

**ACCELERATED BSN PROGRAM
ESSAY, CHECKLIST & PREREQUISITE COMPLETION FORM**

Name: _____ **Phone Number:** _____
Last First Middle

Mailing Address: _____
Street Apt City State Zip Code

Primary Email address: _____ **Submitted & Paid Online App:** ___ Yes ___ No

Degree(s) Earned/Date: _____ **College/University:** _____

Please indicate the cohort entry term to which you are applying:

_____ **Summer Cohort** (App Deadline: **December 15th**) _____ **Winter Cohort** (App Deadline: **July 15th**)

Thank you for choosing Southern CT State University's School of Nursing to continue your academic success! We would like for you to be aware of a few changes we have made in order to service our students better:

1. Prerequisites must be complete by the application term deadline with a C+ or greater, and official transcripts must be received by the Transfer Admissions & Services Office no later than the application term deadline (December 15th for Summer Cohort entry; July 15th for Winter Cohort entry). No more than 2 nursing prerequisite repeats are allowed.
2. Students are required to upload their essay and this checklist form to their application portal in order to ensure that their application is properly reviewed by the Undergraduate Nursing Admissions Committee.
3. There is no limit to the number of times students are able to apply to our program, but there is no guarantee that a submitted application(s) will result in program acceptance and/or enrollment.
4. There are two entry terms now available for the Accelerated BSN Program: Summer Cohort entry and Winter Cohort entry. Each entry term has its own application deadline. If you do not complete your application by the approaching deadline, you will be moved forward one admissions cycle. If you miss two application deadlines, you will have to reapply to the program. Please indicate your application entry term above.

The following document is a Prerequisite Completion Form indicating all the required prerequisites for the Accelerated BSN Program. You are required to provide a self-evaluation for the courses you have completed and/or plan to complete.

- A. **Completed Courses:** use the Prerequisite Form to list the College/University you have completed each course along with the full title of the course, including the course number. Applicants must also list the semester they took the course, the grade they received, and the number of credits the course was worth. Courses must have a minimum grade of a C+ in order to be considered complete. All science courses must be a minimum of 4 credits and include a lab component. *All science courses must be in-person, on-ground courses. No online sciences will be accepted or deemed equivalent. See Example A.*

Southern CT State University
 School of Nursing, College of Health & Human Services
 Accelerated BSN Program
 Prerequisite Completion

Please complete the following prerequisite form based on what you believe are your completed prerequisites. Upload a copy of this form to your online application portal. If you have not yet taken the prerequisite courses, please indicate when you plan to complete them. CT State Community College equivalencies for all required SCSU prerequisites are listed on the Accelerated BSN website. There are currently no expirations dates on nursing prerequisite courses. **ALL prerequisite courses must be completed with a "C+" or better by the application term deadline; ALL transcripts must be received by the Transfer Admissions & Services Office and documented by the respective application term deadlines (Summer entry December 15th; Winter entry July 15th).**

Prerequisite Course	College Attended/ Plan to Attend	Course Title/Number	Semester & Year	# of credits	Grade
BIO 200 Anatomy & Physiology I (On-ground/In-Person)					
BIO 201 Anatomy & Physiology II (On-ground/In-Person)					
BIO 120 Microbiology (On-ground/In-Person)					
CHE 120 General Chemistry I (On-ground/In-Person)					
MAT 107 Statistics					
MAT 108 Math for the Natural Sciences OR (Math 112, 120, 122, 139, 150, 151) (College Algebra, Pre-Calc, and/or Calc will substitute for this requirement)					
PSY 100 Intro to Psychology					
PSY 219 Lifespan Development					
PCH 200 Nutrition					
Example A: PSY100	Southern CT State University	General Psychology (PSY100)	Spring '16	3	A-
Example B: PSY100	Gateway Community College	General Psychology (PSY111)	Fall '24	3	TBD

NOTES:

- If you have withdrawn from or retaken one or more nursing college courses or prerequisites, you may include a brief explanation, on a separate attachment, explaining the reason(s) for the course withdrawal(s) or repeat(s).
- No more than 2 nursing prerequisite repeats are allowed due to a course grade below a C+. If you are repeating a prerequisite because your initial grade was below a C+, this is only allowed 2 times. If you have earned more than 2 grades below a C+ for any of the required prerequisites, you are ineligible to apply. Please contact the School of Nursing for additional clarification if needed.
- There is no preference for where prereqs are completed, as long as they are equivalents and meet minimum grade requirements. Completion of prereqs, and submission of all proper application materials, does not guarantee acceptance into the program.
- Applicable AP scores for courses such as PSY100, MAT107, or MAT150 are accepted with scores of either 3, 4, or 5. Official documentation MUST be sent to the Transfer Admissions & Services Office by College Board. Please plan accordingly as this process takes several weeks. (<https://catalog.southernct.edu/undergraduate/general-information/transfer-and-alternative-credit.html>)
- CLEP scores must be noted and official documentation MUST be sent to the Transfer Admissions & Services Office. Only scores of 51 or higher are accepted. Please plan accordingly as this process takes several weeks. (<https://catalog.southernct.edu/undergraduate/general-information/transfer-and-alternative-credit.html>)
- A copy of established course approvals/waivers from Chairpersons MUST also be provided, if applicable.
- Science prerequisites must all be on-ground and in-person. Non-science prerequisites can be completed as online courses. Hybrid courses for BIO200, BIO201, BIO120 & CHE120 requirements will be accepted as long as the labs are on-ground. An on-ground lab component is required and the course must be a total of 4 credits. Please use the Transfer Articulation tool for determining in-state equivalencies.
- SCSU Applicants: if you are currently enrolled at SCSU with an anticipated graduation date during or right after the application term deadline, please review the established Collaborative Agreement for Southern CT State University applicants, which can be found on our website.
- For all other application, a conferred degree is required by the application term deadline.

