



Admission Requirements and General Information
Class Begins July 19, 2021

Application Deadline is May 15, 2021

All inquiries or correspondence for admission should be directed to:

Registrar
JRMC School of Nursing
1600 West 40th Avenue
Pine Bluff, Arkansas 71603
(870-541-7858
mccorkletr@jrmc.or

Office hours for the School of Nursing are 8:00 a.m. to 4:30 p.m., Monday through Friday. The telephone number for the Registrar is (870)541-7858; E-mail address, mccorkletr@jrmc.org. A class is admitted each January/July. Completed applications are reviewed and acted upon by the APRG (Admissions, Promotion, Recruitment and Graduation) Committee and/or Director.

Admission Requirements

- High School Graduate/GED
- ATI TEAS score of at least a 60
- High School and College Transcripts
- Current CPR Certification through American Heart Association BLS Provider
- ACT (score will NOT be used to determine admission, but is required)
- Letter of Good Standing if previously enrolled in a nursing program
- Current Immunizations
 - Immunization records should include current TDap; proof of (2) MMR vaccines and/or titers; proof of varicella x 2 or a positive history of disease and/or titers; proof of hepatitis B vaccine series and/or positive titers; current TB skin test; and annual flu shot. All immunizations need to be completed and put in your file before you are allowed to start class.

Pre-Requisite Education Requirements

- English Composition I (ENGL 1313) (3 hours)
- English Composition II (ENGL 1323) (3 hours)
- Anatomy & Physiology I (BIOL 2454) (4 hours)
- Anatomy & Physiology II (BIOL 2464) (4 hours)
- Microbiology (BIOL 2474) (4 hours)
- College Algebra (MATH 1333) (3 hours)
- General Psychology (PSYC 2303) (3 hours)

* Anatomy & Physiology I and II must be less than 5 years old

All prerequisite courses are required to be completed before acceptance into the program. A copy of all immunizations and CPR certification is required before admission into the program.

Ability-to-benefit and/or applicants without a high school diploma or GED are ineligible for admissions.

www.jrmc.org/schoolofnursing

JRMC School of Nursing is not certified on SEVIS (Student and Exchange Visitor Information System), and therefore cannot accept international students on Student Visas, or applicants who are not U.S. citizens.

JEFFERSON REGIONAL MEDICAL CENTER
SCHOOL OF NURSING
 1600 WEST 40TH AVENUE
 PINE BLUFF, ARKANSAS 71603
 870-541-7858

APPLICATION FOR ADMISSION

Directions: Complete all areas of application, sign, date, and return this form to the address above. An Application fee of \$35.00 is due upon completion of application process.

Print or type information below:

Name: _____
 Last First Middle Maiden Other (Surname(s))

Current Address: _____
 Street City State Zip

Telephone (Including area code): Home: _____ Business: _____ Cell: _____
 Fax: _____ E-mail: _____

In case of emergency notify: _____ Phone: () _____

How did you hear about JRMC School of Nursing? _____

Have you previously applied to JRMC School of Nursing? Yes: _____ No: _____

Social Security Number: _____ Date of Birth: _____

Provide reference information on the chart below:

REFERENCE INFORMATION			
Name	Address	Telephone	Relationship

Have you ever been convicted of a crime? (See attachment) Yes: _____ No: _____

Have you ever been arrested? Yes: _____ No: _____

Have you ever had a legal charge brought against you? Yes: _____ No: _____

Have you ever been admitted to another nursing program? Yes: _____ No: _____

Is English your native language? If "No", results of TOFEL examination are required (contact Registrar)

Yes: _____ No: _____

If selected for entry, can you furnish proof you are a U.S. Citizen?

Yes: _____ No: _____

Complete all areas, List in chronological order high school and **all*** colleges, universities, vocational schools, private schools, private career schools, etc., that you have attended. Attach a separate sheet of paper if additional space is needed. Official transcripts for **all** attended are required. **It is your responsibility to request that your transcripts be sent directly from these institutions to the Registrar of JRMC School of Nursing.**

EDUCATIONAL HISTORY				
Name of Institution (college, school, university, or other)	City/State	Dates Attended		Degrees/Certificates
		From	To	
High School				
GED				
Colleges/etc				

In the space below, list current enrollment(s) as applicable. Official transcript(s) are required when current courses are completed. Course grade report will be temporarily accepted if currently enrolled in a course of study.

