APPLICATION for the
TRANSFER APPLICANT

Spring Admission	***Fall Admission***
Submit Application by October 1st	Submit Application by February1st

- **Applications postmarked after the due date will not be accepted.**

Check each box to ensure your application is complete.

☐ <u>Transfer Nursing Applicant requesting admission</u> to start the nursing program.

☐ 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).

☐ Application to Contra Costa College via opencccapply.net:

☐ Personal Statement Letter addressed to CCC Nursing Dept.

☐ 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.**

Last Name   **First** Name   CCC Student ID

CONTRA COSTA COLLEGE

APPLICATION

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

R e g i s t e r e d   N u r s i n g   P r o g r a m

Last Name	**First** Name	**Middle** Name

List ALL Previous Names Used:	
__ __ __ - __ - __ __ __ __		@insite.4cd.edu

__ __ __ __ __ __ __

Social Security Number   CCC Student ID# *xxxxxx*   Email Address

For Statistical Purposes Only

Home Address	City	State	Zip Code

( )	( )	

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: _____

Emergency Contact Information	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on my CCC nursing program application found to be inaccurate and/or fraudulent may be cause for my application to be withdrawn from the qualified applicant pool.*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

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:_____
Area A:							
Anatomy Biosc-132							^Must Contain Lab
Physiology Biosc-134							^Must Contain Lab
Microbiology Biosc-119 or 148							^Must Contain Lab
English Composition Engl-001A or Engl-001B or Engl-001C or Engl-002B							
Drug Dosage Calculations Nurs-205							^Must Be Minimum 2.0 units
Pharmacology for Nurses Nurs-212							^Must Be 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:_____
Area B:							
Introduction to Sociology Socio-220 or Anthro-130							
Psychology Psych-130 or Psych-220							
Human Communication Spch-120 or 121 or 128							
Developmental Psych Psych-126 or 128							

Minimum 3.00 GPA required for Area B

All 10 prerequiste courses must be completed before the applicant will be considered eligible for admissions to the nursing program. Student who have not completed all prerequisites with the minimum GPA requirements will be omitted from consideration. 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: _____

Contra Costa College

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 or 148 (units-5.0) or equivalent			
English-1A or 1B or 1C or 2B (units- 3- 4) or equivalent			
Nurs-205 (units-2.0)			
Nurs-212 (units-2.0)			
TOTAL			

*** 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 or 121 or 128 (units-3.0) or equivalent			
Psych-126 or 128 (units-3.0) or equivalent			
TOTAL			

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

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	Grad	e Points
English 1a	4	A	16	
Biology 132	5	B	15	
Socio 120	3	B	9	
Psych 220	3	B	9	

15 Total Credit Hours Attempted   **48   Total Grade Points**

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

Total Grade Points		48	
Total Credit Hours Attempted	divided by	15	= 3.2

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