

# East Central University

## School of Nursing v03.12.25

### Application to the Pre-licensure Nursing Program

(LPN Pathway Candidates)



For admission to a fall semester, application materials must be submitted no later than May 1<sup>st</sup>

For admission to a spring semester, application materials must be submitted no later than October 1st

\*If the due date falls on a weekend or holiday, submissions will be due on the next business day.

\*\*Applications may be mailed, faxed, emailed, or delivered in person to the nursing office.

Questions regarding international requirements; university applications; status, etc., must be directed to the International Student Services office at [intlstu@ecok.edu](mailto:intlstu@ecok.edu) or 580-559-5669. The SoN will only address nursing application questions. Webpage can be found at <https://www.ecok.edu/International>.

Email all correspondence and materials to [nurse\\_sec@ecok.edu](mailto:nurse_sec@ecok.edu)

East Central University, School of Nursing
1100 E. 14 <sup>th</sup> Street PMB V-8
Science Hall, RM 318
Ada, OK 74820
580-559-5434 OR 580-559-5933
FAX# 580-559-5785

## **Application Checklist**

**Please use the checklist below to ensure that you have completed and submitted all the required documents for your application.**

- Submit a nursing program application (pgs. 3-10) by the cycle closing date (pg. 6), making sure you have completed all areas, **to include signing, initialing, and dating in required areas**  
**Submission of an incomplete application may result in it being voided**
- Apply to ECU (see links below) & submit all required documentation in time to be accepted by the deadline (pg. 6).
- Submit all transcripts as instructed (pgs.6-7) prior to or with your nursing application.
- Include copies of any licenses/certification, etc. with your application submission (pgs. 3-4).
- If accepted to the program, attend the **mandatory orientation**, held the Wednesday before the start of each semester. This will be a full day. The date, time, and location will be provided once you are accepted.
- Update the SoN of any changes to your contact information – this includes your email, phone, and mailing address

Please consider sending unofficial transcripts to the SoN so that your advisor can review and evaluate them, and advise you appropriately. You may email them to [nurse\\_sec@ecok.edu](mailto:nurse_sec@ecok.edu). **Admission status notifications will be sent out approximately 2 to 4 weeks after the admission cycle closes, via the email address you provided on your application.** Please do not call or email the office to ask about your status; as that delays us being able to get that information to you. We are using that time to review applications and get the notifications out as quickly as possible, so these inquiries may not be addressed.

### **Helpful Links**

[Nursing Home Pages](#) (all about TigerNursing!)

[Admissions Home Page](#) (information on applying to ECU)

[SLATE Application Portal](#) (to create & submit your ECU application)

[Office of the Bursar Homepage](#) (enrollment fees, room & meal plans, course specific fees)

[Paying for College - Financial Aid](#) (to include ECU scholarships)

[ECU Foundation Scholarships](#)

[Transfer Student Homepage](#)

[ECU Transfer Matrix](#)

[Office of International Students](#)

[International Student Services & Payments](#)

[Student Clubs & Organizations](#)

[Student Resources](#)

### **FIND US ON**

**Facebook ECU #TigerNursing @ECUTigerNurse**

**Instagram @ ecutigersnursing**

## Application for Admission – LPN Pathway v10.01.2024

### APPLICANT INFORMATION

Last Name		First Name	
Address (PO Box, Apt#, etc.)			
City	State	ZIP	County
Preferred Phone	Alternate Phone		
Email Address (Required)			

SSN#: \_\_\_\_\_ DOB: \_\_\_\_\_

Are you a current ECU student? YES  NO  If yes & known, what is your ID#?

Are you a returning ECU student? YES  NO

Are you a transfer student? YES  NO  If yes, have you already applied to ECU?

### EDUCATIONAL BACKGROUND

Have or will you be graduating from an OK LPN Program? YES  NO

If yes, please list the program attended & year graduated:

Have you earned an **Associate in Science or Arts from an Oklahoma** college or university? YES  NO

<i>If yes, please list the college/university you attended and year you graduated.</i>	College/University	YR Grad
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Have you earned a **Bachelor's degree or higher**? YES  NO

<i>If yes, please list the college/university you attended and year you graduated.</i>	College/University	YR Grad
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**Must list all other colleges/ universities ever attended:**

### PRIOR ATTENDANCE IN A REGISTERED NURSING PROGRAM (ASSOCIATE OR BACHELOR)

If you have ever attended a **registered nursing program (including East Central University)**, please provide the following information:

Name of School	City	State/Country
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Entrance Date	Exit Date
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Reason for Leaving

**\*If you have previously attended a nursing program (Associate or Bachelor only), please become familiar with ECU School of Nursing's policy for equating nursing courses, available on our website at [www.ecok.edu/nursing](http://www.ecok.edu/nursing) under Prospective Nursing Students - "Nursing Course Equating Policy and Form."**

**Licensure &/or Certification Verification – Please provide a copy of your license/certification with app.**

Do you currently have a nursing license, in the U.S. or any other country? (circle) YES NO  
If yes, what kind (LPN or RN) and from where (Country/State)?

