General Information

Pacific Union College is:
- A Christian liberal arts college
- A fully accredited four-year college
- Ranked among the top ten western regional liberal arts colleges in the *U.S. News and World Report*
- A 200-acre campus that overlooks the beautiful Napa Valley

Pacific Union College (PUC) has been educating nursing students since 1958 when it established the Associate of Science (AS) Degree in Nursing. The first LVN to RN program was developed in 1991 at the request of Hanford Community Medical Center in Hanford, CA in response to a severe RN shortage in the rural areas. In 1996 the United States Air Force (USAF) initiated a request to offer this type of program to military Medical Technicians (Med Techs) and licensed vocational nurses (LVNs) not only as an avenue to upgrade nursing skills but to also provide individuals with a marketable and civilian recognized professional degree should they separate from the military. The AS Nursing degree program is approved by the California Board of Registered Nursing (BRN) and accredited by the Accreditation Commission for Education in Nursing, INC. (ACEN)

Med Tech/LVN to RN AS Degree Nursing Program

The PUC Med Tech/LVN to RN program was developed to provide an educational opportunity for the LVN or military Med Tech to pursue professional nursing growth through a non-traditional format while still continuing to meet his or her full-time work, military, and/or life obligations. LVNs are granted transfer credit from accredited vocational colleges for the first year of traditional AS courses. Classes are developed on adult learning principles and the program can be completed in three (3) sessions spread over 18 months. Classroom instruction is taught Sunday through Wednesday during three “coreweeks” spread evenly within the session. Twelve-hour clinicals are scheduled on Sundays between theory coreweeks. There are generous breaks between sessions to allow preparation for the next session and to meet personal obligations. Successful students of this type of program are self-motivated, self-disciplined, have good study habits, and are committed to learning.

PUC also offers the non-degree 30-unit option for LVNs. Admission and educational requirements differ from the AS degree. Students are advised to carefully research the limitations of this option as one is eligible to take NCLEX-RN but does not graduate from PUC. The RN license obtained with this option is not recognized in all states and there may be difficulty articulating into a Bachelor of Science Nursing (BSN) program.

Continuing Your Education: RN to BSN Program

The RN to BSN Program at PUC allows students to seamlessly complete their BSN in a two-step process by first completing AS degree requirements, and then progressing on to complete the remaining requirements for the BSN. This program also follows a non-traditional schedule and can be completed on a full- or part-time basis. Military BSN graduates qualify to be commissioned officers. Contact the Nursing & Health Sciences Department or go to [www.puc.edu/nursing](http://www.puc.edu/nursing) for more information.

Curriculum: A description of the AS and RN to BSN degree programs, degree requirements, and curriculum are available at: [www.puc.edu/academics/degrees-programs](http://www.puc.edu/academics/degrees-programs) - select document NHSC-04 for admission requirements and a focus on pre-nursing requirements and entry into the AS degree program. Select document NHSC-05 for a side-by-side overview of both the AS degree and the RN to BSN degree requirements, along with A-06, which lists ASN and RN to BSN general education requirements. Nursing faculty assist students as needed in developing an academic plan.

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1 ACEN, 3343 Peachtree Rd. NE, Suite 850, Atlanta GA 30326; (404) 975-5000. [www.acenursing.org](http://www.acenursing.org)
Application Deadline

For the PUC Med Tech/LVN to RN program, applications are considered after the submission deadline for each enrollment date and are considered on a space available basis thereafter.

- For fall enrollment, applications are due April 15.

LVN to RN Eligibility Requirements

Admission can be competitive and candidates are evaluated based on the following criteria.

___A. Possession of current and unrestricted LVN license or successful passing of the Assessment Technology Institute (ATI) LVN/LPN Comprehensive exam at a predetermined standardized level set by national norms.

___B. A minimum of one year of full-time direct patient care experience in a medical setting as a Med Tech V and/or LVN within the last five years is required before entering the program.

___C. Minimum completion of 16 hours of prerequisite, cognate and general education (GE) college courses with a grade of C or better in each course. PUC does not have an expiration date for required courses. It is highly recommended that all cognate and GE classes be completed before starting the nursing courses; however, the following four classes are prerequisites:

1. Intro to Chemistry
2. Human Anatomy
3. Human Physiology
4. General Microbiology

___D. College GPA calculated on cognate and GE courses required for the AS Nursing degree. The minimum GPA for nursing admission is 3.0. Preference will be given to those with a GPA above 3.3.

