

## HOWARD COLLEGE NURSING PROGRAM

### ADMISSION CRITERIA

It is the policy of Howard College not to discriminate on the basis of sex, race, color, religion, age, national origin, veteran, or qualified disability in educational programs, activities, admission, or employment policies.

All applicants to the Howard College Nursing Program who have met the requirements for admission to the college will be evaluated according to the criteria specified.

#### Functional Abilities Essential for Nursing Practice

In response to the Americans with Disabilities Act (ADA), the National Council of State Boards of Nursing initiated a series of studies to identify competencies that a nurse must possess, in addition to those nursing knowledge, skills and abilities evaluated via a licensing examination, in order to function safely and effectively in a variety of employment settings.

<b>Category</b>	<b>Description</b>
<b>Gross Motor Skills</b>	Gross motor skills sufficient to provide the full range of safe and effective nursing care activities.
<b>Fine Motor Skills</b>	Fine motor skills sufficient to perform manual psychomotor skills.
<b>Physical Endurance</b>	Physical stamina sufficient to perform client care activities for entire length of work role.
<b>Physical Strength</b>	Physical strength sufficient to perform full range of required client care activities. Must be able to push, pull, lift at least 50 lbs.
<b>Mobility</b>	Physical strength sufficient to perform full range of required client care activities.
<b>Hearing</b>	Auditory ability sufficient for physical monitoring and assessment of client health care needs.
<b>Visual</b>	Visual ability sufficient for accurate observation and performance of nursing care.
<b>Tactile</b>	Tactile ability sufficient for physical monitoring and assessment of health care needs.
<b>Smell</b>	Olfactory ability sufficient to detect significant environmental and client odors.
<b>Reading</b>	Reading ability sufficient to comprehend the written word at a minimum of a tenth grade level.
<b>Arithmetic</b>	Arithmetic ability sufficient to do computations at a minimum of an eighth grade level. It includes the following three concepts: <b>Counting:</b> the act of enumerating or determining the number of items in a group. <b>Measuring:</b> the act or process of ascertaining the extent, dimensions or quantity of something. <b>Computing:</b> the act or process of performing mathematical calculations such as addition, subtraction, multiplication and division.
<b>Emotional Stability</b>	Emotional stability sufficient to assume responsibility/accountability for actions.
<b>Analytical Thinking</b>	Reasoning skills sufficient to perform deductive/inductive thinking for nursing decisions
<b>Critical Thinking Skill</b>	Critical thinking ability sufficient to exercise sound nursing judgment.
<b>Interpersonal Skills</b>	Interpersonal abilities sufficient to interact with individuals, families and groups respecting social, cultural and spiritual diversity.
<b>Communication Skills</b>	Communication abilities sufficient for interaction with others in oral and written form.

## APPLICATION FOR LICENSURE

A person who can answer "Yes" to any of the questions on 2-6 listed below may need to apply for a Declaratory Order (DO) as instructed by the Board of Nursing (BON). It is **mandatory to have a clearance letter/blue card prior to completion of the Nursing Program**. Responding **NO** when the answer is **YES** may result in program dismissal. Should the BON require you to complete a DO and you are not cleared, you will be withdrawn from the program and forfeit any funds paid to that point.

- Yes**    **No**   (1.) Are you enrolled, planning to enroll, or have you graduated from a nursing program?

Name of Nursing Program: \_\_\_\_\_

Location: \_\_\_\_\_  
City State

Type of Nursing Program: (circle one)   LVN   RN

Date of Enrollment: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

- Yes**    **No**   (2.) For any criminal offense, including those pending appeal, have you:
- A. been convicted of a misdemeanor?
  - B. been convicted of a felony?
  - C. pled nolo contendere, no contest, or guilty?
  - D. received deferred adjudication?
  - E. been placed on community supervision or court-ordered probation, whether or not adjudicated guilty?
  - F. been sentenced to serve jail or prison time? court-ordered confinement?
  - G. been granted pre-trial diversion?
  - H. been arrested or have any pending criminal charges?
  - I. been cited or charged with any violation of the law?
  - J. been subject of a court-martial; Article 15 violation; or received any form of military judgment/punishment/action?

(You may only exclude Class C misdemeanor traffic violations.)

**NOTE: Expunged and Sealed Offenses:** While expunged or sealed offenses, arrests, tickets, or citations need not be disclosed, it is your responsibility to ensure the offense, arrest, ticket or citation has, in fact, been expunged or sealed. It is recommended that you submit a copy of the Court Order expunging or sealing the record in question to our office with your application. Failure to reveal an offense, arrest, ticket, or citation that is not in fact expunged or sealed, will at a minimum, subject your license to a disciplinary fine. Non-disclosure of relevant offenses raises questions related to truthfulness and character.

