



**LOUISIANA DELTA**  
COMMUNITY COLLEGE

# **Associate of Science in Nursing**

**APPLICATION FOR**

**Winnsboro**

**FALL LPN to RN**

**ADMISSION**

**Application Acceptance Period**

March 1<sup>st</sup>

TO

April 1<sup>st</sup>

**11:00 AM – 3:00 PM**



## LDCC NURSING

Graduates receiving an Associate of Science in Nursing degree (ASN) from Louisiana Delta Community College (LDCC) are eligible to apply to the Louisiana State Board of Nursing (LSBN) for initial licensure, which requires examination by the National Council Licensure Examination for Registered Nurses (NCLEX-RN). After successfully passing the NCLEX-RN, graduates become Registered Nurses (RNs). The ADRN (Associate Degree RN) has been educated in the art and science of nursing as a generalist, able to provide safe and quality healthcare to patients in a variety of settings. LDCC ASN graduates learn to function within the legal scope of registered nursing practice, and to uphold professional standards of care to patients across the lifespan. The ASN degree provides the graduate with an educational foundation for articulation into a four-year university setting to obtain a Bachelor of Science in Nursing (BSN) if desired, which is required to continue to a graduate degree.

### LOUISIANA STATE BOARD OF NURSING (LSBN)

The LSBN requires all applicants to create an Application Portal and complete an authorization for a criminal background check. Applicants who have been charged with, pled guilty or nolo contendere to, been convicted of, or committed a criminal offense that involves a crime of violence or distribution of drugs may be denied the right to practice nursing as a student in Louisiana. LSBN can approve, deny, delay, or otherwise restrict the enrollment of the student. **If approval is not granted by LSBN, the student is not admitted to the program.**

### APPLICATION PROCESS

In order to be eligible for admission to the ASN Program, the applicant must first be admitted to LDCC. The College application is online at <http://www.ladelta.edu/Admissions/Apply/apply>. The application and all supporting documents must be received by designated deadlines. **Applicants are not considered for the ASN Program unless all required documents have been received in Enrollment Services, and the applicant's file is complete.** A copy of the application, and any supporting documents should be retained by the applicant. All correspondence will be sent to the applicant's email and/or physical address listed in the application.

#### **FOR CONSIDERATION OF THE LPN to RN APPLICATION, ALL ARE REQUIRED TO:**

Submit two copies of official verification from the Louisiana State Board of Practical Nurse Examiners (LSBPNE) of an unencumbered LA practical nurse license. The LSBPNE web-address for official verification is: [http://www.lsbpne.com/license\\_verification.phtml](http://www.lsbpne.com/license_verification.phtml).

#### **FOR CONSIDERATION OF THE LPN to RN APPLICATION, THOSE WHO GRADUATED FROM A PN INSTITUTION OTHER THAN LDCC ARE REQUIRED TO:**

Have Practical Nursing School send a **hard copy of the official transcript, with the school seal to:**

**Louisiana Delta Community College**

**Attn: Jodie Cooper**

**2889 HWY 15**

**Winnsboro, LA 71295**

**Application and admission are competitive, based on a 100 point rubric according to the following:**

#### **THE LPN TO RN TRACK –**

**1)** GPA in the required prerequisite courses with 32 credit hours, **2)** score on the pre-entrance *TEAS* test (highest of possible 3 attempts), **EXTRA POINTS FOR: 1)** minimum of 12 credit hours, with a grade of "C" or higher from LDCC, **2)** another degree (Associate, Bachelors, Master's, or Doctorate), with points given for the highest.

**NOTE: Meeting requirements does not guarantee admission.**

## **STEP 1 LOUISIANA DELTA COMMUNITY COLLEGE (LDCC) ADMISSION REQUIREMENTS:**

In order to be considered for admission to the nursing program you must be admitted to LDCC. If not already a LDCC student; or if were a previous LDCC student, and missed a major semester (Fall or Spring), meet all LDCC admission requirements. If assistance is needed, contact enrollment services at 318-367-6229. The applicant must, at a minimum, be completing the required prerequisite courses during the semester of application, achieving a "C" or higher.

## **STEP 2 LPN to RN TRACK OF ASN PROGRAM APPLICATION REQUIREMENTS**

1. The applicant MUST:
  - a. Meet LDCC admission requirements.
  - b. Have a cumulative GPA of 2.5 or higher.
  - c. Have a prerequisite GPA of 2.7 or higher.
  - d. Take and pass TEAS with minimum requirement.
  - e. At a minimum, be completing the below courses during the semester of application, achieving a "C" or higher.