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 School of Nursing, College of Health & Human Services
 Accelerated BSN Program
 Academic History

Full academic history includes any and all academic institutions you have attended since graduation from high school, and any college credit you received in high school. This same information MUST be included when completing the Undergraduate Transfer Application for Admission. Failure to list and submit all academic history may result in an incomplete application and may make your application ineligible for review. A conferred BA/BS degree is a REQUIREMENT for the Accelerated BSN Program by the application term deadline. (The only exceptions to the conferred degree are for the established collaborative agreements with SCSU Students (Links to the agreement can be found on the Accelerated BSN website.))

Note: Military transcripts and International transcripts MUST be noted below and sent to the Transfer Admissions & Services Office. Only the Transfer Admissions & Services Office are authorized to evaluate military and international credits.

COLLEGE/UNIVERSITY Location & Address	DEGREE/YEAR	GPA	CREDITS	TRANSCRIPT UP TO DATE?
EXAMPLE C Southern CT State University, New Haven, CT 06512	BS, Biology 2023	3.0	120	Yes

By submitting this completed form in its entirety, I understand that it is my responsibility to:

- ❖ Upload my essay, as outlined by the requirements listed on Accelerated BSN website, to the online portal by the application deadline (Summer entry December 15th; Winter entry July 15th);

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Personal and Professional Background

The following questions are scored as part of the admissions criteria. Applicants are encouraged to provide accurate information for the items listed below only if they apply to the applicant. Please answer the following questions in essay format. The essay may not exceed 200 words, and it should be double-spaced, and completed in 12-point font. Your essay will be evaluated on spelling, grammar, completeness, and appropriateness of content, and writing ability. Please indicate the word count for each essay. You may use the space below or submit a separate essay page.

Southern CT State University is an institution committed to social justice. How do you plan to uphold this commitment as a student, as well as a nursing professional? Word Count Total: _____

How will you apply past experience to succeed in an accelerated nursing degree at Southern CT State University? Word Count Total: _____

Do you possess any of the following certifications? Indicate all that apply. If none, you may skip this question.

- | | |
|--|--|
| <input type="checkbox"/> Emergency Medical Technician (EMT) | If yes, please list expiration date: ___/___/___ |
| <input type="checkbox"/> Paramedic | If yes, please list expiration date: ___/___/___ |
| <input type="checkbox"/> Certified Nursing Assistant (CNA) | If yes, please list expiration date: ___/___/___ |
| <input type="checkbox"/> Certified Medical Assistant (CMA) | If yes, please list expiration date: ___/___/___ |
| <input type="checkbox"/> Certified Phlebotomy Technician (CPT) | If yes, please list expiration date: ___/___/___ |
| <input type="checkbox"/> Patient Care Technician (PCT) | If yes, please list expiration date: ___/___/___ |
| <input type="checkbox"/> Licensed Practical Nurse (LPN) | If yes, please list expiration date: ___/___/___ |
| <input type="checkbox"/> Physical Therapy Aide (PTA) | If yes, please list expiration date: ___/___/___ |
| <input type="checkbox"/> Other: _____ | If yes, please list expiration date: ___/___/___ |
| <input type="checkbox"/> Other: _____ | If yes, please list expiration date: ___/___/___ |

Do any of the following criteria apply to you? Select all that apply. If none, you may skip this question.

- | | |
|---|--|
| <input type="checkbox"/> Multilingual: _____ | <input type="checkbox"/> Parent/Caregiver/Provider |
| <input type="checkbox"/> English Language Learner (ELL, or ESL) | <input type="checkbox"/> Veteran or Active Military |
| <input type="checkbox"/> First-Generation College Student | <input type="checkbox"/> Volunteer Experience (>100 hrs/yr) |
| <input type="checkbox"/> Second Career _____ | <input type="checkbox"/> Leadership Experience (>100 hrs/yr) |
| <input type="checkbox"/> Other: _____ | |

Updated: February 2024