CHABOT COLLEGE FALL 2020 REGISTERED NURSING PROGRAM APPLICATION

REQUIRED APPLICATION PACKET CHECKLIST

Student Name: _____

Student W ID: _____

I have completed, checked and enclosed the following required documents:

Part 1: Confirmation Page

		OFFICE USE ONLY	
❑ Enclosed	I have submitted the Fall 2020 Registered Nursing Program application online and received my confirmation page with confirmation number.	❑ Received	❑ Not Enclosed

Part 2: Official Transcripts

List **ALL** colleges/universities attended even if no nursing related courses were taken. Submit one official transcript from each institution with this application packet or a receipt/confirmation of electronic transcripts requested. All transcripts or confirmation/receipt of electronic request, excluding Chabot and Las Positas College transcripts, must be enclosed in this packet even if it is already transcripts are on file with the Admissions and Records Office.

❑ Yes	I attended Chabot College and/or Las Positas College. *Do NOT submit transcripts for Chabot and/or Las Positas College.*	

	List name of each college/university attended below.	OFFICE USE ONLY	
❑ Enclosed ❑ Electronic	1.	❑ Received	❑ Not Enclosed
❑ Enclosed ❑ Electronic	2.	❑ Received	❑ Not Enclosed
❑ Enclosed ❑ Electronic	3.	❑ Received	❑ Not Enclosed
❑ Enclosed ❑ Electronic	4.	❑ Received	❑ Not Enclosed
❑ Enclosed ❑ Electronic	5.	❑ Received	❑ Not Enclosed

If you have attended more than five colleges, complete page 2.

Part 3: Criterion Worksheet – I have completed, signed and enclosed the Criterion Worksheet Summary Page and attached the following supporting documentation.

Estimated Total Score: _____ (Sections 1 through 7, Maximum 100 points)

			OFFICE USE ONLY	
❑ Enclosed	❑ N/A	Section 1: Transcript(s) Only one set of transcripts is required for Section 1 and 3	❑ Received	❑ Not Enclosed
❑ Enclosed	❑ N/A	Section 2: Licenses and/or Work Verification Letter	❑ Received	❑ Not Enclosed
❑ Enclosed	❑ N/A	Section 3: Transcript(s) Only one set of transcripts is required for Section 1 and 3	❑ Received	❑ Not Enclosed
❑ Enclosed	❑ N/A	Section 4: Life Experiences Statement	❑ Received	❑ Not Enclosed
❑ Enclosed	❑ N/A	Section 5: Military Service (DD 214)	❑ Received	❑ Not Enclosed
❑ Enclosed	❑ N/A	Section 6: Second Language Proficiency Statement	❑ Received	❑ Not Enclosed
❑ Enclosed	❑ N/A	Section 7: **ATI TEAS unofficial** test results page 1 or Unofficial TEAS Transcript	❑ Received	❑ Not Enclosed

Additional Information Required

			OFFICE USE ONLY	
❑ Enclosed	Meeting Verification Card	# on Card:	❑ Received	❑ Not Enclosed

Verify Zonemail Account

Application confirmation and admission status to the Program will be sent via your Chabot student Zone-mail email account. My Chabot student Zone-mail account is:

	@zonemail.clpccd.edu		
❑ Verified		❑ Verified	❑ Not Submitted

Send this checklist and enclose all required documents in one packet to:

Chabot College
Nursing Application – Box 5
25555 Hesperian Blvd.
Hayward, CA 94545

Note: All applications must <u>be postmarked on or before January 31, 2020</u>. Hand-carried documents will not be accepted.

OFFICE USE – APPLICATION	
❑ Complete	
❑ Incomplete	
O Confirmation Sheet	
O Criterion Worksheet	
O Transcripts	
❑ Postcard/Email Sent	

CHABOT COLLEGE FALL 2020 REGISTERED NURSING PROGRAM APPLICATION
REQUIRED APPLICATION PACKET CHECKLIST

Student Name: _____

Student W ID: _____

Only complete and submit this section if you have attended more than five colleges.

	List name of each college/university attended	OFFICE USE ONLY	
❑ Enclosed ❑ Electronic	6.	❑ Received	❑ Not Enclosed
❑ Enclosed ❑ Electronic	7.	❑ Received	❑ Not Enclosed
❑ Enclosed ❑ Electronic	8.	❑ Received	❑ Not Enclosed
❑ Enclosed ❑ Electronic	9.	❑ Received	❑ Not Enclosed
❑ Enclosed ❑ Electronic	10.	❑ Received	❑ Not Enclosed