

CHABOT COLLEGE FALL 2019 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

Enclosed I have submitted the Fall 2019 Registered Nursing Program application online and received my confirmation page with confirmation number.

OFFICE USE ONLY	
<input type="checkbox"/> Received	<input type="checkbox"/> 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	
<input type="checkbox"/> Enclosed <input type="checkbox"/> Electronic 1.	<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Enclosed <input type="checkbox"/> Electronic 2.	<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Enclosed <input type="checkbox"/> Electronic 3.	<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Enclosed <input type="checkbox"/> Electronic 4.	<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Enclosed <input type="checkbox"/> Electronic 5.	<input type="checkbox"/> Received	<input type="checkbox"/> 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	
<input type="checkbox"/> Enclosed <input type="checkbox"/> N/A Section 1 - Transcript(s) Only one set of transcripts is required for Section 1 and 3	<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Enclosed <input type="checkbox"/> N/A Section 2 – Licenses and/or Work Verification Letter	<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Enclosed <input type="checkbox"/> N/A Section 3 – Transcript(s) Only one set of transcripts is required for Section 1 and 3	<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Enclosed <input type="checkbox"/> N/A Section 4 – Life Experiences Statement	<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Enclosed <input type="checkbox"/> N/A Section 5 – Military Service (DD 214)	<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Enclosed <input type="checkbox"/> N/A Section 6 – Second Language Proficiency Statement	<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Enclosed <input type="checkbox"/> N/A Section 7 – Unofficial TEAS Transcript or ATI TEAS unofficial results page 1	<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed

Additional Information Required

<input type="checkbox"/> Enclosed Meeting Verification Card	# on Card:	<input type="checkbox"/> Received	<input type="checkbox"/> 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:

<input type="checkbox"/> Verified _____	@zonemail.clpccd.edu	<input type="checkbox"/> Verified	<input type="checkbox"/> 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 be postmarked on or before January 31, 2019.
Hand-carried documents will not be accepted.**

OFFICE USE – APPLICATION	
<input type="checkbox"/> Complete	
<input type="checkbox"/> Incomplete	
○ Confirmation Sheet	
○ Criterion Worksheet	
○ Transcripts	
<input type="checkbox"/> Postcard/Email Sent	

CHABOT COLLEGE FALL 2019 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

<input type="checkbox"/> Enclosed <input type="checkbox"/> Electronic	6.	
<input type="checkbox"/> Enclosed <input type="checkbox"/> Electronic	7.	
<input type="checkbox"/> Enclosed <input type="checkbox"/> Electronic	8.	
<input type="checkbox"/> Enclosed <input type="checkbox"/> Electronic	9.	
<input type="checkbox"/> Enclosed <input type="checkbox"/> Electronic	10.	

OFFICE USE ONLY	
<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed
<input type="checkbox"/> Received	<input type="checkbox"/> Not Enclosed