

Chippewa Valley Technical College  
620 W. Clairemont Avenue, Eau Claire, WI 54701  
Associate Degree Nursing (10-543-1) Fall Semester 2010 Entry

**Petition Application**

Please print or type.

CVTC Student ID #	Last Name	First Name	Middle Initial
Address		City/State/Zip	Phone (include area code)
Email Address			

I am petitioning to enroll in the (check one):

Full-time program-Eau Claire       Part-time Program-Eau Claire       Full-time program-River Falls

Have you petitioned previously:  Yes  No

**Instructions:**

1. Complete the information below. This sheet will serve as the cover page for your petition application.
2. Attach the documentation as identified in the chart below.
3. Make a copy of your petition application for your files.
4. Turn in your completed petition application **in person** to the CVTC Admissions Department, 620 W. Clairemont Avenue, Eau Claire, during the following times:  
     7:30 AM-3:30 PM                      February 1, 2, 3, 5, 8, 9, 11, 12, 15, 2010  
     11:00 AM-7:00 PM                  February 4 and 10, 2010

All petition applications must be turned into the Eau Claire Admissions Office regardless of the campus you wish to attend. There will be no exceptions granted. Applications received in the mail will be returned to the sender.

Your petition application will be reviewed by an Admissions representative to determine its completeness at the time it is turned in. Expect to spend approximately 15 minutes with the representative. Incomplete petition packets will be returned to the applicant with no exceptions granted.

All complete packets received during the petition period will receive equal consideration. No preference will be given based on the date submitted.

Read the following and circle "Yes" or "No" for each item and attach the necessary documentation. By circling "Yes," you **verify** that you have met the criteria. If you have questions about being ready to petition, see a program counselor.

			Admission Criteria	Attachment Required
1.	Yes	No	I have completed all the admissions requirements identified in Phase I on the Admission Requirements Sheet located at: <a href="http://www.cvtc.edu/pages/793.asp">http://www.cvtc.edu/pages/793.asp</a> .	None.
2.	Yes	No	I have: <ul style="list-style-type: none"> <li>• COMPASS Assessment scores of Reading 85 and Algebra 30, <u>or</u></li> <li>• ACT scores of Reading 22 and Math 22</li> </ul> Note: Scores are not needed for applicants with Bachelor's degrees. An official transcript showing the degree should be on file in the Admissions Office as part of Phase I; therefore, no documentation is required in this packet.	Attach proof of test scores.
3.	Yes	No	I have completed nursing assistant training. Promissor webpage: <a href="https://www.asisvcs.com/services/registry/search_generic.asp?CPCat=0750NU">https://www.asisvcs.com/services/registry/search_generic.asp?CPCat=0750NU</a> RSE	Attach proof of completion, such as transcript or CNA Card or Promissor Registry webpage.

			Admission Criteria	Attachment Required
4.	Yes	No	I have completed CPR certification by the American Heart Association – Healthcare Provider level or the American Red Cross – Professional Rescuer level.	Attach copy of <b>current</b> CPR card.
5.	Yes	No	I have completed General Anatomy and Physiology with a grade of C or better.	If taken at CVTC, attach copy of SIS transcript. If not taken at CVTC, see documentation instructions below.*
6.	Yes	No	<p>I have completed the Wisconsin Criminal Background Check packet. These forms are available on the web at:  <a href="http://www.cvtc.edu/pages/298.asp">http://www.cvtc.edu/pages/298.asp</a></p> <p>NOTE:</p> <ul style="list-style-type: none"> <li>Clinical agencies cannot allow students to participate in clinical experiences unless they have provided completed criminal background checks to the college. This information is used to help determine if your background (previous convictions and/or pending charges) will prohibit you from being accepted at clinical sites. Clinical experiences are a required part of the program. If you are not able to practice at a clinical site, you will not be able to complete the program.</li> <li>If you are accepted into the Nursing program and have lived out of state within the last three years, you will be required to obtain a copy of your criminal record from the state. This does not need to be submitted with your petition packet at this time.</li> </ul>	<p>Attach packet and \$18 background processing fee. Make check out to CVTC.</p> <p style="text-align: center;"><u>OR</u></p> <p>If you have completed this packet at CVTC within the last four years, please sign below (no other documentation is needed).</p> <p style="text-align: center;">_____ Signature</p>
<b>Items for Additional Consideration:</b>				
7.	Yes	No	I have completed Advanced Anatomy and Physiology with a grade of C or better.	If taken at CVTC, attach copy of SIS transcript. If not taken at CVTC, see documentation instructions below.*
8.	Yes	No	I have completed Microbiology with a grade of C or better.	
9.	Yes	No	I have completed Written Communications with a grade of C or better.	
10.	Yes	No	I have completed Developmental Psychology with a grade of C or better.	
11.	Yes	No	I have completed Oral/Interpersonal Communications <u>or</u> Speech with a grade of C or better.	
12.	Yes	No	I have completed Introduction to Psychology <u>or</u> Psychology of Human Relations with a grade of C or better.	
13.	Yes	No	I have completed Introduction to Sociology or Economics or Race Ethnic & Diversity or Contemporary American Society with a grade of C or better.	

**\*Transfer Credit Documentation Requirements.** If you have taken coursework at other educational institutions, please take note of the following documentation requirements:

- If CVTC has not yet granted transfer credit(s), you must attach an official transcript in a sealed envelope from the educational institution where you took the course and earned the credit.
- If CVTC has granted transfer credit(s), it will appear on your unofficial CVTC transcript from SIS which must be attached.

I certify that the above information is accurate. I have read and understand the requirements, petition, and notification instructions. I have read and understand all the conditions of my petition to enter my program.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*CVTC is an Affirmative Action/Equal Opportunity Institution and complies with all requirements of the Americans with Disabilities Act.*

*kf/bh:SB:Nursing Petition Application, 1/13/10*