

Aloha, Nursing Program Applicant!

Thank you for considering the **Associate in Science Degree in Nursing (ADN) Program** at **Kapi'olani Community College (KCC)** as you pursue a career in the nursing field and begin the journey towards completing your nursing education.

Pre-Application Advisory:

The attached nursing application packet contains the "Kapi'olani CC Admissions Application/ Checklist Form" and application instructions for the Kapi'olani CC ADN Programs to be offered each Fall Semester and each Spring Semester. Students entering the Kapi'olani CC ADN Program will have an opportunity to transfer to the UH-Mānoa or UH Hilo Bachelor of Science in Nursing (BSN) via the UH System-wide Nursing Consortium Curriculum.

To ensure that your application is completed properly, thus enabling the Kapi'olani CC Nursing Department to consider your application, <u>please be sure to read and follow all of the instructions within the application packet.</u> If an error is made by you or if an item is left blank by you within your application, the Kapi'olani CC Nursing Department will not be responsible for correcting the error such that your application may be deemed incomplete or may not be reviewed accordingly.

If an item is left blank or a supporting application document (e.g., STAR Academic Transcript or ATI-TEAS Individual Performance Profile Report) is not attached or if an application instruction is not adhered to, the Kapi'olani CC Nursing Department will deem the application as incomplete.

Application Questions:

If you have any questions regarding your nursing application, please contact the Kapi'olani CC Nursing Department at (808) 734-9305 or kapnurs@hawaii.edu.

Nursing Department

Aloha, Nursing Program Applicant!

Thank you for considering the **Associate in Science Degree in Nursing (ADN) Program** at **Kapi'olani Community College (KCC)** as you pursue a career in the nursing field and begin the journey towards completing your nursing education.

<u>Academic Transcript Process:</u> If you've completed any of the ADN prerequisite and co-requisite courses through coursework completed outside of the University of Hawai'i (UH) System, please be sure to complete the procedures below as part of your application to the ADN program.

- 1. **For college coursework completed outside of the UH System**, please have official academic transcripts sent from your previous college (s) to the Kapi'olani CC Kekaulike Center: Transcript Evaluation Office, kapteval@hawaii.edu, by the application deadline. In addition, application. This will enable the Kapi'olani CC Nursing Department to expedite the review of your application.
- 2. **For verification of chemistry completed in high school**, <u>please attach a student copy of your high school transcript to your nursing application</u> by the application deadline. This will enable the Kapi'olani CC Nursing Department to expedite the review of your application. (Note: If you completed one semester of any college-level chemistry course, you do <u>not</u> have to submit a high school academic transcript.)
- 3. **For verification of AP or CLEP credits,** please have official academic transcripts sent from the College Board to the Kapi'olani CC Kekaulike Center: Transcript Evaluation Office, kapteval@hawaii.edu, by the application deadline.

ATI Test of Essential Academic Skills (ATI-TEAS) Exam Process: Please attach a student copy of your ATI-TEAS Exam Individual Performance Profile report to your nursing application regardless of whether or not you completed the ATI-TEAS exam at KCC or another institution/agency. This will enable the Nursing Department to expedite the review of your application.

If you did <u>not</u> complete the ATI-TEAS exam at Kapi'olani CC, and for verification of your TEAS exam adjusted individual total score, **please contact ATI to have an official ATI-TEAS Individual Performance Profile Report sent to the KCC Nursing Department by the application deadline.** If the Kapi'olani CC Nursing Department does not receive an official ATI-TEAS exam report directly from ATI by the application deadline, your application will be deemed incomplete.

MyPlan for the Nursing Program: On a separate sheet of paper, please describe how you will prepare for the nursing program by addressing each item below. At the top of the document, please use the title "MyPlan for the Nursing Program" and indicate your name. The MyPlan document should address how you will ensure the following:

- Approximately 25-30 hours of study time per week;
- •Financial resources to pay for tuition/fees and books each semester;
- •Reliable transportation in preparation for your clinical practicum;
- •Reliable child care to adhere to program schedule;
- •Reliable **computer access** and proficient **computer skills**:
- •Able to **take care of your health** to complete program requirements;
- •Able to **balance commitments** to school, family and work.

Application Advisory: The MyPlan essay will not be scored or used to rank applicants, but will be used for informational purposes to determine the applicant's readiness for the rigors of the nursing program. There are no minimum or maximum words for the essay as each applicant may determine the length and quality of his/her essay. **Please attach your MyPlan essay to your application.**

Application Notification Requirement (via U.S. Postal Service): In order for your notification letter to be sent to you by mail, you must attach a self-addressed, stamped envelope with your nursing program application. The envelope (measuring 9 ½ inches by 4 inches) should have your current mailing address with the appropriate postage (e.g., USPS "Forever" stamp) on the envelope.

On the envelope, **your mailing address should be typed or handwritten with legible print.** The Nursing Department will not be responsible for notification letters that are delayed or not mailed accordingly by the U.S. Postal Service due to incorrect or illegible mailing addresses as printed on the envelope.

Application Questions: Please be sure to complete the above application instructions. If the instructions are not completed, your application may be deemed incomplete or may not be reviewed accordingly. For questions regarding the completion of the application, please contact the Nursing Department at (808) 734-9305 or kapnurs@hawaii.edu.

UNIVERSITY OF HAWAI'I • KAPI'OLANI COMMUNITY COLLEGE 4303 Diamond Head Road, Honolulu, HI 96816 http://www.kapiolani.hawaii.edu

Associate in Science Degree in Nursing (AS-NURS) ADMISSIONS APPLICATION/CHECKLIST FORM

Fall Semester Application Period: December 1 – February 1 **Spring Semester Application Period**: June 1 – September 1

Submit Applications (via USPS Mail) at:

Kapi'olani CC Nursing Department Kōpiko Building, Room 201 4303 Diamond Head Road Honolulu, HI 96816

APPLICANT INFORMATION

For More Information:

Kapi'olani CC Nursing Department Office Hours: Monday - Friday, 8:00am-4:00pm

Tel: (808) 734-9305; E-Mail: kapnurs@hawaii.edu

□ Spring

<u>Application Advisory</u>: Applications may be mailed or hand delivered to the Kapi'olani CC Nursing Dept. Applications will <u>not</u> be accepted via fax or e-mail.

