

Important information for prospective Nursing students:

California Senate Bill 1309 was implemented in academic year 2007-2008. All students meeting the established prerequisites and selection criteria for enrollment will be required to complete an assessment/readiness test. Those students that do not meet the minimum score will be referred to appropriate remediation. Students will be allowed one year to remediate and successfully retake the assessment/readiness test. Any student not meeting the remediation requirements will be required to restart the application process as a new student.

Thank you.

K. Bedell, RN, MSN, FNP  
Director Allied Health Programs



**Application for Admission to the Advanced Standing Curriculum**

1. Name: \_\_\_\_\_  
Last First MI SS #

2. Address: \_\_\_\_\_ Phone(s): \_\_\_\_\_  
No. Street City, State Zip

# 1 & 2 (name, address, phone) **must** be kept current with Allied Health Department **and** Admissions & Records Office

3. Email Address: \_\_\_\_\_

4. High School(s)\* \_\_\_\_\_ Name(s) during \_\_\_\_\_  
 Attended: \_\_\_\_\_ attendance: \_\_\_\_\_  
 (check one below) \_\_\_\_\_

Date of  Graduation or  \_\_\_\_\_

GED\* : \_\_\_\_\_

\* See GED or Foreign High School / Post-Secondary Education Transcript Evaluation Information Sheet included in program information packet

5. List <b>all</b> other schools* attended including Gavilan College	Name(s) during attendance	Dates Attended From To
_____	_____	_____
_____	_____	_____
_____	_____	_____

\* See GED or Foreign High School / Post-Secondary Education Transcript Evaluation Information Sheet included in program information packet

6. Indicate which Gavilan College Advanced Standing program you intend to complete: ***(check or circle one below)***  
 ~ Associate Degree in Registered Nursing ~ 30 Unit Option

Indicate courses completed: *(Other recency requirements apply - please consult a Gavilan College counselor)*

Prerequisite Courses	Course Discipline, Number & Title	Name of College/School Where Completed or Date of Placement Test	Semester & Year Completed
MATH 400* Elements of Arithmetic			
MATH 205* Elementary Algebra			
MATH 233* Intermediate Algebra			
ENGL 420* Reading Improvement			
ENGL 440* Basic Writing			
ENGL 250* Practical Writing			
ENGL 260* Preparation for College Reading			
AH 32 Cardiopulmonary Resuscitation (BCLS)			
AH 3 Person in the Life Cycle			
AH 11 Nutrition			
BIO 7 Human Anatomy <b><i>or</i></b> BIO 15 Survey of Anatomy and Physiology			
BIO 8 General Microbiology			
BIO 9 Human Physiology			
ENGL 1A Composition			
CHEM 30A Elementary Chemistry (recommended)			
PSYC 1A Introduction to Psychology			
CMUN 1A Introduction to Public Speaking			
SOC 1A Introduction to Sociology			
AH 51 Medical-Surgical Nursing			
AH 52 Medical-Surgical Nursing			

AH 53 Medical-Surgical/Maternal Nursing			
AH 54 Medical-Surgical/Pediatric Nursing			
AH 16 Intravenous Therapy/Blood Withdrawal			

*(\* courses may be satisfied by Gavilan College Placement Test--two year recency required)*

7. Describe prior work experience including the following (most recent first): *Use additional paper as needed*

Dates Employed		Name of Agency	Address	Title and Job Description
From	To			
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

8. List three references (two, if possible, from former employers) who can comment on your suitability for the Advanced Standing Curriculum. These references may not be related to you in any way. Have them complete the attached forms and return to you in sealed envelopes with signature of reference on the envelope flap. Completed reference forms will be kept confidential.

Name	Address	City/State/Zip	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9. Describe briefly your life goals and the role your acceptance into the Registered Nursing Curriculum would play in meeting these goals. (Use additional paper as needed.)

*I certify that the statements in this application are true and complete to the best of my knowledge.*

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

*I hereby give permission for the references listed above to respond to the questionnaire of the Gavilan College Allied Health Department. I understand that these reference reports will be kept confidential, and I waive my right to see them.*

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

**Health Statement for Nursing Applicants**

**TO BE COMPLETED BY THE STUDENT**

Name of Applicant \_\_\_\_\_ SS# \_\_\_\_\_

Please review the attached physical requirements for nursing students.

Do you have any physical condition or other disability which may limit your ability to perform the tasks and functions of a Registered Nurse?  Yes  No

If yes, what can be done to accommodate your disability?

*Students admitted to the program are required to complete immunizations or titers in accordance with agency policies and California Department of Health Services recommendations of immunizations or titers for hospital and medical outpatient facility personnel, before a student may enter the clinical area. Written proof must be on file.*

**TO BE COMPLETED BY EXAMINING PHYSICIAN / NURSE PRACTITIONER**

Please review the attached physical requirements for nursing students. Complete this form and **return to the student in a sealed envelope.**

Date of complete physical examination: \_\_\_\_\_

Does the applicant have any physical condition or disability which may limit his/her ability to perform the tasks and functions of a Registered Nurse?  Yes  No

If yes, what can be done to accommodate his/her disability?

