



SUNY Corning Community College  
Nurse Education  
1 Academic Drive  
Corning, NY 14830  
607-937-1323 or  
1-800-358-7171 ex. 1323

**NURSE EDUCATION**

**APPLICATION**

**FALL 2021**

## Table of Contents

Demands of the Program .....	3
Application Process and Due Date .....	3
Initiating the Application Process .....	3
Begin/continue prerequisite coursework .....	4
Important to Know .....	4
Beginning the Nursing Application Process .....	4
Components of Your Application:.....	4
Nursing Admissions Essay.....	4
Letters of Recommendation .....	4
Submitting Your Application .....	5
Important Notices .....	5
Offers of Admission .....	5
Acceptance Decision.....	5
Disqualification of Admission .....	5
Entering The Program .....	5
Mandatory Orientation.....	5
Mandatory Background Check.....	6
Mandatory Boot Camp .....	6
Mandatory Immunizations/Screenings/Certifications .....	6
Licensure.....	6
Appendix A – Prerequisites for the 2021-2022 Nursing Program .....	7
Appendix B – Prerequisite PGPA Worksheet .....	8
Appendix C – Rubric for Nursing Entrance Essay .....	9
Appendix D - Points System for Application Ranking .....	10
STUDENT INFORMATION FORM for a student entering NURSING FALL 2021 .....	13
DEPARTMENT OF NURSE EDUCATION - ESSENTIAL FUNCTIONS FOR ADMISSION .....	14
ESSENTIAL FUNCTIONS FOR ADMISSION - Certification Form .....	15
APPLICATION VERIFICATION CHECKLIST .....	16
ASSOCIATE OF APPLIED SCIENCE NURSING PROGRAM .....	9
CONFIDENTIAL RECOMMENDATION FORM .....	9
Professional Recommendation Form.....	10

## **SUNY CORNING COMMUNITY COLLEGE ASSOCIATE OF APPLIED SCIENCE IN NURSING**

Thank you for your interest in the nursing program at SUNY Corning Community College, which is approved by the New York State Board of Nursing. Nursing is an emotionally fulfilling and rewarding career. As one of the fastest-growing occupations in the United States, nurses are in demand and may choose to work in a variety of specialties and settings. Nurses also enjoy the benefit of a profession that values life-long learning and offers many opportunities for not only educational, but also career advancement.

The obligations of the nursing program may pose unique personal as well as academic challenges. Most students have multiple responsibilities in addition to going to school (i.e., relationships, family, job). Success in the program takes a firm commitment from each student and SUNY Corning Community College (CCC) offers many services that are aimed at helping you succeed. Nursing is a demanding field and admission to nursing schools is a very competitive process. We strongly suggest you prepare well by meeting with an advisor in order to help you with your educational and career plans, by reading the application materials thoroughly and, if possible, talking with nurses in various settings to gain better understanding of the role of a nurse.

### **Demands of the Program**

It is important to understand the mental and physical demands of the nursing program and the career of the nurse. Applicants to the nursing program must be physically and mentally able to cope with the rigors of the curriculum and the demanding nature of the health professions. Nursing students must be able to grasp scientific concepts, arrange and calculate basic math and algebra problems, and communicate well verbally and in writing. Physically, students must be able to remain on their feet for extended periods, have sufficient strength to lift, the ability to hear heart and breath sounds, read fine print and identify skin tones such as pale, ashen, bluish, or gray.

Required clinical experiences may be assigned during day, evening, and night shifts and could be any day of the week. Students must have a dependable means of transportation to meet this requirement and may need to adjust family and work responsibilities to be available for clinical assignments.

Established academic and clinical requirements essential to the program of instruction apply to all students and cannot be waived. Attempts will be made to accommodate and retain qualified applicants with disabilities unless results of evaluations indicate that given reasonable accommodation, an individual will still be unable to perform the essential functions required by the program. Persons with questions concerning particular qualifications are encouraged to contact the Accessibility Services department to arrange an appointment for individual consultation and advice prior to application.

