study assistance for the TEAS.

www.testprepreview.com/teas_practice.htm

www.flashcardexchange.com/tag/teas

www.test-preparation.ca/teas

www.flashcardsecrets.com/teas/

How do I register to take the TEAS?

You may take the TEAS at Yuba College or at any PSI Testing Center. Test, registration, and payment information are available for review at both websites. Special accommodations are available for applicants who qualify; for information contact the testing center where the test is being held.

How do I send my TEAS to Sutter County One Stop?

During the registration process, students will be asked to select a school to receive their TEAS scores. Students wishing to have their TEAS scores sent to Sutter County One Stop should choose "Sutter County One Stop".

How are the results of the TEAS used?

All students considering admission to the Vocational Nursing Program must take the TEAS nursing entrance exam prior to the application deadline. Points awarded will be based on the *Academic Preparedness Categories* and *Cut Scores* of the TEAS exam.

The *Academic Preparedness Level* and *Cut Score* are found on the top portion of a TEAS Score Report. Each category and cut score is worth points on the nursing application.

TEAS Level
Exemplary
Advanced
Proficient
Basic
Developmental

You must achieve a minimum ATI Academic Preparedness Level of BASIC for admission consideration. Students who place higher will receive stronger consideration.

Can I take the TEAS more than one time?

Students may take the TEAS twice during an academic year. Students must wait a minimum of 45 days before retesting. Test results are valid for two years.

For additional information about the Vocational Nursing Program application and requirements, go to www.sutteronestop.com.