**NOTE: Orders of Non-Disclosure:** Pursuant to Tex. Gov't Code § 552.142(b), if you have criminal matters that are the subject of an order of non-disclosure you are not required to reveal those criminal matters on this form. However, a criminal matter that is the subject of an order of non-disclosure may become a character and fitness issue. Pursuant to other sections of the Gov't Code chapter 411, the Texas Nursing Board is entitled to access criminal history record information that is the subject of an order of non-disclosure. If the Board discovers a criminal matter that is the subject of an order of non-disclosure, even if you properly did not reveal that matter, the Board may require you to provide information about any conduct that raises issues of character.

- Yes**    **No**   (3.) Are you currently the target or subject of a grand jury or governmental agency investigation?
- Yes**    **No**   (4.) Has any licensing authority refused to issue you a license or ever revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a license, certificate or multi-state privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?
- Yes**    **No**   (5.) \*Within the past five (5) years have you been addicted to and/or treated for the use of alcohol or any other drug?
- Yes**    **No**   (6.) \*Within the past five (5) years have you been diagnosed with, treated, or hospitalized for schizophrenia and/or psychotic disorders, bipolar disorder, paranoid personality disorder, antisocial personality disorder, or borderline personality disorder?\*
- If "**YES**" indicate the condition:    schizophrenia and/or psychotic disorders,    bipolar disorder,  
 paranoid personality disorder,    antisocial personality disorder,    borderline personality disorder

\*Pursuant to Occupations Code §301.207, information regarding a person's diagnosis or treatment for a physical condition, mental condition, or chemical dependency is confidential to the same extent that information collected as part of an investigation is confidential under the Occupations Code §301.466. You may indicate "NO" if you have completed and/ or are in compliance with Texas Peer Assistance Program for Nurses (TPAPN) for substance abuse or mental illness.

\*\*\*IF YOU ANSWER "YES" TO ANY QUESTION #2 - #6, YOU MUST PROVIDE A SIGNED AND DATED LETTER DESCRIBING THE INCIDENCE(S) THAT YOU ARE REPORTING TO THE BOARD.

### Attestation

I, the Petitioner referenced in this application, acknowledge this document is a legal document and I attest that the statements herein contained are true in every respect. I understand that no one else may submit this form on my behalf and that I am accountable and responsible for the accuracy of any answer or statement on this form.

Further, I understand that it is a violation of the 22 TAC § 217.12 (6)(l) and the Penal Code, sec 37.10, to submit a false statement to a government agency; and

I consent to release of confidential information to the Texas Board of Nursing and further authorize the Board to use and to release said information as needed for the evaluation and disposition of my application.

I understand that if I have any questions regarding this affidavit I should contact an attorney or the appropriate professional health provider.

I will immediately notify the Board if at any time after signing this affidavit I no longer meet the eligibility requirements.

Applicant's Signature \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Print Name \_\_\_\_\_

**RN NURSING PROGRAM SELECTION CRITERIA**

Applicant Name \_\_\_\_\_ Year \_\_\_\_\_

Points will be given for two of your pre-requisite courses:

Anatomy and Physiology I (lecture and lab) and Microbiology (lecture and lab).

**Points will be calculated at the end of Summer I. NO EXCEPTIONS.**

PRE-REQUISITE COURSES Points	Microbiology		Total Points	Points	A & P I		Total Points
	Lecture	Lab			Lecture	Lab	
1	C	C		1	C	C	
1.5	B	B		1.5	B	B	
2	A	A		2	A	A	

**Testing – Test of Essential Academic Skills Test (TEAS)**

Students seeking admission to the Nursing Program must take the Test of Essential Academic Skills Test (TEAS). The student will be responsible for registering and paying for the exam through the ATI website [www.atitesting.com](http://www.atitesting.com). The testing schedule is on the Howard College website [howardcollege.edu](http://howardcollege.edu). Please contact the Testing Coordinator at 325-481-8300 for more information. The TEAS test can be taken once every 30 days with a maximum number of three (3) times per admission cycle (September 1 – May 31).

**\*\*\*You must score the minimum requirement in each category in order to receive the points listed below. If you fall below the minimum, it will result in a score of zero (0) points. A score sheet with zero (0) in any of the three \*(3) categories may not be accepted. \*\*\*ONLY TEAS scores will be accepted. TEAS scores not taken at Howard College will be accepted from ATI. Scores will need to be mailed or emailed directly to the Howard College Health Professions Assistant, Debbie Sartain at [dsartain@howardcollege.edu](mailto:dsartain@howardcollege.edu).**

POINTS	READING Adjusted Individual Score	MATH Adjusted Individual Score	SCIENCE Adjusted Individual Score	TOTAL
2	at least 70%	at least 60 %	at least 40%	
4	80% or better	70% or better	50% or better	
6	90% or better	80% or better	60% or better	

**TOTAL POINTS MAX POSSIBLE – 26**

