

## PREREQUISITES <u>MUST BE COMPLETED OR IN FINAL</u> <u>SEMESTER</u> OF COMPLETION\*\* BEFORE SUBMITTING AN EVALUATION REQUEST.

## **REQUIREMENTS**: (Please check $\sqrt{\ }$ if completed)

- □ All Official Transcripts from other colleges attended must be submitted or already on file before your evaluation can be completed. (Electronic transcripts must be submitted to <u>officialtranscripts@msjc.edu</u>). If student is "in progress" with courses at another college or university, student is to attach unofficial transcripts with evaluation form and once course(s) are complete and final grade(s) are posted, student is to send official transcripts to MSJC for Evaluation to be processed. Student will not receive eligibility to apply to program if final grades are not posted in the official transcripts. If <u>all</u> college coursework was completed at MSJC, no need to submit official transcripts.
- □ Student has met with a MSJC counselor to review: admission pre-requisite requirements and official transcripts from all institutions attended.
- □ Currently, the Nursing & Diagnostic Medical Sonography programs are accepting online/hybrid science courses. Please communicate with department frequently for possible future updates.
- ☐ If a student is applying for graduation during the Spring, Fall or Summer semester, student is to include notation in the "comments" section of this form.
- ☐ If in the final semester of completing admission prerequisite(s), general education course(s), 2 semesters of foreign language courses, submitted a graduation application or submitted a general student petition for (course substitution or AP scores), student is to include notation in the "comments" section of this form with attached proof (unofficial transcript showing enrollment of in-progress course(s) or copy of student petition).

Evaluation Request form must first be verified and signed by a counselor; student must then upload the form to the Enrollment Services Virtual Drop Box (e-Document Submissions: Secure Document Upload) through the Student Support Hub - www.msic.edu/hub.

\*Once Evaluation is reviewed and processed by an Evaluator, notification of eligibility to apply to the program will be emailed to student and detailed information can be located in Programs Notes. Student's Program Notes can be located in Self Service->Student Planning->View Your Progress (Go to my progress) under specific Nursing or DMS program. Reminder: It is the student's responsibility to provide Final Official transcripts to MSJC.

\*\*\*Any incomplete Evaluations will be returned to the student if failure to provide the above\*\*\*



## EVALUATION REQUEST FORM - MSJC NURSING & ALLIED HEALTH PROGRAMS THIS IS NOT AN APPLICATION FOR THE NURSING OR DMS PROGRAMS

Evaluation Request form must first be verified and signed by a counselor; student must then submit the form		
to the Enrollment Services Virtual Drop Box (e-Document Submissions: Secure Document Upload) through the Student Support Hub - www.msjc.edu/hub.		
Counselor Signature (Required)		Date
Incomplete packets will be returned to the student if failure to provide required documentation, signature by counselor, student information, and/or unchecked program(s).		
EVALUATION REQUEST DEADLINES		
ADN  Evaluations will be accepted:  July 1 <sup>st</sup> - December 1 <sup>st</sup> (Application filing period: February 1-15th)	DMS Evaluations will be accepted: July 1 <sup>st</sup> - December 1 <sup>st</sup> (Application filing period: March 1-15th)	LVN-RN Transition Evaluations will be accepted: April 1 <sup>st</sup> - July 1 <sup>st</sup> (Application filing period: September 1st-15th)
April 1 <sup>st</sup> – July 1 <sup>st</sup> (Application filing period: September 1-15th)		
Evaluate my transcripts to verify program course prerequisites, GPA, and degree requirements for the following Nursing & Allied Health Program:  Check the program(s) you are requesting to be evaluated.  ADN Program  DMS Program  LVN-RN Program*		
*LVN-RN students: please submit/attach copy of your license from the Breeze website with this request form. If you are applying to the LVN-RN Program and are interested in applying to ADN program as well, please check both options above.  Student Name: ID#:		
Mailing Address:	Phone #:	
City	State Zip	JC Student and/or Personal Email:
List all colleges attended.		_
List all colleges attended:		
Comments:		
I understand all pre-requisite coursework must be completed or in progress (final semester). I have submitted OFFICIAL transcripts from all schools attended to the Enrollment Services department. I am requesting evaluation for NAHD program eligibility. I understand this is <b>NOT</b> an application into any of the above mentioned Nursing and Allied Health Programs. Once I have received confirmation of eligibility to apply, I will need to complete and submit an application to the Nursing and Allied Health Department during the above program application filing period(s). I understand that this Evaluation Request will expire 12 months after date listed on my Program Notes. All communication will be sent through my MSJC student email and/or my personal email. My updated information regarding my Evaluation will be found in my Nursing or DMS Program Notes in my Self Service Student planning.		
Student Signature		Date
FOR OFFICE USE ONLY  □ Course prerequisites completed □ Course prerequisites incomplete □ See enclosed Academic Evaluation		
Comments:		
Evaluation Completed by:		Date:

