



## APPLICATION for the BASIC NURSING APPLICANT

***Fall Admissions***- Submit Application Packet between  
**October 1<sup>st</sup> - February 1<sup>st</sup>**

- **Applications postmarked after Feb. 1<sup>st</sup> will not be accepted.**

Check each box to ensure your application is complete.

- Basic Nursing Applicant requesting admission to start the nursing program, first semester.
- Submit official college transcripts from ALL INSTITUTIONS ATTENDED. (You do not have to submit transcripts from Contra Costa College, Los Medanos College, or Diablo Valley College).
- Mail or walk-in your completed nursing application packet to:

**Contra Costa College**  
**Admissions & Records SSC #115**  
**ATTN: Nursing Application**  
2600 Mission Bell Drive  
San Pablo, CA 94806

- **Incomplete applications will not be accepted.**



# CONTRA COSTA COLLEGE

**Office Use Only**  
 Forwarded To Committee  
 YES  NO: \_\_\_\_\_

APPLICATION

**Print Clearly & Do Not Leave Blanks. If not applicable, please write N/A in the pertaining section. Please Read the Entire Application Carefully.**

## Registered Nursing Program

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Last Name

First Name

Middle Name

List ALL Previous Names Used:	
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_____ - _____		@insite.4cd.edu
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Social Security Number

CCC Student ID# xxxxxxxx

Email Address

*\*For Statistical Purposes Only*

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Home Address

City

State

Zip Code

(      )	(      )	
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Home Phone

Cell Phone

Birthdate

MM/DD/YY

Did you previously apply to the CCC Nursing Program?:  Yes  No If YES, list the year you applied: \_\_\_\_\_

US Citizen:  Yes  No If No, Indicate Status: \_\_\_\_\_

**If you have ever been enrolled or accepted in any R.N. nursing program, please state:**

College: \_\_\_\_\_ Year: \_\_\_\_\_ Phone: \_\_\_\_\_

Courses Completed: \_\_\_\_\_ Reason for withdrawal: \_\_\_\_\_

<b>Emergency Contact Information</b>	Name: _____	Relation to you: _____
	Day Phone Number: _____	Evening Phone Number: _____
Relative that doesn't live with you:	Name: _____	Relation to you: _____
	Day Phone Number: _____	Evening Phone Number: _____

I, \_\_\_\_\_, understand that any omission(s) and/or information stated on my CCC nursing program application found to be inaccurate and/or fraudulent may be cause for my application to be withdrawn from the qualified applicant pool.

Signature: \_\_\_\_\_

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



# CONTRA COSTA COLLEGE

Full Name: \_\_\_\_\_ CCC Student ID: \_\_\_\_\_

**Print Clearly & Do Not Leave Blanks. If not applicable, please write N/A in the pertaining section.**

Required Course	Course Number/ Name	Units	Grade	College/City	Year	Repeated? No. of Times	OFFICE USE ONLY Reviewer: _____
<b>Area A:</b>							
<b>Anatomy</b> Biosc-132							^Must Contain Lab
<b>Physiology</b> Biosc-134							^Must Contain Lab
<b>Microbiology</b> Biosc-119							^Must Contain Lab
<b>English Composition</b> Engl-001A or Engl-001C or Engl-002B							
<b>Drug Dosage Calculation</b> Nurs-205							Minimum 2.0 units
<b>Pharmacology for Nursing</b> Nurs-212							Minimum 2.0 units

**Minimum 2.75 GPA required for Area A**

Required Course	Course Number/ Name	Units	Grade	College/City	Year	Repeated? No. of Times	OFFICE USE ONLY Reviewer: _____
<b>Area B:</b>							
<b>Sociology/Anthropology</b> Socio-220 or Anthro-130							
<b>Psychology</b> Psych-130 or Psych-220							
<b>Human Communication</b> Spch-120, 121, or 121-I, or 128							
<b>Developmental Psych</b> Psych-126, 128							

**Minimum 3.00 GPA required for Area B**

**All 10 prerequisite courses must be completed before the applicant will be considered eligible for admissions to the basic nursing lottery pool. Student who have not completed all prerequisites with the minimum GPA requirements will be omitted from the lottery. Incomplete applications will not be accepted.**

I, \_\_\_\_\_, certify that all information provided in connection with my application is true, correct, and complete. I understand that providing false information or omitting required information is grounds for denial of enrollment from the Nursing Program.

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

## **Determining Program Eligibility**

Area A:

Required Prerequisite Courses:

Course	Units Att	Grade Pts.	GPA
Biosc-132 (units-5.0) or equivalent			
Biosc-134 (units-5.0) or equivalent			
Bisoc-119 (units-5.0) or equivalent			
Engl-1A or 1C or 2B (units-3 - 4) or equivalent			
Nurs-205 (units-2.0)			
Nurs-212 (units-2.0)			
<b>TOTAL</b>			

\*\*\* Minimum GPA of 2.75 is required for Area A\*\*\*

Nurs-205 and Nursing 212 or equivalent of either course must be completed with a minimum of 2.0 units. Courses completed with less than the minimum 2.0 units will not be accepted as equivalent courses.

Course	Units Att	Grade Pts.	GPA
Socio-220 or Anthro-130 (units-3.0) or equivalent			
Psych-130 or Psych-220 (units-3.0) or equivalent			
Spch-120, 121, 121-I or 128 (units-3.0) or equivalent			
Psych-126, or 128 (units-3.0) or equivalent			
<b>TOTAL</b>			

\*\*\* Minimum GPA of 3.00 is required for Area B\*\*\*

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## How to Calculate Your Grade Point Average (GPA)

Your grade point average (GPA) is calculated by dividing the total amount of grade points earned by the total amount of credit hours attempted. Your grade point average may range from 0.0 to a 4.0.

For example:

- A = 4.00 grade points
- A- = 3.70 grade points
- B+ = 3.33 grade points
- B = 3.00 grade points
- B- = 2.70 grade points
- C+ = 2.30 grade points
- C = 2.00 grade points
- C- = 1.70 grade points

Example Student Transcript				
Course	Credit Hours	Grade	Grade Points	Grade Points
English 1a	4	A	16	
Biology 132	5	B	15	
Socio 120	3	B	9	
Psych 220	3	B	9	
<b>15 Total Credit Hours Attempted</b>			<b>48</b>	<b>Total Grade Points</b>

To get the example student's GPA, the total grade points are divided by the total credit hours attempted.

<b>Total Grade Points</b>		48	
<b>Total Credit Hours Attempted</b>	<u>divided by</u>	15	= 3.2

You can total your current semester courses and credits with our online GPA Calculator (above).