<u>Directions</u>: Please complete each item carefully and submit this Admissions Application/Check List (pages 1-2) and all required documents to the Kapi'olani CC Nursing Department by the application deadline. Additional information on the application and acceptance process is provided on the attached pages 3-8. If pages 1-2 of the application are not completed in its entirety, the application will be deemed incomplete and will NOT be processed or considered by the Nursing Department.

Indicate Application Term (and Vear).

Fall

MI DICHNI INIC	<u> </u>	mulcate Appli	cation form (and fear).		¹¹ 5	
ame:(Last Name, First Name and M.I.)			UH ID# or U	UH ID# or Username:		
(Last Nan	ne, First Name and M.	.I.)				
Mailing Address:						
	(Street Address)		(City)	(State)	(Zip Code)	
Phone: Home:	hone: Home: Cell:		W	Vork:		
Email Address:						
(@hawaii.edu prefer	red)					
List other name(s) u	used on documents: _					
(Notify the Kapi'olar	ni CC Kekaulike Cent	er regarding other name	s used on college documen	nts.)		
			s: If you are currently atter			
		arrent home institution.		nding an institution wit	.iiii tile Oliiveisit	
	☐ Hawai'i CC			□ UH-West Oʻa	hu	
□ Honolulu CC	□ Kaua'i CC		□ UH-Hilo	□ UH-Mānoa	iiu	
1 Honoraia CC	□ Raua I CC	□ iviaui CC				
New Home Instituti	ion Designation for A	All Applicants:				
If accepted your hom your home institution	ne institution will be con and major will rema	hanged to Kapi'olani Co in as it is when applied.	C and your major will be ch	nanged to "AS-NURS"	. IF not accepted	
Application/Check L false information wil Code. I understand t documents for any su	ist (on pages 1 and 2) Il subject me to the rec that if I am not accepte absequent semester. I the Associate in Scient	are true to the best of m quirements and/or discip ed into the program of a also allow Kapi olani C	responses provided for all on knowledge and belief. I line measures as provided application, I must submit a C Kekaulike Center to chaprogram. I have read and a second control of the con	understand that provid under the University's new application and al ange my major and hom	ling incorrect or Student Conduct I required ne institution, if I	
Date:	Signatu	re:				
For Office Use Only	y (Application Attacl	hmants).	1	Date Stamp He		
		□ MyPlan □ SASE	I I	Date Stamp He	16	
		□ Myr ian □ SASE				
☐ Health-related wo	ork experience/training	verification				
□ Other:	in onpononce, training	5 ,0111100011011				