Do you have a current Certified Nursing Assistant (CNA) license? (circle) YES NO  
If yes, where from (State)?

Do you have experience in the Military, Law Enforcement, Emergency Medical Services, First Responder, or Vet experience? (circle) YES NO  
If yes, please specify which of these and how many years.

Do you have a current medic license (any level)? (circle) YES NO  
If yes, what level and where from (State)?

Do you have any other training/certifications that you feel are pertinent to your application? YES NO  
If yes, please tell us what.

Are you currently working? YES NO  
If so, please tell us where?

Are you a student athlete? YES NO  
If so, please list what sport(s).

Are you involved in any student organizations on campus? YES NO  
If so, please list them.

**Honesty Statement:**

**By signing & dating below, and initialing & dating each required section, I affirm that the information I am providing in all areas of the application are true and accurate to my knowledge. I understand that any misrepresentation I provide on this application will result in penalties, including, but not limited to, my application being immediately rejected.**

Printed

Date

Signature

Date

### **Section A: Signature Form**

I, \_\_\_\_\_, hereby apply for admission to the nursing program at East Central University.

**Please Print Name**

I understand that the number of students admitted by the School of Nursing is limited by availability of faculty and clinical resources. Selection is competitive; therefore, the school may be unable to admit all potentially qualified applicants, as application submission does not guarantee admission. I affirm that I have read and understand the Student Nurse Position Description on the School of Nursing website. I certify that I can perform the essential job functions as set forth therein.

Student Initials: \_\_\_\_\_ Date: \_\_\_\_\_

### **Section B: Criminal Background:**

ENSURE YOU **ANSWER** THE QUESTION, AND **MARK ONLY ONE!**

**Failure to do so may void your application!**

I understand that I will be required to have criminal background and sex offender searches during the spring semesters of my sophomore and senior years, and at other times if deemed necessary. *Please select the ONE appropriate response to the following statements:*

\_\_\_\_ I affirm that I do **NOT** have a criminal record and/or history. I have never been summoned, arrested, taken into custody, indicted, convicted or tried for, or charged with, or plead guilty to, the violation of any law or ordinance or the commission of any misdemeanor or felony, or requested to appear before any prosecuting attorney or investigative agency in any matter.

\_\_\_\_ I affirm that I **DO** have a criminal record and/or history. I have been summoned, arrested, taken into custody, indicted, convicted or tried for, or charged with, or plead guilty to, the violation of any law or ordinance or the commission of any misdemeanor or felony, or requested to appear before any prosecuting attorney or investigative agency in any matter.

**If I have a criminal record, I understand that I must immediately contact the School of Nursing Director to discuss my options PRIOR to submitting my application to the Nursing Program, and provide documentation on the charge and current status.**

Student Initials: \_\_\_\_\_ Date: \_\_\_\_\_

### **Section C: Application & Admission Acknowledgement**

Please be sure **NOT** to confuse the ECU application for the application to the nursing program. They are two completely separate applications, and the due dates may be different than those of the university.

**Nursing program applications** must be received in the nursing office by the designated deadline. If this date falls on a weekend (Saturday or Sunday), or on a public holiday, the due date will be the following business day. Cutoff dates for submitting the LPN Pathway nursing program application are as follows:

**For fall semesters: May 1<sup>st</sup> at 5pm**

**For spring semesters: October 1<sup>st</sup> at 5pm**

Acceptance letters are sent out via email approximately four weeks from the cycle closing date. If you have not been accepted to ECU by that time, you will receive a provisional letter, pending your acceptance to the university.

**ECU applications** must be completed/submitted to the portal with all required documentation in time to be accepted to ECU by the deadline. Deadlines to be **accepted** to ECU are as follows:

**For fall semesters: June 1<sup>st</sup>**

**For spring semesters: November 1<sup>st</sup>**

Again, all applications and related/required materials must be submitted to your portal in time to be accepted by the deadlines above. If you have not applied to and been accepted to ECU by the deadline, your application may be voided.