### **Application Process and Due Date**

The Nurse Education Office at the Health Education Center (HEC) must **receive** the application for the 2021-2022 year by 11:59 P.M. on March 1, 2021. It must be emailed to [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu)

### **Initiating the Application Process**

Students desiring entrance into the Nursing program must first gain admission to Corning Community College. Applicants who are accepted into the College will initially be placed in a "pre-nursing status." While in a pre-nursing status, the student completes coursework that will prepare them for courses specific to nursing.

Attending a Pre-Nursing Information Session or meeting with an academic advisor is highly recommended to obtain information and discuss academic planning. For dates and times of the pre-nursing information sessions, [visit the SUNY Corning Community College website](http://www.corning-cc.edu) (<http://www.corning-cc.edu>).

#### **Academic advisors are also available at SUNY CCC campuses:**

Spencer Hill campus - 607-962-9875	Monday-Thursday, 8 a.m. to 4:30 p.m. and Friday, 8 a.m. to 4:00 p.m.
Elmira campus - <a href="mailto:eacenter@corning-cc.edu">eacenter@corning-cc.edu</a>	Monday-Thursday, 8 a.m. to 4:30 p.m. Friday, 8 a.m. to 4 p.m.

**Advising by appointment, please email or call 607-937-1302 or [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu)**

## **Begin/continue prerequisite coursework**

Students are eligible to apply for admission to the nursing program while completing courses from the prerequisite list. All prerequisite course work must be completed with a grade of "C" or higher and must be completed by the end of spring term 2021 (See Appendix A). Application to the nursing program requires a minimum PGPA of 2.75 for all prerequisites completed (See Appendix B). Only completed prerequisites will be counted toward the prerequisite PGPA.

While not required for application or admission to the nursing program, students are strongly encouraged to complete BIOL 1210 and BIOL 1220 prior to beginning the nursing program. Scheduling of classes and the rigor of the nursing program make completion of these courses during the nursing program difficult to accomplish.

If a course has been taken more than once, the most recent grade received will be the grade considered for PGPA calculation.

## **Important to Know**

- An applicant who has been convicted of a felony may not be allowed to take the NCLEX. For more information, contact the Director of Nurse Education.
- Must be at least 18 years of age by June 1 of the intended graduation year to be eligible to take the NCLEX exam for licensure as a Registered Nurse.
- Ten percent of seats are reserved for high school students/graduates who meet program entrance requirements.

## **Beginning the Nursing Application Process**

1. Download the Nursing Application for Admission and supporting materials from the following the website ([CCC Nursing AAS Program Webpage](#))
2. Thoroughly read the Nursing Eligibility Packet.
3. Complete your Nursing Admissions Essay
4. Create your personal ATI account and complete your TEAS Exam
5. Submit your application

## **Components of Your Application:**

### **Nursing Admissions Essay**

For this essay, you will discuss the development of your interest in nursing; how your background and experience played a part in this development. These might include experiences in health care, community service, life experiences, and/or a mentor. How will your role as a Registered Nurse impact the nursing profession? The essay must be a maximum of two typed pages using 12pt. Times New Roman font, double-spaced, in portrait mode with one-inch margins. In the top left corner of the page, please include your name and SUNY CCC Student ID Number.

Your essay will be reviewed by the Admissions Committee and/or nursing faculty. The essay will be evaluated based on an established grading rubric (See Appendix C). This essay will help to provide evidence of your ability to communicate effectively through written words. Language, grammar and expression of ideas will be reviewed for clarity and creativity. Attention will be placed on formatting requirements as being indicative of the ability to follow directions. If there is evidence of plagiarism, the essay will not be graded and the applicant will not be accepted into the program.

### **TEAS Examination**

The TEAS (Test of Essential Academic Skills) assessment correlates with early nursing school success and consists of four sections: Reading, Mathematics, Science and English Language and Usage. You must first create an ATI account by going to ATI's website at [www.atitesting.com](http://www.atitesting.com). The official TEAS transcript is required by the application deadline in order to complete your nursing application for review. Students completing the TEAS exam must earn a Proficient (minimum of 58.7% overall score) or higher in the ATI Academic Preparedness Category as a minimum for admission. These results are valid for two years. Some exclusions to apply. See attached for more details.

### **Letters of Recommendation**

Two completed recommendation forms from a current/former teacher or employer addressing the applicant's desire to enter the nursing profession. Recommendations must be submitted via the recommenders' personal or professional email to [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu). Recommendations from family members are NOT acceptable.