1 rev.12/02/2024

ADMIS								
APPLICANT NAME: UH ID# or Username:								
1 HU (e and M.I.)	& Transfer Student.	Completi	on Date:	
						•	olani CC Nursing Departr	ment)
Exai	m Date:		ExamT	otal Score:	Exam S	ite:		
							orerequisite and/or co-requion outside of the UH Systems	
Time	Time Course Course Course Equivalent Where Completed When Completed							
Limit	PREREQUISITE	Credits	Grade	Course	(i.e., School Name)		•	
	Courses			(if applicable)			Term	Year
none	Chemistry(*)					O Fall	O Spring O Summer	
none	ENG 100					O Fall	O Spring O Summer	
none	FAMR/HDFS 230					O Fall	O Spring O Summer	
none	MATH 100 or higher					O Fall	O Spring O Summer	
none	MICR 130					O Fall	O Spring O Summer	
none	PSY 100 or						1 0	
	ANTH 200					O Fall	O Spring O Summer	
none	PHYL 141					O Fall	O Spring O Summer	
none	PHYL 141Lab					O Fall	O Spring O Summer	
none	PHYL 142					O Fall	O Spring O Summer	
none	PHYL 142Lab					O Fall	O Spring O Summer	
(*) Che	mistry requiremen	nt can be fu	lfilled by o	completing one ve	ar of high school chem	•	e semester of any (three-c	redit)
					ry grade not used for a			rearry
	GO DEOLUGIES						When Completed	
Time	CO-REQUISITE	Course	Course	Equivalent Course	Where Completed (i.e. School Name)		When Completed	
Time Limit	Co-requisite Courses	Course Credits	Course Grade	Equivalent Course (if applicable)	Where Completed (i.e., School Name)			Voor
Limit	Courses			Course		O Fall	Term	Year
Limit	Courses PHRM 203			Course		O Fall	Term O Spring O Summer	Year
none none	Courses PHRM 203 Humanities	Credits	Grade	Course (if applicable)	(i.e., School Name)	O Fall	Term O Spring O Summer O Spring O Summer	
none none 4. ACA transcri complet yellow h 5. COI of your c Institut 6. HIG copy of y	PHRM 203 Humanities DEMIC TRANS pts. For courses of the course of the c	CRIPTS: completed of the ching the ching the ching the ching to your app ANSCRIP ascript to you	For course outside of tart above, 3 for addir courses of lication. C	Course (if applicable) es completed within the UH System, please highlight attional instruction completed outside official transcript(strong of the complete to the complete	n the UH System, plea ease attach a student all courses listed aboves.) e of the University of Its) must also be sent to Its y prerequisite was sat he items below.	O Fall se attach copy of ye e within y Hawai'i S Kapi'olani	Term O Spring O Summer	ademic course s using a
none none 4. ACA transcri complet yellow h 5. COI of your c • Institut 6. HIG copy of y • High S	PHRM 203 Humanities DEMIC TRANS pts. For courses of the courses of the course of the	CRIPTS: completed of the ching the ching the ching the ching to your app. ANSCRIP ascript to you	For course outside of tart above, 3 for addir courses of lication. Con application	course (if applicable) es completed within the UH System, please highlight attional instruction completed outside official transcript(strong in the complete to the complete the strong in the complete the complete the strong in the complete the strong in the complete the complete the complete the complete the complet	n the UH System, plea ease attach a student all courses listed aboves.) e of the University of Its) must also be sent to Its y prerequisite was sat the items below. In transcripts:	O Fall se attach copy of ye e within y Hawai'i S Kapi'olani ranscript I isfied in I	Term O Spring O Summer O Spring O Summer a copy of your STAR accour transcripts to verify your academic transcript (ystem: Please attach stude CC. Please complete iter Request Date(s):	ademic course s using a ent copy ns below
none none 4. ACA transcri complet yellow h 5. COI of your c Institut 6. HIG copy of y High S 7. COL official t	PHRM 203 Humanities DEMIC TRANS pts. For courses of the completion of the completion of the course	CRIPTS: completed of the ching the ching the ching the ching to your appoint and the complete of the complete	For course outside of tart above, 3 for addir courses of lication. Con application	Course (if applicable) es completed within the UH System, please highlight attional instruction completed outside official transcript(stand) I only if chemistrem. Please complete to Name or ired only if using C Kekaulike Cent	n the UH System, plea ease attach a student all courses listed above s.) e of the University of le) must also be sent to k Tr y prerequisite was sat he items below. n transcripts: AP or CLEP college of er Transcript Evaluatio	O Fall se attach copy of y e within y Hawai'i S Kapi'olani ranscript I isfied in I	Term O Spring O Summer O Spring O Summer a copy of your STAR accour transcripts to verify your academic transcript ystem: Please attach stude CC. Please complete iter	ademic course s using a ent copy ns below
none none 4. ACA transcri complet yellow h 5. COI of your c Institut 6. HIG copy of y High S 7. COL official t Transcri	PHRM 203 Humanities DEMIC TRANS pts. For courses of the completion of the completion of the course	CRIPTS: completed of the characteristic strains of the characteristic strains of the complete strains	For course outside of tart above, 3 for addir courses of lication. Con required application CIPT required application CIPT requirements of the course of the	Course (if applicable) es completed within the UH System, please highlight attional instruction completed outside official transcript(stand) if chemistren. Please complete to Name or ired only if using C Kekaulike Cent	n the UH System, plea ease attach a student all courses listed above s.) e of the University of le) must also be sent to be	O Fall se attach copy of ye e within y Hawai'i S Capi'olani ranscript I isfied in I	Term O Spring O Summer O Spring O Summer a copy of your STAR accour transcripts to verify your academic transcript ystem: Please attach stude CC. Please complete iter Request Date(s): high school: Please attach stude r pre or corequisites. Please	ademic course s using a ent copy ns below student
none none 4. ACA transcri complet yellow h 5. COI of your c Institut 6. HIG copy of y High S 7. COL official t Transcri 8. HEA experience or have o	PHRM 203 Humanities DEMIC TRANS pts. For courses of the courses of the courses of the course of the	CRIPTS: completed of the characteristic series of the characteristic series of the complete of	For course outside of tart above, a for addir courses of lication. Consequently application of the healthcar from the training of the healthcar from the hea	Course (if applicable) es completed within the UH System, please highlight attional instruction completed outside official transcript(selection) I only if chemistrem. Please complete to Name of ired only if using the C Kekaulike Center of the CE OR TRAIN the field, please attactining agency (to verificable)	n the UH System, plea ease attach a student all courses listed above s.) e of the University of It y prerequisite was sat he items below. In transcripts: AP or CLEP college of er Transcript Evaluatio Name on transcripts: ING: To receive addition in a letter of reference from infy training completed).	O Fall se attach copy of ye e within y Hawai'i S Kapi'olani ranscript I isfied in I credits for n Office. al consider n a previou See page 4	Term O Spring O Summer O Spring O Summer a copy of your STAR accour transcripts to verify your academic transcript ystem: Please attach stude CC. Please complete item Request Date(s):	ent copy ns below student work experience