### **Required Prerequisite Courses:**

<u>Course No.</u>	<u>Course Title</u>	<u>Credit Hours</u>
ENGL 101	Composition I	3
ENGL 102	Composition II	3
MATH 110	College Algebra	3
MATH 210	Introduction to Statistics	3
BIOL 210/211	Microbiology	4 (Lec 3; Lab 1)
BIOL 221/223	Human Anatomy & Physiology I	4 (Lec 3; Lab 1)
BIOL 222/224	Human Anatomy & Physiology II	4 (Lec 3; Lab 1)
HSCI 115	Pharmacology	3
PSYC 201	Introduction to Psychology	3
NURS 100	Introduction to Nursing	<u>2</u>
	<b>TOTAL</b>	<b>32</b>

2. Achieve a minimum composite score of **60** on the **TEAS** pre-entrance exam. There are three (3) attempts possible. If TEAS is taken at another testing center, an electronic transcript must be sent directly from ATI to LDCC ([jodiecooper@ladelta.edu](mailto:jodiecooper@ladelta.edu)). The ordering procedure for an ATI transcript is to visit: [www.atitesting.com](http://www.atitesting.com), **Online Store**, **Discover Transcript**, pay the fee of **\$27.00** (currently). **NO TRANSCRIPTS** are accepted directly from applicants.
3. A copy of the official degree certificate (with prior Associate, Bachelors, Master's, or Doctorate), if required.
4. A copy of **ALL** unofficial transcript(s) with **all** prerequisite courses **highlighted**.
5. A curriculum plan completely filled with **prerequisite** course data. The process is: under **Semester / Year**, write the semester and year (exp. FA16 for the fall of 2016) that the non-nursing courses were taken; under **Institution (if not Delta)** write where the courses were taken, if not at LDCC; under **Transfer/Substitution Course and Approval**, write the course number that was approved, and have the approver sign and date next to the course number; under **Grade**, write the LAST grade received in the non-nursing course; under **Quality Points**, place accordingly from transcript data.
6. Two copies of official verification from the Louisiana State Board of Practical Nurse Examiners (LSBPNE) of an unencumbered, current, license as a Practical Nurse in Louisiana.
7. If a PN graduate from an institution other than LDCC, have a **hard copy of the official transcript, with the school seal** sent to: Louisiana Delta Community College, Attn: Jodie Cooper, 2889 HWY 15, Winnsboro, LA 71295
8. A letter of recommendation from healthcare place of employment or from instructor.

9. **Submit in person, the complete, signed ASN Program application, and all supporting documents** (complete packet) to the RN department in Winnsboro by the appropriate date and time.

### SELECTION AND ADMISSION PROCESSES

#### **STEP 3** SELECTION:

1. The Selection Committee, composed of LDCC faculty and administrators, meet in the latter part of May (after courses are complete and rubrics are totaled), receive only numerical data, confirm rubric scores, and discuss statistical findings.
2. The numerical conclusions are: accepted or denied based on the top twenty (20) scores, with the next two (2) scores continuing as alternates; and officially voted on by the committee.

#### **STEP 4** ADMISSION:

1. **All** applicants will be notified of application status by the last day in June.
2. The top twenty (20) scoring applicants will receive a letter, which must be printed, and signed, indicating either acceptance or denial of candidacy for the LPN to RN track of the nursing program. The form must be scanned, and returned by the given deadline date to [wbnursing@ladelta.edu](mailto:wbnursing@ladelta.edu).
3. Upon receipt of acceptance letters, the candidate will receive packets to complete by the next given deadline date. Along with the packets, instructions for creating a portal and submitting an application to LSBN. The following examples are requirements, but not limitations:
  - a. LSBN Portal and Application Instructions
  - b. LSBN Fingerprint Authorization form and Instructions
  - c. LSBN Fingerprint Cards (from local authorities)
  - d. Student Background Investigation Disclosure Release form
4. Additionally, the following examples will also be sent as requirements, but not limited, which will be uploaded to the student-paid, account at [www.castlebranch.com](http://www.castlebranch.com):
  - a. LDCC ASN Program Physical Examination form
  - b. LDCC ASN Program TB Skin Test form
  - c. Immunization list (examples: MMR, Tdap, Hep B series, Varicella, Influenza)
  - d. Front and back copy of signed current American Heart Association Healthcare Provider BLS/CPR card
  - e. Front and back of health insurance card
  - f. LDCC ASN Program OSHA quiz, after watching the accompanying videos
5. Candidates who accept the offer for admission **must** attend a **MANDATORY Pre-Admission Nursing Orientation Session** with the date, time and location to be announced.
6. Candidates become LPN to RN Track ASN Program students when permission to enroll is received by LSBN. At this time, a Change of Major form is complete on each, sent to the Registrar's Office, and registration for classes may begin with the CRNs given.
7. Each semester, the week prior to the start of classes, a Math boot camp will take place, to assist student's success. The boot camp is not mandatory, but strongly encouraged and advised.

