




## NEW STUDENT CHECKLIST

PROGRAM	 PRACTICAL NURSING	 ASSOCIATE OF APPLIED SCIENCE	 RN-BSN COMPLETION PROGRAM
1. Application			
2. Registration Fee (\$125.00) (Non- Refundable)			
3. HESI A2 Exam: required score: PN = 50% AAS = 60%			Not Applicable
4. Proof of graduation a. High School Transcript/Diploma b. GED			Not Applicable
c. Official College Transcript *			
5. High School Attestation			
6. Current Active Ohio License Practical Nurse *	Not Applicable		
7. Foreign Transcript Evaluation Received			
8. Driver's License			
9. Proof of U.S. Residency a. Social Security Card b. Passport c. Green Card			
10. Two Character References			
11. BCI/FBI a. background check (Must use code 4723 09) <i>Within 3 months of starting the program.</i>			
12. IV Certification proof *	Not Applicable		
13. Physical Exam (use Felbry form) to include the following: <b>Immunizations:</b> a. Annual Influenza Vaccine b. Annual 1-step OR 2-step TB test c. MMR (titers) – <i>Within last 10 years</i> d. Varicella (titers) - <i>Within last 10 years</i> e. Hepatitis B (titers) - <i>Within last 10 years</i> f. tetanus diphtheria (TDAP) vaccine – <i>Shot record within last 10 years</i>  <i>Students are required to show COVID-19 vaccination OR complete the FCSON COVID-19 Declination form.</i>			Not Applicable
14. Drug Screen (10-panel drug screen) <i>Within 3 months of starting the program</i>			
15. BLS for Healthcare Provider (CPR) card			

\*Current LPNs enrolling into the AAS Program must meet the additional Admission requirements as noted above

\* If applying for FAFSA: School Code is 042350- note Master Promissory Note Signature is needed to use Financial Aid.