none none 4. ACA transcri complet yellow h 5. COI of your c • Institut 6. HIG copy of y • High S 7. COL official t Transcri 8. HEA experience or have o 9. Please	PHRM 203 Humanities DEMIC TRANS pts. For courses of the courses of the courses of the course of the	CRIPTS: completed of the ching the ching the ching the ching to your appoint and the complete of the complete	For course outside of tart above, 3 for addir courses of lication. Con application of the healthcar from the traprograms	Course (if applicable) es completed within the UH System, please highlight attional instruction completed outside official transcript(standing of the complete to the complet	n the UH System, plea ease attach a student all courses listed aboves.) e of the University of less must also be sent to be a transcripts: AP or CLEP college of the Transcript Evaluation Name on transcripts: ING: To receive addition a letter of reference from the interior of the sent also in (s):	O Fall se attach copy of ye e within y Hawai'i S Kapi'olani ranscript I isfied in I credits for n Office. al consider n a previou See page 4	Term O Spring O Summer O Spring O Summer a copy of your STAR acaput transcripts to verify your academic transcript ystem: Please attach study CC. Please complete iter Request Date(s): nigh school: Please attach study r pre or corequisites. Please ation on your application for semployer (to verify work expression of the semployer of the se	ent copy ns below student work experience
none none 4. ACA transcri complet yellow h 5. COI of your c • Institut 6. HIG copy of y • High S 7. COL official t Transcri 8. HEA experience or have o 9. Please Date/s at 10. MY	PHRM 203 Humanities DEMIC TRANS pts. For courses of the courses of the courses of the course of the	CRIPTS: completed of the ching the ching the ching the ching to your appoint and the complete of the complete	For course outside of tart above, 3 for addir courses of lication. Con application of the healthcar from the traprograms	Course (if applicable) es completed within the UH System, please highlight attional instruction completed outside official transcript(standing of the complete to the complet	n the UH System, plea ease attach a student all courses listed aboves.) e of the University of less must also be sent to be a transcripts: AP or CLEP college of the Transcript Evaluation Name on transcripts: ING: To receive addition a letter of reference from the interior of the sent also in (s):	O Fall se attach copy of ye e within y Hawai'i S Kapi'olani ranscript I isfied in I credits for n Office. al consider n a previou See page 4	Term O Spring O Summer O Spring O Summer a copy of your STAR accour transcripts to verify your academic transcript ystem: Please attach stude CC. Please complete item Request Date(s):	ent copy ns below student work experience
none none 4. ACA transcri complet yellow h 5. COI of your c • Institut 6. HIG copy of y • High S 7. COL official t Transcri 8. HEA experience or have o 9. Please Date/s at 10. MY applicati	PHRM 203 Humanities DEMIC TRANS pts. For courses of ion. After completing pen. LEGE TRANSC college transcript to ion(s): H SCHOOL TRANSC our high school transcripts to be see ipt Request Date: LTH-RELATED are or training complete or training complete iist any previount tended: PLAN FOR THEON.	CRIPTS: completed of eting the che (See page ERIPTS for your app) ANSCRIP's excript to your app to the key of the completed of the complete of	For course outside of tart above, 3 for addir courses of lication. Con application of the programs on for leaving PROGRAM	Course (if applicable) es completed within the UH System, please highlight attional instruction completed outside official transcript(standing of the complete to the complet	n the UH System, plea ease attach a student all courses listed aboves.) e of the University of less must also be sent to be a transcripts: AP or CLEP college of the Transcript Evaluation Name on transcripts: ING: To receive addition a letter of reference from the interior of the sent also in (s):	O Fall se attach copy of ye e within y Hawai'i S Kapi'olani ranscript I isfied in I credits for n Office. al consider n a previou See page 4	Term O Spring O Summer O Spring O Summer a copy of your STAR acaput transcripts to verify your academic transcript ystem: Please attach study CC. Please complete iter Request Date(s): nigh school: Please attach study r pre or corequisites. Please ation on your application for semployer (to verify work expression of the semployer of the se	ent copy ns below student work experience
none none 4. ACA transcri complet yellow h 5. COI of your o Institut 6. HIG copy of y High S 7. COL official t Transcri 8. HEA experience or have o 9. Please Date/s at 10. MY applicati For Nur	PHRM 203 Humanities DEMIC TRANS pts. For courses of the courses of the courses of the course of th	CRIPTS: completed of the characteristic series to your app ANSCRIPT Script to your app ANSCRIPT Script to your app FRANSCRIPT Script to your app ANSCRIPT Script to your app Example to the K WORK Extend within the scripts sent to the K Extend within the scripts sent to some appropriate to the K TRANSCRIPT SCRIPT SCR	For course outside of tart above, 3 for addir courses of lication. Courses of lication. Courses of lication of the requirement of the healthcar from the traprograms on for leaving PROG	Course (if applicable) es completed within the UH System, please highlight attional instruction completed outside official transcript(standed only if chemistrem. Please complete to Name or ired only if using C Kekaulike Center of the field, please attactining agency (to verattended. Instituting: (i.e. academic RAM: After complete complete in the field, please attaction of the field of the fi	n the UH System, plea ease attach a student all courses listed above s.) e of the University of le b) must also be sent to be	O Fall se attach copy of ye e within y Hawai'i S Kapi'olani ranscript I isfied in I credits for n Office. al consider n a previou See page 4	Term O Spring O Summer O Spring O Summer a copy of your STAR account transcripts to verify your academic transcript system: Please attach stude CC. Please complete iter Request Date(s): high school: Please attach stude or pre or corequisites.	ent copy ns below student work experience
none none 1. ACA transcri complet yellow h 5. COI of your o Institut 6. HIG copy of y High S 7. COL official t Transcri 8. HEA experience or have o 9. Please Date/s at 10. MY applicati For Nur	PHRM 203 Humanities DEMIC TRANS pts. For courses of the courses of the courses of the course of th	CRIPTS: completed of the completed of the completed of the completed of the complete of the co	For course outside of tart above, 3 for addir courses of lication. Con application application application the trappograms on for leaving PROG.	Course (if applicable) es completed within the UH System, please highlight attional instruction completed outside official transcript(stance) I only if chemistrem. Please complete to Name of ired only if using C Kekaulike Center of the CE OR TRAIN of field, please attactining agency (to vereattended. Instituting: (i.e. academic RAM: After complete to the complete of the complet	n the UH System, plea ease attach a student all courses listed above s.) e of the University of It b) must also be sent to It y prerequisite was sat he items below. In transcripts: AP or CLEP college of er Transcript Evaluation Name on transcripts: ING: To receive addition in a letter of reference from ify training completed). ion(s): failure): colleting the MyPlan essa	O Fall se attach copy of ye e within y Hawai'i S Kapi'olani ranscript I isfied in I credits for n Office. al consider n a previou See page 4	Term O Spring O Summer O Spring O Summer a copy of your STAR account transcripts to verify your academic transcript system: Please attach stude CC. Please complete iter Request Date(s): high school: Please attach stude or pre or corequisites.	ent copy ns below student ase order work experience