**CONFIDENTIAL PERSONAL/CONTACT INFORMATION (PRINT LEGIBLY)**

<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>	<b>LoLa ID</b>
<b>All Other Names Used</b>			
<b>Mailing Address</b>	<b>Preferred E-Mail Address</b>	<b>Alternative E-Mail Address</b>	
<b>Home and Work Phone Numbers, with area codes</b> (H) - - (W) - -		<b>Primary and Alternate Cell Phone Number(s)</b> (P) - - (A) - -	
<b>Alternate Contact Person Name and Phone Number(s)</b>		<b>Prime Time to Contact</b>	

**REQUIRED BY LOUISIANA STATE BOARD OF NURSING & ACCREDITATION COMMISSION FOR EDUCATION IN NURSING**

**Currently working as an LPN? Working Acute Care?**  
 Yes  No       Yes  No   
 Years of experience? \_\_\_\_\_  
 \_\_\_\_\_

**Working long-term Care? Working other setting?**  
 Yes  No       Yes  No   
 Years of experience? \_\_\_\_\_  
 Describe: \_\_\_\_\_  
 \_\_\_\_\_

LPN License Number: \_\_\_\_\_  
 \_\_\_\_\_  
 Exp. Date: \_\_\_\_\_  
 \_\_\_\_\_  
 Current Employer Name \_\_\_\_\_  
 \_\_\_\_\_

**Certification(s) & expiration(s) Address**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Year of PN graduation \_\_\_\_\_  
 Supervisor \_\_\_\_\_  
 \_\_\_\_\_  
 PN Institution \_\_\_\_\_  
 Number \_\_\_\_\_  
 \_\_\_\_\_  
 City and State \_\_\_\_\_  
 \_\_\_\_\_

**Indicate age range:**  
 Age 17-20   
 Age 21-25   
 Age 26-30   
 Age 31-40   
 Age 41-50   
 Age 51-60   
 61 & older

**Classification by Credit Hours:**  
 Freshman  < 30 hours  
 Sophomore  at least 30 hours  
 Junior  at least 60 hours  
 Senior  at least 90 hours

**Gender & Ethnicity:**  
 Female  
 Male  
 Hispanic  
 Asian  
 Black/African American  
 White/Caucasian  
 Am. Indian or Alaskan Native  
 Native Haw. or Other Pacific Islander

**Academic Status:**  
 Full-time (12 hrs) Yes  No   
 Part-time (<12 hrs) Yes  No

**Special Populations**  
 Disability  
 Economically Disadvantaged  
 Single Parent  
 Displaced Homemaker  
 Limited English  
 Migrant Status  
 Nontraditional (Male)

**If admitted to the program, I will also be taking non-nursing courses at the same time.**  
 Yes  No

Hard Copy of Official PN Transcript, with school seal, if non-LDCC PN graduate?  
 Yes  No

Letter of Recommendation from past or current healthcare employer or instructor?  
 Yes  No

**If no, the application packet is incomplete.**

By completing this application packet, and signing this form, I am making known my desire to apply for candidacy to the LPN to RN Track of the ASN Program. I understand that any attempt on my part to falsify or exclude information is cause for disqualification of my application and/or dismissal from the Associate of Science in Nursing Program. I hereby certify that all information presented is true to the best of my knowledge.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Received by:** \_\_\_\_\_ **Date/Time:** \_\_\_\_\_



**LOUISIANA DELTA COMMUNITY COLLEGE**  
**Associate of Science in Nursing**  
**LPN TO RN PROGRAM OPTION – RN AUDIT (CURRICULUM PLAN)**