## Submitting Your Application

- Applicants may submit their nursing application once their application packet is complete.
- Completed applications must be submitted with supporting documentation by the filing deadline of 11:59 P.M. on March 1<sup>st</sup>. (If March 1<sup>st</sup> falls on a weekend, the deadline will be considered 11:59pm on the following Monday.)
- All required items and the nursing application form must be turned in TOGETHER via email to [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu). Please be sure to include your SUNY Corning Community College ID number.
- You will receive an email when your application has been received, after January 25<sup>th</sup>, 2021.
- Only completed applications will be processed.
- Only prerequisite courses completed by the end of the previous fall term will be counted in the applicant's admission points.

## Important Notices

- Submitting an application does not guarantee that applicants have satisfied minimum criteria. It is your responsibility to ensure that all requirements have been met.
- Incomplete applications or applications missing documentation will not be considered! Applicants are advised to review their application packet thoroughly before submitting.
- After the filing deadline has passed, SUNY CCC Nursing Admissions Committee will evaluate all applications received by the deadline, for completeness and eligibility.
- Offers of admission will be based on a ranking system. In addition, grades of "I" or "W" in any "point earning course" must be repeated successfully prior to being considered for admission. The maximum number of points that can be earned is 100. SUNY CCC Nurse Education does not accept applicants who have received a grade of D or F in any required courses in the past 5 years.

## Offers of Admission

At the beginning of April 2020, applicants selected for admission will be determined by rank order based upon the point system (See Appendix D). After determination of total points, the highest-ranking individuals will be offered admission to the Fall nursing program. A decision letter will be emailed to all applicants using their SUNY CCC student email account – do not contact the department before receiving your email. The applicant is responsible for placing his/her correct email address on the nursing application. The applicant is responsible for checking their email for communication regarding the nursing program admission process. Additionally, should an applicant's email address change, notification must be provided to the Nurse Education Administrative Assistant by email at [myork4@corning-cc.edu](mailto:myork4@corning-cc.edu).

## Acceptance Decision

Students offered admission to the nursing program must indicate their acceptance of admission by signing and returning a "Statement of Intent" to enroll no later than the deadline indicated on the offer of admission. Once admitted, if a student chooses not to accept a seat in the program for that semester, he/she will need to re-apply for the next semester and compete with applicants for that semester. \*During remote operations, email acceptance from the students' CCC email address only will be considered an official signature for acceptance.

## Disqualification of Admission

If a student who has been offered admission into the program does not achieve the required grades in pre-requisite courses in the spring semester, the student will be removed from the cohort and will need to re-apply following successful completion of the courses.

## Entering The Program

### Mandatory Orientation

A mandatory orientation meeting for admitted applicants will be held in late spring. If you are unable to attend due to extenuating circumstances, you must notify the Nurse Education Department via email ([myork4@corning-cc.edu](mailto:myork4@corning-cc.edu)) prior to the orientation date. If you do not attend this orientation and have not previously notified the nursing department, the next eligible candidate will automatically be given your assigned place in the program. The

exact date and time of the orientation will be provided in the offer of admission letter.

Pertinent information (e.g. Health History and Physical Examination form, criminal background check, PA Child Abuse curriculum design at CCC, etc.) will be provided to accepted applicants at the orientation meeting in spring. The completed forms, with verification of immunizations, must be processed as outlined on the Health History form by the assigned due date or the applicant's space may be given to the next eligible alternate.

### **Mandatory Background Check**

A criminal background check and PA Child Abuse will be required as outlined at the orientation prior to beginning fall term classes. Nursing students must meet state statutory mandates for healthcare providers regardless of individual institution policy. Anyone with a criminal record that shows violation of the statutory mandates may not be allowed in a healthcare facility as a student. The purposes of statutory mandates are to prevent abuse situation with vulnerable adults and children. Because it is not possible to meet the objectives of the program without a student having clinical experience, should an applicant's background check indicate grounds for denial of clinical access to healthcare facilities, the applicant will not be eligible for admission into the nursing program.