EXPLANATION FOR ADMISSIONS CHECKLIST (page 2)—Associate Degree in Nursing (ADN/ ANURS)

Item 1 University of Hawai'i System Application Form (UH SAF)

If you are new, transferring or returning to Kapi'olani Community College, you must complete the UH System Application Form. Indicate your major as: **Nursing – Associate in Science Degree.**

NOTE: Students withdrawing from Kapi'olani Community College on or after the first day of instruction of the <u>Fall</u> semester may reapply for the program as a continuing student for Spring by indicating on the withdrawal form that they intend to reapply. They may also register for non-nursing courses as a continuing student. Students who do not indicate their intent to return or who withdraw in the <u>Spring</u> semester will be required to apply for readmission by submitting the UH SAF to the Kapi'olani CC Kekaulike Center by the required application deadline. Students who apply for entry and do not enroll (in non-nursing courses) in the previous semester (i.e. taking a break for one semester) will be required to submit the UH SAF to the Kekaulike Center by the required deadline. All students who withdraw from college are subject to the program requirements in effect at the time of re-entry.

Item 2 Assessment Technology Institute – Test of Essential Academic Skills (ATI-TEAS) Exam Score

- a. Please attach a copy of your ATI-TEAS Individual Performance Profile report with your nursing application. An official ATI-TEAS Individual Performance Profile report must also be sent by ATI to the Kapi'olani CC Nursing Department by the application deadline. (If the TEAS exam is completed outside of Kapi'olani CC, you must contact ATI to have your official exam report sent to Kapi'olani CC.)
- **b.** The minimum acceptable percentile total score is 65% and the score remains current for 3 years.
- **c.** Applicants may retake the exam every 90-days. If the retake exam is before the 90th day, the retake score is considered invalid by the Nursing Department.
- **d.** ATI TEAS exams must be taken at a testing center. Remote or at-home test scores taken before May 31, 2022 will be accepted if meeting criteria from sections (a.& b.). Exams taken remotely or at-home on or after June 1, 2022 are not accepted.

Item 3 Prerequisite and Co-requisite Courses

Completion of Prerequisite Courses:

- **a.** All prerequisite courses must be completed by the deadline of that application period: February 1 (for Fall entrance) and September 1 (for Spring entrance).
- **b.** Submit official transcripts from outside of the University of Hawai'i (UH) System to the Kapi'olani CC Kekaulike Center by the application deadline. Courses that have already been evaluated and transferred into the UH System may be verified via the UH System Transfer Database: https://www.sis.hawaii.edu/uhdad/CourseTransfer.home.
- **c.** All courses must be completed with a grade of "C" or higher.
- **d.** Effective March 2012 and thereafter, time limits will no longer be imposed on any prerequisite (and co-requisite) courses.
- **e.** Courses must be taken on an "A-F" grade basis except for credit-by-examination for which a "CR may be accepted. Pass/Fail is accepted only if the institution uses Pass/Fail exclusively for their grading system. Courses with no letter grade will be assigned a "C" grade for admissions and ranking purposes, depending on the institution's grading system which describes the grade equivalent for pass/fail.
- **f.** Students with less than a 2.5 cumulative grade point ratio (GPR) for pre-requisite courses and co-requisite courses are not considered for admission.

Completion of Co-requisite/Support Courses:

Co-requisite/support courses may be completed before applying to the program or after being accepted into the ADN program. The same policies as referenced above in Item 3 b-f (for prerequisite courses) will apply to the co-requisite/support courses.

Item 4 STAR Academic Transcript: To access and print out your STAR academic transcripts, please follow the steps below.

- a. Access your MyUH Portal at https://myuh.hawaii.edu/cp/home/displaylogin (and enter your username and password);
- b. Click to "STAR Degree Check Transcript" (located within the left-side column);
- c. Click to "Transcript" Tab (located at the top);
- d. When "Choosing Type of Transcript You Would Like," select "All Campuses and Degree Levels" (from pull-down menu).
- e. Click to "Combination Transcripts By Semester" located at the bottom of the page;
- f. After accessing your STAR transcript, click the "Print" button to print out your transcript (preferably in portrait mode);
- g. After downloading a hard copy of your STAR transcript, please use yellow highlighting pen to delineate prerequisite and co-requisite courses completed.
- h. If you are not able to print out your STAR academic transcript (after being out of the UH System for over a year), please contact the Nursing Department counselors for assistance with downloading a copy of your STAR academic transcript.

Item 5 & 7 College & AP or CLEP Transcripts and Transfer Credit Evaluation

- **a.** For required courses completed at a campus <u>outside</u> of the University of Hawai'i (UH) System, you must have official transcripts sent directly to the Kapi'olani CC Kekaulike Center; after which you must submit a Transcript Evaluation Request form to the KISC in order to have these courses formally evaluated. To be considered for transfer, a course description must accompany each course taken outside of the UH system.
- **b**. For required courses completed through AP or CLEP testing, please order official transcripts sent directly to Kapi'olani CC Transcript Evaluation Office; after which please submit a Transcript Evaluation Request form to the Kekaulike Center to have these courses evaluated.
- c. For required courses completed outside the UH System and which were evaluated by UH System schools (other than Kapi olani

Community College), you must have official transcripts sent directly to the Kapi'olani CC Kekaulike Center; after which you must submit a Transcript Evaluation Request form to the KISC in order to have these courses formally evaluated.

- **d.** For required courses completed at a campus <u>within</u> the UH System, you do <u>not</u> have to have transcripts sent to the Kekaulike Center, nor will you need to complete a Transcript Evaluation Request Form since course credits completed within the UH System will automatically be evaluated and transferred accordingly.
- **e**. The transcript evaluation process is required after acceptance into the Kapi'olani CC ADN program, but is not required as part of the application to the Kapi'olani CC ADN program.

Item 6 High School Transcripts: High School transcript is required only if the chemistry prerequisite was satisfied in high school. A copy of an official transcript should be attached to your application to verify the completion of one year of high school chemistry.

Item 8 <u>Health-Related Work Experience or Training</u>: Additional consideration will be given for those applicants completing health-related work experience or training prior to application. The letter of reference should document the applicant's direct patient care experience in a health-related field as evidenced by completion of a training program, work experience or physician verification of caregiving experience. Official academic transcripts or a copy of certification should be submitted to document the applicant's completion of a training program.

Item 9 Previous Nursing Programs: Please indicate if the applicant has left or been dismissed from previous healthcare training program/s. If yes, please provide a brief statement of reason for leaving or being dismissed. Additional information may be requested.