<b>Name:</b>	<b>LDCC ID:</b>
<b>Email:</b>	<b>Phone No:</b>

**\*Students who place in any 095 developmental course OR two or more developmental courses are required to take FRST 100 (1 credit hour)**

Developmental Course(s) if necessary	Semester & Year	Institution (If not Delta)	Transfer/Substitution Course and Approval	Hours	Grade
Dev Ed Course:					
Dev Ed Course:					
FRST 100					

**\*Required for application to the ASN Program. \*\*Sciences (BIOL 210, 211, 221, 222, 223, 224) must have been taken within the last five years. If sciences are greater than five years, one may apply for a waiver through the ASN Program Director. No more than three (3) attempts of science course(s), within three (3) years, from any institution are allowed. However, with provision of documentation for extenuating circumstances, the applicant may apply for a waiver through the ASN Program Director.**

**Examples of documented extenuating circumstances are:**

- Personal serious illness requiring hospitalization.
- The student's child with serious illness requiring hospitalization.
- Death of an immediate family member.
- Military deployment.

**The applicant must, at a minimum, be completing the required non-nursing, prerequisite courses during the semester of application, achieving a "C" or higher. A score of 60 must be obtained on TEAS (Test of Essential Academic Skills). The highest TEAS score is used in the admission rubric. Scores are good for 3 years. There may be 3 attempts. After 3 attempts, the applicant is eligible to retake TEAS after a period of 3 years from the last attempt.**

Pre-Nursing Semester (AGS with Health Science Concentration)	Semester & Year	Institution (If not Delta)	Transfer/Substitution Course and Approval	Hours	Grade	Quality Points
ENGL 101-Composition I *				3		
ENGL 102-Composition II*				3		
MATH 110-College Algebra *				3		
MATH 210-Intro to Statistics*				3		
PSYC 201-Intro *				3		
BIOL 221-Anat & Phys I Lecture*/**				3		
BIOL 223-Anat & Phys I Lab */**				1		
BIOL 210-Microbiology Lecture**				3		
BIOL 211-Microbiology Lab **				1		
BIOL 222-Anat & Phys II Lecture **				3		
BIOL 224-Anat & Phys II Lab **				1		
HSCI 115-Pharmacology*				3		
NURS 100-Intro to Nursing*				2		
				<b>32</b>		<b>Subtotal Hours: 32</b>

LPN-RN Program Option students must complete NURS 132. When 132 is successfully completed, articulation credit is given for NURS 112 & 122.	Semester & Year	Institution (If not Delta)	Transfer/Substitution Course and Approval	Hours	Grade	Quality Points
NURS 132-LPN to RN Transition				14		
				<b>14</b>		<b>Subtotal Hours: 44</b>

**\*NURS 132 is a total of 6 credits; however, with successful completion of 132, 14 credits will appear on the student's transcript — 6 credits for NURS 112 and 8 credits for NURS 122.**

Nursing Level III	Semester & Year	Institution (If not Delta)	Transfer/Substitution Course and Approval	Hours	Grade	Quality Points
Humanities Requirement				3		
NURS 219-Parent/Child Nursing				6		
NURS 221-Mental Health Nursing				3		
				<b>12</b>		<b>Subtotal Hours: 56</b>

Nursing Level IV	Semester & Year	Institution (If not Delta)	Transfer/Substitution Course and Approval	Hours	Grade	Quality Points
Fine Arts Requirement				3		
NURS 232-Nursing of the Adult II				8		
NURS 233-Trends, Issues, & Management				1		
				<b>12</b>		<b>Subtotal Hours: 70</b>

**Total credits for Associate of Science in Nursing (ASN) degree: 70 Hours**

**12 Total Hours: 70**

**Signature of Advisor or Program Director:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Comments:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**STEP 5** Recheck the list to assure ALL documents are submitted

1. Keep a copy of everything!
2. **INCOMPLETE OR LATE APPLICATIONS WILL NOT BE ACCEPTED.**
  - a. **IF APPLICATION FOUND INCOMPLETE AFTER SUBMITTING, IT WILL BE DISQUALIFIED IN THE SELECTION PROCESS.**
3. **ANY FALSE OR EXCLUDED INFORMATION IS CAUSE FOR DISQUALIFICATION IN THE SELECTION PROCESS.**

**Best Regards,  
LDCC Winnsboro ASN Program**

