

**TRANSITIONS to RN**  
**Application for Admission**  
 Carroll Community College  
 Nursing Program  
 1601 Washington Road  
 Westminster, Maryland 21157

**Legal Name**

\_\_\_\_\_

Last
First
Middle
Maiden

\_\_\_\_\_

Social Security Number

**Present Mailing Address**

\_\_\_\_\_

Street Address

\_\_\_\_\_

City
County
State
Zip Code

\_\_\_\_\_

Cell Phone

\_\_\_\_\_

Personal Email (print clearly)

**Carroll Community College**

\_\_\_\_\_

CCC Student ID

\_\_\_\_\_

CCC Email (print clearly)

**List below the official name of each institution attended. An official transcript from each school and/or college attended should have already been sent directly to the Carroll Community College Records Office or attached to this application.**

Name of High School and ALL Colleges Attended	Dates Attended	Degree Received	Graduation Date

The Maryland Board of Nursing may deny a license to any applicant who has been convicted of or pleads guilty or nolo contendere to a felony or to a crime involving moral turpitude, whether or not any appeal or other proceeding is pending to have the conviction or plea set aside.

**Complete reverse side**

**Current Position:** LPN \_\_\_\_\_ Paramedic \_\_\_\_\_ Military Medic \_\_\_\_\_

**Clinical Experience**

Facility Name: \_\_\_\_\_ Location: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Position Held: \_\_\_\_\_

Supervisor's Name and Contact Information: \_\_\_\_\_

Facility Name: \_\_\_\_\_ Location: \_\_\_\_\_

Dates of Employment \_\_\_\_\_ Position Held: \_\_\_\_\_

Supervisor's Name and Contact Information: \_\_\_\_\_

Facility Name: \_\_\_\_\_ Location: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ Position Held: \_\_\_\_\_

Supervisor's Name and Contact Information: \_\_\_\_\_

**Professional Development**

Certifications: \_\_\_\_\_

Continuing Education Courses: \_\_\_\_\_

Professional Memberships: \_\_\_\_\_

1. Briefly describe your motivation for pursuing an RN program and how your experience as a Paramedic/Military Medic/ LPN has prepared you for this role.

2. How do you plan to handle the demands of nursing school with 2-3 days/week of class and clinical and approximately 18-25 hours/week of study and preparation time?

**DISCLOSURE REGARDING PROGRAMS FOR LICENSURE OR CERTIFICATION**

Some programs at Carroll Community College (CCC) are designed to meet educational requirements for a specific professional licensure or certification that is required for employment in an occupation.

If you are an out-of-state student seeking professional licensure in a state other than Maryland and you are taking a course or program leading to professional licensure or certification, CCC currently does not guarantee that the course or program meets requirements for professional licensure or certification anywhere other than Maryland. We encourage all students, especially out-of-state students, to contact the appropriate state (or District of Columbia or U.S. territory) licensing board or agency where you intend to work to familiarize yourself with the state educational, licensing, and/or certification requirements.

**Equal Opportunity/Non-Discrimination Statement**

The Board of Trustees of Carroll Community College reaffirms its commitment to the belief in the intrinsic value of individuals and their right to be judged upon the merits of abilities and actions alone; provision of maximum employment opportunity based on the system and the capacity of the potential employee to meet those needs and without regard to any other factors; and provision of maximum educational opportunity for all students with special attention to time schedules, locations, costs and financial support, counseling, student activities, remedial assistance, and other factors, assuring the accessibility of such opportunity to all. In the conduct of the official business and day-to-day operations of the Carroll Community College, the Board of Trustees will not tolerate discrimination against any member of the student body, faculty, or staff upon any unlawful basis or upon any other basis not related to that person's eligibility or qualifications for participation in College programs, services, activities, and employment.

The Board further states its intent to pursue a vigorous program to expedite the recruitment, hiring, training, development, and promotion of employees and the recruitment, placement, counseling and teaching of students without regard to factors of race, color, sex, sexual orientation, national origin, religion, pregnancy, disability, age, genetic information, military service, gender, gender identity, or any other class protected by Federal, State or local law. Further, the Board states its intent to pursue this program, not only in full compliance with pertinent legislation, but in a spirit of outreach and affirmation, accepting fully its charge to improve the quality of life for all within its area of influence.

The Board, further, instructs the President to plan for, implement, and report periodically on an active program to fulfill this commitment. (Revised by the Board of Trustees June 21, 2017)

**THE DEADLINE FOR RECEIPT OF COMPLETED APPLICATIONS IS February 15.**

Please read the following statement and indicate by your signature below that you agree to the terms stated.

*Unsigned applications will not be processed.*

**I affirm that the information on this application form, and any additional material that I submit related to the admissions process, is complete, accurate, and true to the best of my knowledge. I agree to submit any other materials that are required for the admissions process. I understand that furnishing false or incomplete information on any part of this application for admission or any related material may be cause for denial of admission. I agree that as a student, I will honor the academic ethics code of Carroll Community College.**

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Signature

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Date