Item 10 MyPlan for the Nursing Program: On a separate sheet of paper, please describe how you will prepare for the rigors of the nursing program. At the top of the document, please use the title "MyPlan for the Nursing Program" and indicate your name. The MyPlan document should address how you will ensure the following: 25-30 hours of study per week; financial resources to pay for tuition/fees/books; reliable transportation for clinical practicum; reliable child care; reliable computer access and proficient computer skills; ability to take care of health to complete program requirements; and ability to balance commitments to school, family and work.

Application Advisory: The MyPlan essay will not be scored or used to rank applicants, but will be used for informational purposes to determine the applicant's readiness for the rigors of the nursing program. There are no minimum or maximum words for the essay as each applicant may determine the length and quality of his/her essay. **Please attach your MyPlan essay to your application.**

EXPLANATION FOR ACCEPTANCE – Associate Degree in Nursing (ADN/ANURS)

A. Minimum Requirements for Acceptance

- 1. All of the pre-requisite courses and completed co-requisite courses must be completed with a "C" grade or higher within the time limitations.
- 2. A cumulative grade point ratio (GPR) of 2.5 for pre-requisite and co-requisite support courses taken (except chemistry) is required. Note: GPR's are not rounded.
- 3. Students with a GPR of less than 2.0 at Kapi'olani Community College will not be considered for admissions for any of the nursing programs until they have a cumulative GPR of 2.0 or higher at Kapi'olani Community College.
- 4. The ATI-Test of Essential Academic Skills (ATI-TEAS) exam must have an adjusted individual total score of 65% or higher and be taken within the last 3 years.
- 5. All courses transferred to Kapi'olani Community College that have a credit/no credit or pass/fail will be given a grade of "C" for ranking purposes when applying to the nursing program.

B. Acceptance Criteria

- 1. All applicants who have met the minimum requirements are considered for acceptance on a best qualified basis. Applicants are ranked on a point scale based on the following criteria:
 - a. GPR for completed pre-requisite and co-requisite support courses;
 - b. ATI-Test of Essential Academic Skills adjusted individual total score;
 - c. Co-requisite support courses completed by application deadline;
 - d. Health-related work experience or training that includes direct patient care experience.
- 2. Applicants are notified of their application status by mail: Mid-May for Fall acceptance and end of October for Spring acceptance.

C. Post-Acceptance Requirements

- 1. **Health Requirements** for Accepted Students: Accepted students will be required to complete a series of health-related requirements and forms as part of their enrollment in the nursing program. More information may be found within the "Nursing Health Requirements" webpage on the Kapi'olani CC website. The health requirements include:
- a. Current certificate for **CPR** for Health Care Providers
- b. Two-step **tuberculosis clearance** (card or physician's report) within the past 12 months.
- c. **Tetanus, Diphteria and Pertussis** (Tdap) vaccination within the past 10 years.
- d. Positive titer blood test for **Varicella** (chicken pox) after receiving two Varicella vaccinations.

- e. Positive titer blood tests for **Rubeola (Measles)**, **Mumps and Rubella** after receiving two MMR vaccinations.
- f. Positive **Hepatitis B** titer (HbsAb) with signed consent form or 3 Hepatitis immunizations with signed consent form.
- g. Annual seasonal flu vaccinations.
- h. Documentation of **COVID-19 Vaccinations**.
- i. **Physical examination** completed by primary care provider confirming health status and ability to fulfill the technical standards for the nursing program (as described on page 6).
- j. Nursing Dept. Forms: Understanding & Agreement, Medical Consent, Exclusion of Worker's Compensation, Document Release.
- k. Verification of personal **health insurance**.
- 1. Purchase of **Medical Malpractice Liability Insurance**: Accepted students will purchase the Kapi'olani CC medical malpractice liability insurance when they register for their nursing courses and pay for their tuition and related fees.
- m. **Criminal Background Check and Drug Screening** for Accepted Students: Criminal background check and urine drug screening to be completed via or for the clinical facility. See "Health Care Student Notification" below.
- n. Students must be able to function in a 1:10 faculty to student ratio in the clinical and lab setting.

TECHNICAL STANDARDS

In order to familiarize yourself with the physical requirements for students entering a nursing program at Kapi'olani Community College, please review the "Technical Standards for the Department of Nursing Program" on page 6.

HEALTH CARE STUDENT NOTIFICATION

Due to the complex nature of the health care industry, the University-affiliated health care facilities have implemented various rules, policies and procedures that must be met and adhered to by nursing students at Kapi'olani Community College. As such, nursing students are required to complete University-prescribed requirements that involve clinical practice in a University-affiliated health care facility with no substitution allowed. In addition, it is the responsibility of the student to satisfactorily complete affiliated health care facility criminal background checks and drug testing requirements in accordance with procedures and time lines as prescribed by the affiliated health care facility. If a clinical facility does not give permission for a Kapi'olani CC nursing student to complete his/her clinical practicum in the facility, the nursing student will not be allowed to continue with their clinical assignment and the nursing course. Furthermore, the Nursing Department at Kapi'olani Community College is not obligated to find an alternative clinical placement for the student. Failure of a student to complete the prescribed clinical practice shall be deemed as not satisfying academic program requirements, such that the student will be required to withdraw from the nursing program.

KAPI'OLANI CC NURSING PROGRAM CAREER LADDER

A career ladder model is incorporated into the ADN program to enable ADN students to acquire skills to become a nurse aide as well as obtain training and licensure to become a registered nurse. After completing the first semester, students acquire skills to become a nurse aide. The ADN Program prepares graduates for the NCLEX-RN exam and to perform as entry-level registered nurses. ADN graduates may also continue to pursue the Bachelor's of Science in Nursing (BSN) at UH-Mānoa or UH-Hilo.

SELECTION PROCESS

Selection is made on a BEST QUALIFIED, FIRST ACCEPTED basis. Applicants with the highest scores will be admitted into the ADN program. All qualified applicants will be ranked for admissions based on combined scores of the four areas below. In the event that several students achieve the same ranking, admission will be determined anonymously by random selection.