Printed Name/Examiner: \_\_\_\_\_ Calif. License # \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

**GAVILAN COLLEGE**  
Physical Requirements for Nursing Students

1. Standing / Walking  
75% to 95% of work day spent standing/walking on carpet, tile, linoleum, asphalt and cement while providing patient care, getting medication from the pharmacy, delivering lab specimens, monitoring patient response, charting, and handling patient flow. Approximate distance: 3 to 5 miles.
2. Sitting  
5% to 25% of work day spent sitting while operating computers, answering the telephone, writing reports, reviewing computer printout, charting, calling doctors, and scheduling appointments.
3. Lifting  
10% to 15% of work day spent floor to knee, knee to waist, waist to waist and waist to shoulder level lifting while handling supplies (5 pounds – 20 to 30 times per shift), handling medications (2.5 pounds – 20 times per shift), using trays (5 to 10 pounds), charting patient information (1 pound) and assisting with positioning patient in bed/moving patients on and off gurneys and exam tables (average weight 200 pounds).
4. Carrying  
65% of work day spent carrying at waist level, tray (5 to 10 pounds) for up to 5 miles.
5. Pushing / Pulling  
40% of work day spent pushing/pulling while moving IVAC's, using carts, relocating IV stands, utilizing crash carts, moving patient beds to install IV's, opening and closing patient doors and stairway doors, opening refrigerator door, pushing/pulling beds, gurneys, and wheelchairs, and moving office equipment and furniture.
6. Climbing  
15% to 25% of work day spent climbing stairs going to and from other departments, office, and homes.
7. Balancing  
15% to 25%; see climbing.
8. Stooping / Kneeling  
10% of work day spent stooping/kneeling while retrieving medications from refrigerator, loading tray from supplies on lower shelves, using lower shelves of cart, stocking shelves, and retrieving items from bedside stands, bathrooms, storerooms, etc.
9. Bending  
20% of work day spent bending at the waist while performing patient checks, gathering supplies, assisting with patient positioning, adjusting patient beds, adjusting exam table, tying and untying patient restraints, bathing patients, and emptying tubes.
10. Crouching  
2% retrieving patient belongings.
11. Crawling  
2% retrieving patient belongings.
12. Reaching / Stretching  
35% of work day spent reaching/stretching while providing patient care, gathering supplies, operating the computer, disposing of dirty needles in boxes, plugging in tubing over bed, assisting with patient positioning, connecting equipment (CPM's, SCD's, PCA's and EKG machine), cleaning office equipment, and retrieving patient files.
13. Handling  
90% hand-wrist movement, hand-eye coordination, simple firm grasping required.
14. Fingering  
90% fine and gross finger dexterity required.
15. Feeling  
90% normal tactile feeling required. Sensitivity to heat, cold, pain, pressure, etc.
16. Throwing  
None required
17. Twisting  
15% of work day spent twisting at the waist while gathering supplies and equipment, operating equipment, bathing, and providing patient care.
18. Talking  
95% average ability required. Fluent in English. Absence of speech impediments, ability to communicate with wide variety of people and styles, ability to be easily understood.
19. Hearing  
95% ability to hear and interpret many people and correctly interpret what is heard; i.e., physicians' orders whether verbal or over telephone, patient complaints, physical assessment, fire and equipment alarms, etc.

20. Seeing  
95% acute visual skills necessary to detect signs and symptoms, coloring and body language of patients, color of wounds and drainage, infiltrated IV sites, and possible infections anywhere. Interpret written work accurately, read characters and identify colors on the computer screen.

**Reference Letter/Questionnaire for Advanced Standing Application**

**TO BE COMPLETED BY THE STUDENT:**

Name of Applicant: \_\_\_\_\_

**TO BE COMPLETED BY REFERENCE:** Please complete this questionnaire for the above named student who is an applicant to Advanced Standing Program at Gavilan College. Reference letters are confidential. **Return completed form to the student in a sealed envelope. *Sign over the envelope flap.***

In what capacity do you know the above-named applicant?

How long have you known the applicant?

How would you rate this person on the following factors:

(1 = poor, 2 = below average, 3 = average, 4 = above average, 5 = superior, NO = not observed)

1. Emotional stability	1	2	3	4	5	NO
2. Physical stamina	1	2	3	4	5	NO
3. Ability to learn quickly	1	2	3	4	5	NO
4. Ability to apply learning to practical situations	1	2	3	4	5	NO
5. Neatness and attention to detail	1	2	3	4	5	NO
6. Response to constructive criticism	1	2	3	4	5	NO
7. Conscientiousness	1	2	3	4	5	NO
8. Integrity	1	2	3	4	5	NO
9. Performance under stress	1	2	3	4	5	NO

Please comment on any rating of "below average."

Make a statement regarding evaluation of potential for a nursing career.

Additional comments, if any.

Signature of Reference: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

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