Student Initials: \_\_\_\_\_ Date: \_\_\_\_\_

### **Section D: Transcript Requirement Acknowledgement**

As part of the application process, **you MUST submit transcripts from each college and/or university you have attended with your application.** These documents are used to determine your program, cumulative, and institution (retention) GPA based on currently completed courses, as well as assist in the assignment of points during the scoring process. Initially, you may submit unofficial transcripts, but must submit **official** ones prior to the start of the admitted semester. Failure to submit all transcripts may result in the application being voided.

- If you are a **current ECU student** and have submitted your transcripts to the Admissions Office &/or your application portal, you **DO NOT** need to resubmit. Please make us aware of this when you submit your application.
- If you are a transfer or new student to ECU and have submitted your transcripts to the Admissions Office &/or your application portal, you **DO** still need to submit at least unofficial transcripts with your nursing application. We cannot process the application without them.
- If your **official transcripts** are to be delivered **electronically**, please have them sent to [nurse\\_sec@ecok.edu](mailto:nurse_sec@ecok.edu)

- Official transcripts may be included with your nursing program application packet, or delivered in person, as long as they remain sealed. If you are having official transcripts mailed, please have them sent to **ECU School of Nursing, 1100 E 14<sup>th</sup> Street PMB V-8, Ada, OK 74820**  
Transcripts **MUST** be received, regardless of method, no later than the application cutoff dates
- Please include something that shows what classes, if any, you are enrolled in for the current semester **OUTSIDE OF ECU.**
- For classes that you are currently enrolled in **OUTSIDE of ECU**; these will require either a transcript or a grade report be submitted to the SoN **immediately upon the completion of the course.** You must also submit an official transcript to Admissions immediately, showing the course grade(s).

Student Initials: \_\_\_\_\_ Date: \_\_\_\_\_

### **Section E: GPA, Grades, & CLEP Exams Acknowledgement**

#### **GPA**

As part of the application process, transcripts are evaluated and used to determine your program, cumulative, and institution (retention) GPA based on currently completed courses, as well as assist in the assignment of points during the scoring process.

- Any “D” or “F” that you have made at East Central University or any other institution attended, in any course listed on the School of Nursing GPA Form may be used to calculate your School of Nursing GPA.
- Any “D”, “F”, or “W” that you have made at East Central University or any other institution attended, will be used in the assignment of points during the scoring process.
- Any “D” or “F” that you have made at East Central University or any other institution attended, may be used to calculate your cumulative and institution (retention) GPA.
- If you have a “D”, “F” or a “W” that does not show up on this form at this time, the admissions committee may add the “D”, “F” or “W” to this form and recalculate your School of Nursing, cumulative, and institution (retention) GPAs.

#### **Grades**

For the purpose of nursing; To maintain the integrity of program policies, the following will be considered while advising, reviewing transcripts and applications, etc. A grade of “P” denotes course completion with a passing grade but is NOT considered to be equivalent to a grade of “C” toward any admission points and may not be considered for program retention requirement.

### CLEP Exams

At ECU, students can receive credit for the College Board's College-Level Examination Program (CLEP; Subject exams only). All credit for awarded will be transcribed with a P-grade (Passed). A score report must be submitted to the SoN immediately. Unless previously accepted and transcribed at another Oklahoma regionally accredited institution, an original/official copy of the credit by examination must be submitted to ECU from CLEP.

Student Initials: \_\_\_\_\_ Date: \_\_\_\_\_

### Section F: Program & Clinical Requirements

Below is a list of clinical and program requirements that will need to be completed **by the designated due date**. Once you have been accepted, you will receive additional information on these requirements and due dates. You are encouraged to start on these now, as there are time frames for some. Lack of preparation on completing this will not be a consideration for an extension.