- ATI-TEAS Exam Adjusted Individual Total Score;
- Grade point ratio (GPR) for prerequisite general education courses;
- Number of and grade point ratio (GPR) for co-requisite/support courses;
- Health-related work experience or training that includes direct patient care experience.

Applicants with a cumulative grade point ratio (GPR) below 2.0 (who are on probation/suspension at Kapi'olani Community College) will not be considered for selection or admission to the program. Kapi'olani Community College is a state-funded institution such that residents of the state of Hawai'i receive selection priority before qualified non-residents (including military or faculty exempt students). Changes to an applicant's tuition status in terms of changing from non-resident to resident must be completed before the application deadline. Applicants not accepted into the program must reapply and resubmit required information.

OFF CAMPUS SITE INSTRUCTIONAL SITE COHORT

The Kapi'olani CC ADN program in its entirety with all complementary support services is offered each Fall and Spring at the Kapi'olani CC Diamond Head (DH) campus site and the Leeward Community College (LCC) off-campus instructional site based on the availability of instructors. Students may be required to attend both KCC and/or LCC sites to accommodate for class size. Students will be notified during the registration process prior to the start of the semester.

ALTERNATE CHOICES AND MULTIPLE APPLICATION POLICIES

The policies below apply to the nursing programs within Kapi'olani Community College.

1. If you do not qualify or if you are not accepted into your first choice (nursing) program, and if you've applied for an alternate

choice (nursing program), your application for your alternate choice (nursing program) will be processed accordingly

- 2. Acceptance into another nursing program will be on a "first qualified, first accepted basis" (as with the Nurse Aide Program) or on a "best qualified, first accepted basis" (as with the ADN, LPN-RN Transition and Practical Nursing Program). If you are interested in another nursing program (as an alternate choice), your application to the alternate nursing program will be considered only until after your application for the initial nursing program is denied. Please contact the Nursing Department to obtain the application information for other nursing programs
- 3. If you are accepted into and have started a nursing program, you must complete the first nursing program before entering a second nursing program. You will not be able to simultaneously withdraw from the first nursing program to enter a second nursing program
- 4. Health Science Programs: For more information, please contact the Kapi'olani CC Health Science Department at 808.734.9270 or visit the Kapi'olani CC website at http://www.kcc.hawaii.edu/page/programs (and scroll to "Health Education").

Kapi'olani Community College Technical Standards for the Department of Nursing Program

Issue	Standard	Examples
hearing	Ability sufficient to monitor and assess health needs.	Converse with patients and health care professionals; auscultation of BP breath, heart and bowel sounds; respond to paging systems, bells, telephones, and equipment sounds.
mobility	Mobility and strength sufficient to support and move patients.	Support and transfer patients, move in and out of treatment areas. Reach equipment or parts of patient's body.
motor skills (fine & gross)	Perform multiple motor tasks simultaneously. Ability to lift, move, position, and transfer patients sufficient to provide safe and effective nursing care.	Maneuver and operate equipment, pushing/pulling/carrying, perform CPR.
tactile	Tactile ability sufficient for physical assessment.	Distinguish hot or cold skin temperature, pulse rate; feel anatomical landmarks. Distinguish textures, degree of firmness, temperature differences.
visual	Ability sufficient for observation and assessment necessary in nursing care. Have peripheral form depth perception and ability to distinguish shades of color	Describe patient's skin color, perform calibrations on syringes, administering medications, thermometers, reading and writing patient's charts/flow sheets/ monitors; interpret regent tests, color of body fluids, changes in skin color.