1. Each course must be passed with a C or better.
2. Any grade below C in a course required for nursing hurts your chances of admission, even if you have successfully repeated that course.

___E. ATI TEAS (Test of Essential Academic Skills) total score at or above Proficient Level; preference given to students with scores at the Advanced or Exemplary level.

The ATI TEAS is a standardized nursing school entrance test. It tests knowledge of or aptitude in mathematics, reading comprehension, English, and science. Applicants are allowed to take the test a maximum of three times with a minimum of 60 days between tests (two retakes are allowed). Contact the Nursing Admissions Coordinator at nursing@puc.edu or (707) 965-7606 to reserve a space for a test date. All TEAS testers must create an ATI account prior to taking the test. You can create an account at www.atitesting.com by clicking on Create New Account and following the screen prompts. You may prepare for the ATI TEAS by obtaining the ATI TEAS Study Manual from ATI at www.ATITesting.com or by calling (800) 667-7531.
Application steps to be completed by application deadline

A. Apply to the Department of Nursing & Health Sciences (see application form to follow). The nursing application also serves as application to the College.

B. Submit all high school and/or college transcripts to the Nursing & Health Sciences Department. Records department staff review transcripts to determine appropriate credit (see Transcript Analysis section to follow).

C. Submit a plan to complete cognate/general courses not already accomplished (include quarter/semester time frame and name of college where courses will be taken).

D. Submit two professional recommendations (see forms to follow - they are also available at: www.puc.edu/academics/departments/nursing/degrees-programs).

E. Submit a one-page personal essay (refer to Application Part B for essay guidelines).

F. Submit a copy of current LVN license, or indicate current MT Level on application.

Notification of admissions committee decisions will be in writing from the Department of Nursing & Health Sciences.

Health Clearance steps to be completed after Acceptance Notification

Clinical Clearance Requirements for AS Degree Nursing Students (Initial and Ongoing)

The following items are required of all AS Degree Nursing Students in order to obtain clinical clearance.

1. Health Clearance from PUC Health Services: (See – Health Clearance Requirements for Nursing Students) Submit documentation to CastleBranch.

2. HealthStream Educational Modules: Purchase and complete the required HealthStream modules prior to the start of the first clinical course and annually thereafter. Submit transcripts to CastleBranch. (See – HealthStream)


4. Background Check and Drug Screen: A clear background check and clear drug screen are required of all students entering the program. Screenings are completed through CastleBranch. (See – CastleBranch)

Criminal Background Check and Drug Screen

All students are required to undergo a criminal background check and drug screen prior to participating in required clinical experiences. Both the criminal background check and the drug screen must be completed satisfactorily as determined by the Department of Nursing & Health Sciences prior to beginning any clinical experience. Students are responsible for all costs associated with criminal background check and drug screening. Students must further agree that all results are available to the program and the clinical sites associated with the program. Should a clinical agency refuse to place a student based on the outcome of either the background check or the drug screen, the Program has no responsibility for arranging alternate clinical placements.

Criminal Background Check: Students must clear a criminal background check before finalizing admission to the nursing program. Failure to undergo the background check will result in dismissal from the program. If the background check indicates criminal behavior the student may be dismissed from the program. Students may appeal the decision and will have the opportunity to present information to dispute the background check. Determination by the Department that a student has passed the criminal background check does not guarantee that every clinical facility will accept this assessment and allow the student to participate in clinical experiences. A student who has a gap in continuous enrollment in the program may be required to undergo another criminal background check prior to readmission into the program.

Please Note: Submit documentation to CastleBranch.

2 Further information about obtaining the required background check and urine screening is provided upon admission to the designated program.
Drug Screen: Students must clear a urine drug test before finalizing admission to the nursing program. Failure to undergo the drug test will result in dismissal from the program. If the student fails the test, the student will not be admitted to the program. If a student contests the results of a test, the student has the right to request that the sample be retested at a second location (provided that the request is made and the second drug test is completed within seven (7) days after the results of the failed test).