### **Mandatory Boot Camp**

Admitted students will be required to attend a mandatory 3-day Boot Camp held in August. During Boot Camp, important information about the program, college support systems, textbooks, uniforms, software, and other required items will be presented.

### **Mandatory Immunizations/Screenings/Certifications**

Evidence of immunization requires documented receipt of vaccine or documented immunity *via titer or documented history of disease*.

- Hepatitis B (Hep B) series with titer to confirm immunity
- Measles, mumps and rubella (MMR)
- Tetanus, diphtheria, pertussis (Tdap)
- Varicella
- Influenza (seasonal flu)
- Tuberculosis (TB) Quantiferon Gold and T-spot test (IGRA blood test) or chest x-ray. (*Note: PPD skin test results will not be accepted*)
- Urine screening
- Pennsylvania Child Abuse Screening
- Criminal Background Check: Must include Social Security Number trace, state/national criminal background history, and sex offender registry check
- CPR/Basic Life Support (BLS) for healthcare providers. Trainings must comply with the American Heart Association standard and remain current throughout the nursing program.

\*All fees for required background checks, CPR, physical examination and immunizations are the responsibility of the applicant.

### **Licensure**

Admission to and graduation from the nursing program does not assure eligibility for licensure. The New York State Board of Nursing (NYSBN) makes the determination regarding eligibility for licensure.

If a student is arrested during the time he/she is enrolled in the nursing program, he/she must notify the Director of Nurse Education of the arrest. A possible outcome may be the student's inability to continue in the program. Any applicant or student whose nursing assistant certificate or license to practice nursing, at any level, in any state, has been suspended or revoked may be denied admission to or be dismissed from the program.

*Applicants are encouraged to complete their FAFSA application ([www.fafsa.gov](http://www.fafsa.gov)) BEGINNING October 1 for the academic entrance year - regardless of whether he/she has been officially accepted into the Nursing program. SUNY Corning Community College reserves the right to modify the criteria and the process for selection as needed.*

*CCC Admission Policy Statement: SUNY CCC supports an open-door policy and welcomes all students who can benefit from the instruction offered, regardless of their educational background. Prospective students are eligible for admission if they are a high school graduate, or have a GED. Admission to the College does not guarantee entrance to all programs. Students seeking to enter a special admit program must meet additional admission criteria.*

## **Appendix A – Prerequisites for the Nursing Program**

### **Minimum application requirements:**

- Pre-requisite courses must be successfully completed with a grade of C or higher.
- All prerequisites must be completed by the end of spring term preceding the entrance year.
- Students must have completed all developmental courses (Reading, Writing and Math), must be eligible to take ENGL 1010 based on CCC assessment tests and must be eligible to take MATH 1215 or higher.

### **Grade requirements:**

- Cumulative PGPA of prerequisite courses must be at least a 2.75. Students will not be considered for admission with a PGPA of less than 2.75.
- Individual prerequisite courses must be taken for a letter grade and must be completed with a grade of "C" or higher.

### **Prerequisite Courses:**

Students must successfully complete courses in biology and chemistry either in high school (with a grade of 75% or its letter grade equivalent or higher) or in college (with a grade of C or higher).

- Biology:
  - If taken in high school and received a final grade of 75% or greater OR taken in college and received a final grade of "C" or higher -- the Biology prerequisite has been met.
  - If taken in high school and received less than a final grade of 75% OR took in college and received less than a final grade of a "C" then you must take BIOL 1050 Human Biology or 1020 Intro to Biology: Animals and receive a final grade of "C" or higher.
  - If never taken in high school, then you must take a college course of BIOL 1050 Human Biology or BIOL 1020 Intro to Biology: Animals and receive a final grade of "C" or higher.
- Chemistry:
  - If taken in high school and received a final grade of 75% or greater OR taken in college and received a final grade of "C" or higher -- the Chemistry prerequisite has been met.
  - If taken in high school and received less than a final grade of 75% OR took in college and received less than a final grade of a "C" then you must take CHEM 1020 Intro to Organic & Biochemistry or CHEM 1010 Chemical Principles and receive a final grade of "C" or higher.
  - If never taken in high school, then you must take a college course of CHEM 1020 Intro to Organic & Biochemistry or CHEM 1010 Chemical Principles and receive a final grade of "C" or higher.