EDUCATIONAL HISTORY (continued)			
Name of Institution	Course(s)	Credit Hours	Awarded (Degree/Diploma/Certificate)

Complete the chart below

TESTING HISTORY		
Have you ever taken:	ATI TEAS: Yes: _____ No: _____ Score: _____ Date: _____	TOEFL: Yes: _____ No: _____ Date: _____

Include **all*** employment beginning with present or most recent. Attach a separate sheet of paper if additional space is needed.

EMPLOYMENT HISTORY					
Employer	City/State	Date		Job Responsibility	Reason for Leaving
		From	To		

Are you registered or licensed? Yes: _____ No: _____
Registry/License No. and State: _____

The following information is optional and used for statistical purposes and does not affect eligibility for selection:

Predominate Ethnic Background:

_____ American Indian/Alaskan Native _____ Asian or Pacific Islander _____ Black, Non Hispanic
_____ Hispanic/Latino _____ White, Non Hispanic _____ Other: _____

NOTE: This application **will not** be processed until **all** required records are submitted.
(See "Application Process Letter" link on the web page and/or School Catalog for application procedure).

JRMC School of Nursing does not discriminate in the educational programs or activities of the School on the basis of race, sex, age, creed, national origin, marital status or disability. The School has identified specific essential functions (technical standards) critical to the success of students enrolled in the nursing program. Refer to the School Catalog, Essential Functions Policy.

I hereby make application for selection to Jefferson Regional Medical Center School of Nursing and declare that the information on this application is complete and accurate. I understand that any misrepresentation, falsification, omission of information or any other attempt to deceive the School is cause for either denial of selection for admission or dismissal from enrollment and that future applications shall not be considered by JRMC School of Nursing.

I have read and/or discussed the *Essential Functions* necessary in the role of nursing student which can be found in the School Catalog and believe I would be able to perform them.

I voluntarily give JRMC School of Nursing the right to make any investigation of my personal history related to school and employment records.

Applicant Signature: _____ **Date:** _____
*All means "total; entirety"

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In the space provided below, write an account of:

- 1) Your experiences and activities since you last attended school (if more than six months ago).

- 2) What you most enjoy doing in your leisure time.

- 3) All the things you have accomplished that have given you the greatest satisfaction.

- 4) What contacts have you had with the health care field?

- 5) Yours plans and aspirations for the future.

- 6) There are Baccalaureate, Associate Degree and Hospital-based Diploma nursing programs in this state. Each program prepares the student to take the national nursing license examination and become a Registered Nurse. On the back of this sheet, please state your reasons or rationale, for choosing Jefferson Regional Medical Center School of Nursing.

Signature

Date

Instructions for Taking the ATI TEAS Test

SEARK is a testing site for the TEAS exam.

The cost is \$70.00.

The test is given on Wednesdays at 8:30 am and 1:00 pm. You must be registered 24 hours prior to test date

A minimum score of 60 is required to be considered for admission into JRMC School of Nursing.

To Register for Test Go to the Website listed below:

<https://www.atitesting.com/>

STEP 1: Sign in or create a new user account. (NOTE: If you have ever been registered with ATI, do not sign in as a new user. Use your old account.)

You may take the TEAS exam a maximum of three (3) times per year.

There is study material available on the web site.

You must bring your driver's license in order to test.

UPON FINISHING EXAM, PRINT (2) COPIES OF RESULTS, (1) TO BE BROUGHT TO THE SCHOOL OF NURSING AND (1) TO KEEP.

If you have any questions, please contact the School of Nursing. (870)541-7858.

INSTRUCTIONS FOR TAKING THE TEAS EXAM PROCTORIO (at home)

ATI now has made it possible for students to take the TEAS exam proctorio at home. There are specifications required for this exam. Please check the site for specifics.

A minimum score of 60% is required for admission into the JRMC School of Nursing.

You are only allowed to take the TEAS exam 3 times in a year. If you surpass this, you will have to wait a year after you have taken the first exam in order to test again.

There is study material available on the website. There is also remediation available to you in your ATI account if you have taken the exam and your score was below 60%.

If you have ever been registered with ATI do **not** sign in as a new user. Use your old account.

[TEAS information Link](#)

- (<https://www.atitesting.com/teas/the-ati-teas-exam-with-proctorio>)

[TEAS Registration Link testing with ATI](#)

- (<https://www.atitesting.com/teas/register>)

Upon finishing the exam, print (2) copies of the results, (1) to be brought to the School of Nursing and (1) for yourself. You may also email it to the registrar at mccorkletr@jrmc.org