Readmission: Should the Department obtain evidence of criminal behavior and/or drug use after a student has been cleared for admission into the program, the student may be dismissed from the program. Readmission into the program may be considered in the sole discretion of the Department if a subsequent background check shows a clear record, or the student follows a treatment plan developed in collaboration with Student Health Services and the Career & Counseling Center and clears subsequent random urine drug testing.

Transcript Analysis
The graduation analyst evaluates transcripts to determine appropriate credit for courses already completed. Pacific Union College is on the quarter system with three quarters during the academic year. Two semester units of credit are equivalent to three quarter units. For questions regarding transfer credit or graduation requirements, contact the graduation analyst in the Records Office: (800) 862-7080, opt 2, or (707) 965-6678.

Financial Information

How can I meet the cost of the nursing program?
- Financial aid options
  - FAFSA - Free Application for Federal Student Aid
    - Apply online at [http://www.fafsa.ed.gov](http://www.fafsa.ed.gov)
  - Grants/Loans - based on completed FAFSA
    - Cal Grant
    - Pell Grant
    - Federal Stafford Loan
- Other loan programs - non PUC
  - No FAFSA required
  - Alternative Loans (credit based)

What happens to my PUC financial package if I fail or withdraw from a class?
- Stay in close communication with your financial advisor throughout the program.
- Any failures (less than passing grade) in courses are not covered by loans.
- A minimum grade of C is required for all AS degree program coursework.

Program Pass Rates
To obtain information on the RN licensure pass rate for graduates of the program, go to: [http://www.rn.ca.gov/schools/passrates.shtml](http://www.rn.ca.gov/schools/passrates.shtml)

The Department of Nursing & Health Sciences reserves the right to add, amend, or cancel any of its programs, policies, and procedures, in whole or in part, at such time as it may choose and for any reason.

Every effort has been made to insure the accuracy of the information in our publications. Applicants should be advised, however, that such information is subject to change without notice, and that they should consult with the Admissions Coordinator and/or their Academic Advisor for current information. Information in this document does not constitute a contract between the Department of Nursing & Health Sciences and a student or an applicant for admission.

Pacific Union College
Department of Nursing & Health Sciences
One Angwin Avenue
Angwin, CA  94508

Phone:  (707) 965-7262
Fax:  (707) 965-6499
E-Mail:  nursing@puc.edu
Web:  [www.puc.edu/nursing](http://www.puc.edu/nursing)
PUC Department of Nursing & Health Sciences
Associate of Science Degree Program: LVN to RN Program
APPLICATION FORM - Part A

Campus: □ Napa Year
Previous Experience: □ LVN □ Med-Tech, Level
Program: □ AS in Nursing □ 30-Unit Option

PLEASE TYPE OR PRINT ALL INFORMATION

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Home/Permanent Mailing Address

Street
City, State, ZIP

Telephone (including Area Code) □ Residence □ Mobile

Email Address

Military Status:  __ Active Duty  __ Active Reserves  __ GI Bill/Rehab  __ Spouse/Dependent  __ Civilian

Health Care Work Experience (check all that apply and attach photocopy of license or certificate)
__ Certified Nurse Assistant  __ Emergency Medical Technician  __ Surgical/Psychiatric Technician  __ Respiratory Therapist

Ethnic and Race Group (used for statistical purposes only) Please mark at least one in each group

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Educational Background

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<th>Dates Attended and Degree Received</th>
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Signature of Applicant ___________________________ Date _____________
PLEASE TYPE OR PRINT ALL INFORMATION

Name_____________________

PUC Department of Nursing & Health Sciences
Associate of Science Degree Program
APPLICATION FORM - Part B

The following items must be submitted simultaneously to the department:

__ $30 Application Fee
__ Personal Essay - Prepare a typed, one-page essay responding to each of the following three questions. Essays will be evaluated on the basis of content, writing ability, clarity of thought and sequence of ideas.
   1. Discuss the development of your interest in nursing, and how your background and experience have played a part in this development.
   2. Describe your personal characteristics as they influence your individual and group interactions, with particular emphasis on your personality, life interests and characteristics you feel influence the way others view you.
   3. Describe your reasons for wanting to study nursing at Pacific Union College.
__ Submit a copy of current LVN license, or indicate current MT Level on application

Emailed or faxed forms are NOT acceptable.