## Appendix B – Prerequisite PGPA Worksheet

SUNY Corning Community College - Associate of Applied Science Nursing Degree Program

NOTE: Official (sealed) transcripts from all institutions where prerequisite courses have been taken must be submitted to the Registrar's Office. A copy of all college transcripts need to be attached and submitted with the application. Only courses completed by the end of fall term with a letter grade of "C" or better will be used.

CCC NURSING PREREQUISITES	GRADE (Must be "C" or better)	COURSE CREDIT	POINTS A=4 B=3 C=2	GRADE POINTS (credits x points)	EARNED AT COLLEGE/ UNIVERSITY (Official transcripts must be attached if taken outside of CCC)	TERM & YEAR COMPLETED
Completed Courses						
CHEM-1020 - Chemistry or HS Chemistry						
BIOL 1050 - Biology or High School Biology						
BIOL 1210 -Principles of Anatomy & Physiology I						
BIOL 1220 - Principles Anatomy & Physiology II						
BIOL 2010 - Microbiology						
ENGL 1010 - English Composition I						
ENGL 1020 - English Composition II						
PSYC1101 - Intro to Psychology						
SOCI1010 - Intro to Sociology						
MATH 1215 or higher - College Math 1						
HLTH1510 - Introduction to Nutrition						
To calculate PGPA: Add highlighted columns.						

Total Grade Points (2nd highlighted column)\_\_\_\_divided by Total Credits (1st highlighted column) = PGPA\_  
(Must be at least 2.75)



### Appendix C – Rubric for Nursing Entrance Essay

Criterion	Below Average (1)	Average (2)	Good (3)	Excellent (4)	Score
<b>Content</b>	Thesis is not clear/not well developed	Main idea addresses prompt/has thesis	Main idea addresses prompt/well developed and consistent thesis	Main idea address prompt /well developed and consistent thesis	
<b>Organization</b>	There is little or no organization of the essay's content	The essay is difficult to follow because of inadequate transitions and/or disorganized format	The essay flows logically, can be easily followed, and is professionally written with some exceptions	The essay flows logically and can be easily followed. The essay is professionally written	
<b>Spelling, Grammar, and Formatting</b>	Major mechanical errors (Subject and verb agreement, fragments, etc.) The essay is difficult to read and understand (>10 errors)	Some mechanical errors (5-10 errors )	Relatively free of mechanical errors; complex and varied sentence structure (<5 errors)	Completely free of mechanical errors	
<b>Motivation for Nursing</b>	No sense of caring or altruism is demonstrated. Voice is not personal	Caring and altruism is mentioned; however, the ideas are not supported by examples of personal motivation and experiences. Voice is generally impersonal	Caring and altruism discussed; however, the ideas are minimally supported by examples of personal motivation and experiences. Voice is generally individualistic	Caring and altruism is evident throughout the essay supported by multiple examples of personal motivation and experiences. Voice is strongly individualistic	
<b>TOTAL</b>					

## Appendix D - Points System for Application Ranking

Step 1: PGPA listed in the Point Key. The number of points earned is based on the applicant's PGPA.

### Point Key

PGPA	Points Earned
4.0-3.70	5
3.69-3.30	4
3.29-3.0	3
2.99-2.75	2
2.74-below	0

Applicant's PGPA	
Total Points	

Step 2: Courses listed in the Point Key chart are evaluated to determine the number of points earned based on final grade earned. Possible point reductions will be applied.

### Grades Point Key

Grade Earned	A	A-	B+	B	B-	C+	C
Points Earned	12	10	8	6	4	2	1

Point Reduction: Reduce points by half if the course has been repeated. Example, BIOL 1210 repeat course grade is B then point earned would be 3 if the course has been repeated more than twice the student DOES NOT receive any points.