- Background Check (Est Cost \$110.00, to include drug screen) (to be done upon acceptance)
- Drug Screen (to be done upon acceptance)
- CPR – **Must be American Heart Basic Life Support (BLS) for Healthcare Providers**
- **Immunizations:** Records must be legible, with name and date given visible. Statements such as “as a child,” “up to date,” or “not needed,” are not acceptable
  - Annual Influenza –for current fluseason
  - Tetanus, Diphtheria, & Pertussis (Tdap)
  - Measles, Mumps, & Rubella (MMR)
  - Varicella (Chicken Pox)
  - Hepatitis B
  - Initial 2-Step Tuberculin Skin Test OR Negative TSpot blood test OR Negative QuantiFERON blood test
    - If previous or current positive test results, Clearance for Public Contact must be obtained from the Health Department
  - COVID-19 vaccination - complete series (boosters are not required at this time)

#### Vaccination Statement

The clinical facilities that have agreed to provide experiential education within the ECU School of Nursing program curriculum require designated vaccinations to participate in clinical and/or instruction at their facility. ECU SoN has no authority to waive the clinical sites vaccinations requirements. The clinical facilities are also responsible for the evaluation and administration of requests for exemptions to their respective vaccination requirements, which may vary among clinical facilities. **Due to these facility vaccination requirements, unvaccinated students may not be able to satisfy a required component of the curriculum and therefore may be unable to complete the nursing program.**



Any student wishing to be exempt must contact the Clinical Coordinator, or in their absence, the Director. They will also be responsible for contacting their assigned clinical facility(ies) for the waiver process. Copies of any approved waivers must be submitted to the SoN, and the student will be required to sign a disclaimer acknowledging understanding. It is highly recommended that the admitted student complies with all vaccinations for uninterrupted progress through the program.

Student Initials: \_\_\_\_\_ Date: \_\_\_\_\_

### **Section G: Admission Requirements & Consideration**

Please remember that every application is reviewed and considered, **with any exceptions to admission requirements approved on a case-by-case basis by the Director and committee of faculty.** Please talk with your advisor and/or the nursing office if you are missing/deficient in any requirement, about submitting your application.

- Meet both ECU and SoN admission requirements and application deadlines; following the processes as instructed.
- Once admitted to the nursing program, complete/maintain all remaining requirements related to clinical, attestations, and accreditation, to include attending the mandatory cohort orientation, held the Wednesday prior to the start of the semester.

### **Application Scoring**

The application scoring rubric is not published, and is subject to change per admission cycle, based on assessment. Application scoring is based on points that may include, but not limited to: GPA (program and Cumulative/Grad /Retention), required related work (math and science courses) grades, earned degrees, relative experience, licensures, and certifications (found on application; with verification), and hours completed at ECU.

Student Initials: \_\_\_\_\_ Date: \_\_\_\_\_

## Section H: Nursing Semester-by-Semester Schedule – LPN Path

(Please know that this is subject to change)

### Semester 1: (Junior I)

#### Monday

NRSG 4318 LPN Transitions 900-1150

NRSG 3193 Pharmacology I 100-350

### Semester 2: (Junior II)

#### Monday

NRSG 3883 Research 900-1150

NRSG 3218 Med-Surg II 100-350

#### Wednesday

NRSG 3393 Pharmacology II 900-1150

NRSG 3218 Med-Surg II 100-350

\*You will have one clinical rotation during the week/weekend; schedule/location to be determined

### Semester 3: (Senior I)

#### Tuesday

NRSG 4214 Psychiatric Mental Health 900-1150 (you can attempt to test out of this class in your 2<sup>nd</sup> semester)

NRSG 4375 Med-Surg III 100-350

#### Wednesday

NRSG 4164 Child Bearing Family 900-1150

\*You will have clinical rotations during the week for all three courses, schedule/location to be determined

### Semester 4: (Senior II – Final Semester)

#### Thursday

NRSG 4513 Prioritization & Critical Thinking 800-1050

NRSG 4283 Community Health 1200-150

NRSG 4382 Leadership 200-350

NRSG 4954 Transition to Professional Practice 400-450

\*You will have a clinical rotation for NRSG 4283 during the first 8 weeks; Your 144 hours of preceptorship will be done in the second eight weeks, schedule to be determined

**IMPORTANT: Clinicals may include, but are not limited to: 8- or 12-hour shifts; days, evening, nights, weekends, etc., and may occur on any day of the week that you are not scheduled to be in class.** Our Clinical Coordinator will be working with you to help place you in the facility/clinical site that best fits your needs. However, we are limited to what our clinical sites have available for us for placement.

Student Initials: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit pages 3 thru 11 to the ECU SoN to be considered for our next cohort. If you have any questions, or there is anything we can help you with, please do not hesitate to reach out via email to [nurse\\_sec@ecok.edu](mailto:nurse_sec@ecok.edu) or phone at 580-559-5434 OR 580-559-5933.

All International Student questions regarding application and acceptance to ECU, as well as requirements must be directed to that office.



