



# Nursing Reinstatement Application

## Wallace State Community College – Department of Nursing Education

- **Spring 2018 - Math exam will be January 3, 2018, at 8:00 AM in CNS Room 332**
- **Summer 2018 - Math exam will be May 22, 2018, at 8:00 AM in CNS Room 332**
- **Fall 2018 – Math exam will be August 14, 2018, at 8:00 AM in CNS Room 332**

Upon reinstatement all nursing students are required to have a drug screening and a background check. Drug Policy and Background Check Policy are available for viewing online at [www.wallacestate.edu/nursing](http://www.wallacestate.edu/nursing).

### Submit the reinstatement application:

- **Fall Reinstatement - June 15 through July 15**
- **Spring Reinstatement - October 15 through November 15**
- **Summer Reinstatement - March 15 through April 15**

All information must be included for this application packet to be complete. Any piece of missing documentation will result in the application not being considered for admission. Information will not be accepted via email or fax - it must be delivered in person or via mail by the deadline date.

1. Students seeking re-entry into nursing courses should submit the application by the posted deadline; the exception being students who non-progress in a course will indicate re-entry status by attending the non-progression meeting at the end of the current semester; NP meeting date will be posted via Blackboard. Current program admission requirements apply, i.e., Math 100 (Intermediate College Algebra), Biology 201 (Human Anatomy and Physiology I).
2. Please mail entire signed application (pages 1 and 2) along with hard copies of all updated transcripts from other colleges to the nursing department. Also, please be sure to include a regularly monitored email address on the application prior to submission. Mail Application to: Nursing Program (Box 58) • Wallace State Community College • P. O. Box 2000 • Hanceville, AL 35077-2000
3. Retain copies of your application packet for your reference. If you reapply in the future, information will not be released from previous application packet.
4. Refer to Reinstatement to Program tab at [www.wallacestate.edu/nursing](http://www.wallacestate.edu/nursing) website for instructions pertaining to lab practice, Level I and Level II Math Validation Practice Packets and other important reinstatement materials.
5. The math validation will be based on material essential to the level at which you exited the program. For example, students seeking reinstatement to NUR 112, 113, 114 or 115 should emphasize basic math while students seeking reinstatement to NUR 211, or 221 should emphasize basic math plus higher level math. You are expected to pass the exam with a minimum of 90% accuracy on the first attempt. Students who pass the math validation at the required level will proceed to skills validation the same day. The final decision for reinstatement will be determined after the number of current students who are progressing is identified.
6. Upon reinstatement, students must upload to E\*Value, if they have or are about to expire, updated physical information including new TB skin test, background check (email [miranda.smith@wallacestate.edu](mailto:miranda.smith@wallacestate.edu) for specifics and upon completing the background check), American Heart Association Health Care Provider or Professional Rescuer CPR (no online certificates), and proof of health insurance in order to complete the reinstatement process. Specific questions concerning previous physical information should be directed to [miranda.smith@wallacestate.edu](mailto:miranda.smith@wallacestate.edu). Drug screening will be assigned by the Department of Nursing Education at a date to be determined.
7. You will be authorized to register for nursing courses when cleared by the nursing department after evaluation of all physical information and paperwork. Please email [mechelle.baker@wallacestate.edu](mailto:mechelle.baker@wallacestate.edu) if you have specific questions related to registration.

**Please do not register for any Nursing courses until you successfully complete the math and skills validation exam and final clearance is given.**

I understand that I must successfully complete the validation process to be considered for reinstatement and that reinstatement is solely dependent upon space availability. By signing below I acknowledge that I have read the above instructions and will abide by them during the reinstatement process.

\_\_\_\_\_  
Student #

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

It is the policy of Wallace State Community College, a postsecondary institution under the control of the Alabama Community College System Board of Trustees, that no person shall, on the grounds of race, color, sex, religion, national origin, disability, age, or sexual orientation be excluded from participation in, be denied benefit of, or be subjected to discrimination under any program, activity or employment. The College will not retaliate against any person because they have engaged in a protected activity opposing the College or because they have made a complaint, testified, assisted, or participated in any manner in an investigation, proceeding or hearing alleging discrimination on a basis specified above.



# Nursing Reinstatement Application

Wallace State Community College – Department of Nursing Education

Mail Completed Application To: WSCC Nursing Program (Box 58), P.O. Box 2000, Hanceville, AL 35077-2000

Date \_\_\_\_\_ Student W# \_\_\_\_\_ Name Used in Blackboard \_\_\_\_\_

Full Name \_\_\_\_\_  
Last Name First Name Middle Name Maiden Name

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Preferred Email \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Date of initial admission to WSCC nursing program \_\_\_\_\_ Current NUR GPA: \_\_\_\_\_

Plan to reinstate to: Course # \_\_\_\_\_  Summer  Fall  Spring Year  2018  2019

Co-requisite Courses Completed			Legacy Curriculum Completed			Concept Curriculum Completed		
Course	Grade	Semester/Year	Course	Grade	Semester/Year	Course	Grade	Semester/Year
MTH 100 or Higher			NUR 102			NUR 112		
BIO 201			NUR 103			NUR 113		
BIO 202			NUR 104			NUR 114		
BIO 220			NUR 105			NUR 115		
ENG 100			NUR 106			NUR 211		
HUM (HUM 101)			NUR 201			NUR 221		
PSY 210			NUR 202					
SPH (SPH 106/107)			NUR 203					
			NUR 204					

Non-Progressions (NP) or Withdrawals (WD): First NP/WD: 1<sup>st</sup> NP/WD: \_\_\_\_\_ Second NP/WD: \_\_\_\_\_

What problems did you encounter with your academic studies? (Check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Ability to perform lab procedures            | <input type="checkbox"/> Missed too many class and or clinical days |
| <input type="checkbox"/> Ability to understand course material        | <input type="checkbox"/> Missed too many quizzes or exams           |
| <input type="checkbox"/> Ability to understand instructor             | <input type="checkbox"/> Change in health status                    |
| <input type="checkbox"/> Level of math skills required for classes    | <input type="checkbox"/> Child care arrangements                    |
| <input type="checkbox"/> Level of reading skills required for classes | <input type="checkbox"/> Employment responsibilities                |
| <input type="checkbox"/> Not enough time devoted to studying          | <input type="checkbox"/> Family crises (death, divorce)             |
| <input type="checkbox"/> Class schedule                               | <input type="checkbox"/> Financial issues                           |
| <input type="checkbox"/> Classes too difficult                        | <input type="checkbox"/> Medical issues with self or family member  |
| <input type="checkbox"/> Difficulty with testing                      | <input type="checkbox"/> Moved                                      |
| <input type="checkbox"/> Teacher conflict                             | <input type="checkbox"/> Personal or family issues                  |
| <input type="checkbox"/> Time constraints                             | <input type="checkbox"/> Transportation issues                      |
| <input type="checkbox"/> Took hybrid class(es)                        | <input type="checkbox"/> Work Conflict                              |
| <input type="checkbox"/> Housing issues                               | <input type="checkbox"/> Other _____                                |

Non-progression issue: \_\_\_\_\_

Activities to enhance learning: \_\_\_\_\_

Plan for re-entry: \_\_\_\_\_

**I understand that I must successfully complete the validation process to be considered for reinstatement and that re-instatement is solely dependent upon space availability.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_ Faculty Signature \_\_\_\_\_ Date \_\_\_\_\_

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