AAS Program Prerequisite Requirements	Final Grade Earned	Points Earned
HS Biology or BIOL 1050		
HS Chemistry or CHEM 1020		
Total Points		

AAS Program Requirements	Final Grade Earned	Points Earned
BIOL 1210 PAP I		
BIOL 1220 PAP II		
BIOL 2010		
Total Points		

AAS Program Requirements	Final Grade Earned	Points Earned
ENGL 1010 Comp I		
MATH 1215 Math I or Higher		
PSYC 1101 Intro to PSYC		

AAS Program Requirements	Final Grade Earned	Points Earned
SOCI 1010 Intro to SOC		
HLTH 1510 Intro to Nutrition		
Total Points		

Step 4: Additional points can be earned for the following:

Additional Points	If Yes, Points Earned	Points Added
College Degree MUST be an Accredited College	Associate Degree = 1 points Bachelor's Degree = 3 points Master's Degree = 5 points	
Completed more than 12 credits hours at CCC	3 points	
Currently employed in the health care field with direct patient care	3 points	
Active Duty or Veteran of US Military	2 points	
Attended an AAS, Nursing Information Session	1 point	
Male Student	1 point	
Minority Student	1 point	
Total Points		

PAGE LEFT BLANK INTENTIONALLY



## STUDENT INFORMATION FORM for a student entering NURSING I FALL 2020

**PACKET SUBMISSION**—Due to be submitted to [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu) by 11:59pm on March 1. (If March 1 falls on a weekend, the deadline is considered the following Monday.)

Please attach a copy of the following to this information form prior to submitting the packet:

- College transcripts for all schools attended, including SUNY CCC
- Reference forms via email submission to [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu)
- Essential Functions for Admission Form
- TEAS Assessment Results
- Application Verification Checklist
- Copies of any relevant certifications
- Essay

**Name:** Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

**Mailing address:** \_\_\_\_\_  
House# / Apt# / P.O. Box / Rural route \_\_\_\_\_ Street name \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip code** \_\_\_\_\_

**Phone** Daytime \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

**Personal e-mail:** \_\_\_\_\_

**College e-mail address:** \_\_\_\_\_

**Birthdate:** \_\_\_\_\_ **CCC CID#** C \_\_\_\_\_ **Last 4 of SS#** \_\_\_\_\_

**County of Residence:** Chemung \_\_\_\_\_ Schuyler \_\_\_\_\_ Steuben \_\_\_\_\_ Other - please identify \_\_\_\_\_

**Previous name(s) under which your academic records are listed** \_\_\_\_\_

**High School Attended & Graduation Date / GED Date** \_\_\_\_\_

**Previous degrees obtained:** \_\_\_\_\_  
\_\_\_\_\_ Dates \_\_\_\_\_ Degree Awarded \_\_\_\_\_

**Previous College attended:** \_\_\_\_\_  
\_\_\_\_\_ Dates \_\_\_\_\_ Degree Awarded \_\_\_\_\_

**HAVE YOU EVER BEEN CONVICTED OF A FELONY?** YES NO

**HAVE YOU EVER ATTENDED NURSING I AT CCC?** \_\_\_\_\_ If yes, please provide date(s) \_\_\_\_\_

### PREVIOUS NURSING PROGRAM

I was previously enrolled/I am currently enrolled in another RN Nursing program: Yes\* \_\_\_\_\_ No \_\_\_\_\_

*\*If yes, you must have earned a grade of "C" or higher in all of your previous nursing coursework and you must provide a letter of Good Academic Standing on your institution's letterhead in a sealed envelope from your previous institution's Dean of Nursing with this application.*



## **DEPARTMENT OF NURSE EDUCATION - ESSENTIAL FUNCTIONS FOR ADMISSION**

The Essential Functions for Admission of a nursing applicant/student enrolled in the ADN program requires that with student, with or without reasonable accommodations, must be able to:

- Demonstrate the ability to perform essential functions for a maximum of a 12-hour shift.
- Demonstrate the ability to protect a patient when the patient is standing and ambulating on all surfaces with or without the use of assistive devices, including canes, crutches and walkers.
- Demonstrate the ability to safely move a patient over 100 pounds from one surface to another using the appropriate level of help.
- Demonstrate safe body mechanics in the process of all patient treatments, including lifting and carrying small equipment (under 50 pounds) and moving large equipment (over 50 pounds).
- Demonstrate the ability to manipulate dials on equipment.
- Demonstrate the ability to coordinate simultaneous motions.
- Demonstrate the ability to perform occasional overhead extension.
- Demonstrate the ability to hear blood pressure, heart and lung sounds with or without corrective devices.
- Demonstrate the ability to palpate soft tissue including pulse, muscle and bones.
- Demonstrate the ability to perform nursing interventions such as sterile procedures, dressing changes and administer medications (including dosage calculations when necessary) following infection control procedures.
- Display adaptability to change.
- Establish effective relationships with others.
- Communicate effectively, safely and efficiently in English by:
  - Explaining procedures
  - Receiving information from others
  - Receiving information from written documents
- Distinguish color changes.
- Detect an unsafe environment change and carry out appropriate emergency procedures including:
  - Detecting subtle environmental changes and odors including but not limited to the smell of burning, smoke and spills.
  - Detect high and low sounds, including but not limited to alarms, bells, and emergency signals.

