

Palomar College Nursing Education - Traditional RN Application

Applicant Information:

First Name, Middle Name, Last Name (including previous last names)	
Address, City, State, Zip	
Best Contact Phone Number	
Best Contact Email	
Birthdate	
Palomar College Student ID Number	

Demographic Data: This data is optional and confidential. It is reported to the California Community College's Chancellor's Office for statistical purposes only. If you prefer not to answer, please leave blank.

Gender (circle any) Female Male Non-Binary Not Listed _____ Pronouns (circle any) She/Her He/Him They/Them Not Listed _____	
Ethnicity (circle any that apply)	American Indian, Alaskan Native, Asian, Black, African-American, Filipino, Hispanic, Latino, Native Hawaiian, Pacific Islander, White, Not Listed _____
Languages Spoken at Home (list all):	Is English your First Language? Yes / No

Applicant College Degree Information:

College Degrees Earned	Name of College	Years Attended

TEAS Exam Information:

Date of All Attempts	Score	If unsuccessful on first attempt, how did you prepare for the retake exam?

Have you applied before? Yes / No



Signature: _____

Date: _____

Palomar College Nursing Education - Generic RN Application

Applicant Coursework:

Course Name (Prerequisites)	Course Number ex: BIO 210	Number of Units	Lab Course Yes/No?	Repeated Course Yes/No?	Repeat Reason (expired/grade)	Letter Grade Received	Semester/ Year	Name of College
Anatomy or A&P I								
Physiology or A&P II								
Microbiology								
Intermediate Algebra or Higher								
English Composition								
Speech								
Psychology								
Sociology								
Humanities								

Multi-Criteria Information: Please submit supporting documentation of proof in your application in order to be awarded points.

Degree earned in the U.S.	Associate's, Bachelor's, Master's, Doctorate	Yes / No
Allied Health certification	CNA, MA, EMT, Phlebotomy, Corpsman/Medic, LVN, etc	Yes / No
Volunteer or work experience	Within the past 3 years and a minimum of 100 hours	Yes / No
Veteran or active duty military/spouse	Copy of DD214 or military ID	Yes / No
Disability	DSPS evaluation, letter from physician, letter from VA	Yes / No
Low family income	Documentation for CCPG, Pell Grant, EOPS, Cal Works, Medi-Cal, etc. or student loan	Yes / No
First generation of family to attend college	Provide a written statement	Yes / No
Need to work during prerequisite courses	Letter from employer	Yes / No
Disadvantages in social or educational	Provide a written statement	Yes / No
Difficult personal or family situation	Provide a written statement	Yes / No
Refugee	Vista indicating refugee status	Yes / No
Language skills or coursework	Transcripts of language courses taken or statement of proficiency if fluent speaker	Yes / No

Signature: _____

Date: _____