Clinical Clearance is required in order to participate in clinical courses. Clinical clearance is to be completed after acceptance to the program. Clinical clearance requirements are described on the Clinical Clearance Document and Include:

1. Health Clearance from PUC Health Services: (see - Health Clearance Requirements for all Nursing Students)
2. HealthStream Educational Modules: Purchase and complete the required HealthStream modules prior to the start of the first clinical course and annually thereafter.
3. CPR certification issued by the American Heart Association (http://www.americanheart.org/) verifying completion of an AHA Basic Life Support Provider (BLS) course.
4. Background Check and Drug Screen: A clear background check and clear drug screen are required of all students entering the program.

Check college courses completed (Check ONLY those for which you received a grade of C or above)

__Human Anatomy  __Human Physiology  __Microbiology  __Human Development  
__General Psychology  __College English  __Speech/Public speaking  __Nutrition  
__Intro to Sociology/Social/Cultural  __Basic Algebra II (Intermediate Algebra)

Have you ever been convicted of a felony?   NO_____   YES_____    If "YES" please explain below:

______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Note: The law provides for denial of Registered Nurse licensure for crimes or acts which are substantially related to nursing qualifications, functions or duties (California Administrative Code, Section 1444). The California Board of Registered Nursing may deny licensure on the basis of conviction of these types of crimes. The Board considers most convictions involving sex crimes, drug crimes and crimes of violence to be substantially related to nursing practice, but other acts or crimes may also be considered in this category. The Board does take into account rehabilitation of individuals, as well as other factors. Questions related to denial of licensure can be directed to the California Board of Registered Nursing at (916) 322-3350.

Signature of Applicant ___________________________  Date ___________________________
Recommendation Form

Select Program: □ RN (ASN) □ LVN/MT to RN (ASN)

Applicant’s Name (Please Type or Print) __________________________

Today’s Date __________________________

APPLICANT: Please ask a professional individual such as a teacher, physician, pastor, nurse, residence hall dean or work supervisor who knows your capabilities to complete this reference form. Recommendations must be returned to the Department of Nursing & Health Sciences by the individual recommending you. Recommendations from family members, faxed or scanned recommendations and those presented directly to the Department by applicants are NOT acceptable.

I understand that this form will be used in the admission process for the PUC Nursing Program only. Federal legislation (Family Rights and Privacy Act of 1974 and its amendments) allows individuals the option of having either a confidential file or a file open to their (the applicant’s) inspection.

☐ I waive my right to review a copy of this recommendation form at any time in the future.
☐ I do NOT waive my right to review a copy of this recommendation form at any time in the future.

Applicant’s Signature __________________________

RECOMMENDER: Your frank, prompt appraisal will assist the Nursing Admissions Committee in evaluating the applicant’s qualifications. Please return this signed, original form directly to:

Pacific Union College
Department of Nursing & Health Sciences
Nursing Admissions Coordinator
One Angwin Ave
Angwin, CA  94508

1. In what capacity and for how long have you known the applicant?

2. Please describe any personality, physical, or emotional characteristics that you feel may be important to the applicant’s success in the Nursing Program.
3. Please rate the applicant as follows:

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4. Comments:

5.  □ Highly Recommend  
    □ Recommend  
    □ Recommend With Reservations  
    □ Not Recommended

Recommender’s Printed Name

Recommender’s Position/Title

Company/Organization Name

Address

Telephone

Recommender’s Signature
Recommendation Form

Select Program:  □ RN (ASN)  □ LVN/MT to RN (ASN)

Applicant’s Name (Please Type or Print) __________________________

Today’s Date __________________________

APPLICANT: Please ask a professional individual such as a teacher, physician, pastor, nurse, residence hall dean or work supervisor who knows your capabilities to complete this reference form. Recommendations must be returned to the Department of Nursing & Health Sciences by the individual recommending you. **Recommendations from family members, faxed or scanned recommendations and those presented directly to the Department by applicants are NOT acceptable.**

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5.  
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   - [ ] Recommend
   - [ ] Recommend With Reservations
   - [ ] Not Recommended

Recommender’s Printed Name: ______________________________________
Recommender’s Position/Title: _____________________________________
Company/Organization Name: ________________________________________
Address: ________________________________________________________
Telephone: _______________________________________________________
Recommender’s Signature: _________________________________________