**Please read, sign, and submit the Essential Functions for Admission Certification Form included on the next page.**



## ESSENTIAL FUNCTIONS FOR ADMISSION - Certification Form

Corning Community College seeks to provide equal access to its program, services and activities for people with disabilities. These standards have been prepared to help applicants for admission to Corning Community College, Nurse Education Program. You are encouraged to ask questions about the program's essential functions for admission to clarify any questions and to determine whether you can meet the requirements with or without reasonable accommodation. Any information and inquiries about disabilities are handled in a confidential manner, to the extent possible within the accommodation process, and should be directed to the Office of Student Accessibility Services.

### INSTRUCTIONS:

**Please check one of the choices below. Sign, date, and return this form with your application packet.**

\_\_\_\_\_ I certify that I have read and understand the Essential Functions for Admission to Corning Community College Nurse Education Program and that I meet each of these standards established for this program to which I am applying.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Corning Community College ID Number

\_\_\_\_\_  
Printed or Typed Name

\_\_\_\_\_  
Date

\_\_\_\_\_ I certify that I have read and understand the Essential Functions for Admissions to Corning Community College Nurse Education Program. I believe that I could meet the Essential Functions with accommodation, and will contact the Office of Student Accessibility Services to determine whether reasonable accommodations can be made.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Corning Community College ID Number

\_\_\_\_\_  
Printed or Typed Name

\_\_\_\_\_  
Date



## APPLICATION VERIFICATION CHECKLIST

Please complete this verification checklist as part of your nursing application. Be sure to attach all worksheets, transcripts, and other supporting documentation as well as this checklist to your application.

REQUIRED (circle the number next to completed items):

1. I have completed, signed and attached the Nursing Program Eligibility Packet for Admission and understand that all admission decisions are final.
2. I have included college transcripts from all institutions where prerequisite courses have been taken. *(Must include SUNY Corning Community College transcript).*
3. Colleges previously attended:  
\_\_\_\_\_  
\_\_\_\_\_
4. I understand that I must pass a background check and PA Child Abuse Screen to be eligible.
5. I understand I must receive a score of 58.7 on the TEAS Assessment, unless I meet the exemption requirements.
6. I have signed and attached the Nursing Application Verification Checklist (this form.)

OPTIONAL:

1. I have earned points for a prior degree and have included an official transcript as proof.
2. I have earned additional points and attached the supporting documentation.

I understand that it is my responsibility to meet all program and application criteria. I have contacted SUNY CCC Department of Nurse Education regarding any questions I may have about the application process. I verify that all statements on this application are complete and true and I understand that falsification of any information may lead to disqualification or dismissal from the program. I understand that this application does not guarantee admission to the Nurse Education Program. Applications must be received by 11:59pm on Monday, March 1.  
*(During Remote Operations, email submission to [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu) is required.)*

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

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

**Email ENTIRE application to:** [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu)

**Or USPS Mail to:**

SUNY Corning Community College  
ATTN: Department of Nurse Education  
1 Academic Dr.  
Corning, New York 14830





## ASSOCIATE OF APPLIED SCIENCE NURSING PROGRAM CONFIDENTIAL RECOMMENDATION FORM

The applicant is a candidate for admission to the Nurse Education Program.  
Please complete this form and return to the Nurse Education Department at [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu)

**Applicant:** Please complete the following section only

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Pursuant to the federal law, a student admitted to Corning Community College, Nurse Education Program is entitled to inspect the recommendation unless the student waives the right. The Nurse Education Department does not require a waiver as a condition for admission, receipt of financial aid or receipt of any other services or benefits.

### Waiver

*The Family Education Rights and Privacy Act (FERPA) permits us to request, but not require that a student waive the right to inspect this recommendation. Be advised that the information contained on this form is used to evaluate the student's eligibility for admission to Corning Community College, Nurse Education Program. **Should the students elect to waive the right to access and review this information please sign and date below:***

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## Professional Recommendation Form

**Applicant name:** \_\_\_\_\_

**In what capacity have you known the applicant?** \_\_\_\_\_

**How long have you known the applicant?** \_\_\_\_\_

**Please estimate your opinion of the applicant's success in CCC's Nurse Education Program:**

Superior \_\_\_\_\_ Above Average \_\_\_\_\_ May Encounter Difficulty \_\_\_\_\_ Little Chance of Success \_\_\_\_\_

**Please endorse the applicant as a candidate for nursing.**

Endorse with enthusiasm \_\_\_\_\_ Endorse with reservation \_\_\_\_\_ Do not endorse \_\_\_\_\_

**Please rate the applicant on the following:**

	Strong	Average	Weak	Unable to Evaluate
Accountability/Responsibility				
Communication Skills				
Critical Thinking				
Integrity				
Interpersonal Skills				
Leadership				
Self-Direction				
Stress Management				
Time Management				

### Evaluator Remarks

*Using an additional page, please indicate any information relevant to the student's application to SUNY Corning Community College's Nurse Education Program. Return all documentation to: [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu)*

Your Name \_\_\_\_\_ Date \_\_\_\_\_

Your Signature \_\_\_\_\_ Your Job/Position \_\_\_\_\_

Your Company/Place of Employment \_\_\_\_\_

Telephone Number(s) Daytime \_\_\_\_\_ E-mail: \_\_\_\_\_

This form is for information gathering. The content alone does not determine acceptance to the Nursing Program.



## ASSOCIATE OF APPLIED SCIENCE NURSING PROGRAM CONFIDENTIAL RECOMMENDATION FORM

The applicant is a candidate for admission to the Nurse Education Program.  
Please complete this form and return to the Nurse Education Department at [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu)

**Applicant:** Please complete the following section only

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Pursuant to the federal law, a student admitted to Corning Community College, Nurse Education Program is entitled to inspect the recommendation unless the student waives the right. The Nurse Education Department does not require a waiver as a condition for admission, receipt of financial aid or receipt of any other services or benefits.

### Waiver

*The Family Education Rights and Privacy Act (FERPA) permits us to request, but not require that a student waive the right to inspect this recommendation. Be advised that the information contained on this form is used to evaluate the student's eligibility for admission to Corning Community College, Nurse Education Program. **Should the students elect to waive the right to access and review this information please sign and date below:***

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## Professional Recommendation Form

Applicant name: \_\_\_\_\_

In what capacity have you known the applicant? \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

Please estimate your opinion of the applicant's success in CCC's Nurse Education Program:

Superior \_\_\_\_\_ Above Average \_\_\_\_\_ May Encounter Difficulty \_\_\_\_\_ Little Chance of Success \_\_\_\_\_

Please endorse the applicant as a candidate for nursing.

Endorse with enthusiasm \_\_\_\_\_ Endorse with reservation \_\_\_\_\_ Do not endorse \_\_\_\_\_

Please rate the applicant on the following:

	Strong	Average	Weak	Unable to Evaluate
Accountability/Responsibility				
Communication Skills				
Critical Thinking				
Integrity				
Interpersonal Skills				
Leadership				
Self-Direction				
Stress Management				
Time Management				

### Evaluator Remarks

Using an additional page, please indicate any information relevant to the student's application to SUNY Corning Community College's Nurse Education Program. Return all documentation to: [cccnursing@corning-cc.edu](mailto:cccnursing@corning-cc.edu)

Your Name \_\_\_\_\_ Date \_\_\_\_\_

Your Signature \_\_\_\_\_ Your Job/Position \_\_\_\_\_

Your Company/Place of Employment \_\_\_\_\_

Telephone Number(s) Daytime \_\_\_\_\_ E-mail: \_\_\_\_\_