Kapi'olani Community College ANURS/ADN Program Course Sequence for New Students

Fall Admission Sequence

Fall	NURS 210 NURS 210C	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL	3 cr. 3 cr.
	NURS 210L	Health Promotion Across the Life Span LAB	3 cr.
	NURS 211	Professionalism in Nursing	1 cr.
	NURS 212	Pathophysiology	3 cr.
		- <i>uni</i>	
Spring	NURS 220	Health and Illness I	4 cr.
	NURS 220C	Health and Illness I CLINICAL	3 cr.
	NURS 220L	Health and Illness I LAB	3 cr.
	+ PHRM 203	General Pharmacology	3 cr.
Fall	NURS 320	Health and Illness II (Family Health)	4 cr.
	NURS 320C	Health and Illness II (Family Health) CLINICAL	3 cr.
	NURS 320L	Health and Illness II (Family Health) LAB	3 cr.
	+ HUM. ELECT	One course from Humanities listing for A.S. Degrees	3 cr.
Spring	NURS 360	Health and Illness III	3 cr.
Spring	NURS 360C	Health and Illness III CLINICAL	3 cr.
	NURS 360L	Health and Illness III LAB	3 cr.
	NURS 362	Professionalism in Nursing II	1 cr.
		Spring Admission Sequence	
Spring	NURS 210	• •	3 cr
Spring	NURS 210	Health Promotion Across the Life Span (WI)	3 cr.
Spring	NURS 210C	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL	3 cr.
Spring	NURS 210C NURS 210L	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB	3 cr. 3 cr.
Spring	NURS 210C NURS 210L NURS 211	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing	3 cr.
Spring	NURS 210C NURS 210L NURS 211 NURS 212	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology	3 cr. 3 cr. 1 cr.
Spring Fall	NURS 210C NURS 210L NURS 211 NURS 212	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I	3 cr. 3 cr. 1 cr. 3 cr. 4 cr.
	NURS 210C NURS 210L NURS 211 NURS 212 NURS 220 NURS 220C	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I Health and Illness I CLINICAL	3 cr. 3 cr. 1 cr. 3 cr. 4 cr. 3 cr.
	NURS 210C NURS 210L NURS 211 NURS 212 NURS 220 NURS 220C NURS 220L	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I Health and Illness I CLINICAL Health and Illness I LAB	3 cr. 3 cr. 1 cr. 3 cr. 4 cr. 3 cr. 3 cr.
	NURS 210C NURS 210L NURS 211 NURS 212 NURS 220 NURS 220C	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I Health and Illness I CLINICAL	3 cr. 3 cr. 1 cr. 3 cr. 4 cr. 3 cr.
Fall	NURS 210C NURS 210L NURS 211 NURS 212 NURS 220 NURS 220C NURS 220L	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I Health and Illness I CLINICAL Health and Illness I LAB	3 cr. 3 cr. 1 cr. 3 cr. 4 cr. 3 cr. 3 cr.
	NURS 210C NURS 210L NURS 211 NURS 212 NURS 220 NURS 220C NURS 220L + PHRM 203	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I Health and Illness I CLINICAL Health and Illness I LAB General Pharmacology	3 cr. 3 cr. 1 cr. 3 cr. 4 cr. 3 cr. 3 cr. 3 cr.
Fall	NURS 210C NURS 210L NURS 211 NURS 212 NURS 220 NURS 220C NURS 220L + PHRM 203 NURS 320	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I Health and Illness I CLINICAL Health and Illness I LAB General Pharmacology Health and Illness II (Family Health) Health and Illness II (Family Health) CLINICAL Health and Illness II (Family Health) LAB	3 cr. 3 cr. 1 cr. 3 cr. 4 cr. 3 cr. 3 cr. 4 cr.
Fall	NURS 210C NURS 210L NURS 211 NURS 212 NURS 220 NURS 220C NURS 220L + PHRM 203 NURS 320 NURS 320C	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I Health and Illness I CLINICAL Health and Illness I LAB General Pharmacology Health and Illness II (Family Health) Health and Illness II (Family Health)	3 cr. 3 cr. 1 cr. 3 cr. 4 cr. 3 cr. 3 cr. 4 cr. 3 cr.
Fall Spring	NURS 210C NURS 210L NURS 211 NURS 212 NURS 220 NURS 220C NURS 220L + PHRM 203 NURS 320 NURS 320C NURS 320C NURS 320L + HUM. ELECT	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I Health and Illness I CLINICAL Health and Illness I LAB General Pharmacology Health and Illness II (Family Health) Health and Illness II (Family Health) CLINICAL Health and Illness II (Family Health) LAB One course from Humanities listing for A.S. Degrees	3 cr. 3 cr. 1 cr. 3 cr. 4 cr. 3 cr. 3 cr. 4 cr. 3 cr. 3 cr. 3 cr.
Fall	NURS 210C NURS 210L NURS 211 NURS 212 NURS 220 NURS 220C NURS 220L + PHRM 203 NURS 320 NURS 320C NURS 320C	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I Health and Illness I CLINICAL Health and Illness I LAB General Pharmacology Health and Illness II (Family Health) Health and Illness II (Family Health) CLINICAL Health and Illness II (Family Health) LAB	3 cr. 3 cr. 1 cr. 3 cr. 4 cr. 3 cr. 3 cr. 4 cr. 3 cr. 3 cr.
Fall Spring	NURS 210C NURS 210L NURS 211 NURS 211 NURS 212 NURS 220C NURS 220C NURS 220L + PHRM 203 NURS 320C NURS 320C NURS 320L + HUM. ELECT	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I Health and Illness I CLINICAL Health and Illness I LAB General Pharmacology Health and Illness II (Family Health) Health and Illness II (Family Health) CLINICAL Health and Illness II (Family Health) LAB One course from Humanities listing for A.S. Degrees Health and Illness III	3 cr. 3 cr. 1 cr. 3 cr. 4 cr. 3 cr. 3 cr. 3 cr. 3 cr. 3 cr. 3 cr. 3 cr.
Fall Spring	NURS 210C NURS 210L NURS 211 NURS 211 NURS 212 NURS 220C NURS 220C NURS 220L + PHRM 203 NURS 320C NURS 320C NURS 320L + HUM. ELECT NURS 360 NURS 360C	Health Promotion Across the Life Span (WI) Health Promotion Across the Life Span CLINICAL Health Promotion Across the Life Span LAB Professionalism in Nursing Pathophysiology Health and Illness I Health and Illness I CLINICAL Health and Illness I LAB General Pharmacology Health and Illness II (Family Health) Health and Illness II (Family Health) CLINICAL Health and Illness II (Family Health) LAB One course from Humanities listing for A.S. Degrees Health and Illness III Health and Illness III	3 cr. 3 cr. 1 cr. 3 cr. 4 cr. 3 cr. 3 cr. 3 cr. 3 cr. 3 cr. 3 cr. 3 cr.

⁺ SUPPORT COURSES (Non- Nursing courses) recommended for completion before entering the nursing program.

Kapi'olani Community College – Associate in Science Degree in Nursing (ANURS) PROGRAM COST ITEMS FOR ANURS STUDENT

For specific program cost information for each item below, please check the Kapi'olani CC website, specifically the "ADN Self Advising Form" within the "Forms & Documents" section for the Associate Degree in Nursing Program.

Semester	Description (Cost Item)	
Nursing Course(s) and Credits		
Fall	Tuition (per credit) & Fees:	\$1,779
NURS 210/C/L – Hlth Promotion Across the Life Span (9 cr)	Nursing Books:	\$1,079 (est)
NURS 211 – Professionalism in Nursing (1 credit)	Uniforms, shoes:	\$ 580 (est)
NURS 212 – Pathophysiology (3 credits)	Liability Insurance	\$15
	ATI Testing	\$1,200 (est)
	Professional Fee	\$500
	Online Exam Fee	\$27
	Health Document Tracking Fe	ee \$30
	Health Insurance	\$5,300/yr (est)
	Initial Health Costs	\$337 (est)
	Parking/Mileage	\$258 (est)
	Total	\$11,078
Spring	Tuition (per credit) & Fees	\$1,380
NURS 220/C/L – Health and Illness I (10 credits)	Nursing Books	\$268 (est)
TVORS 220/C/E Treatin and Timess I (10 creates)	Professional Fee	\$500 (cst)
	Online Exam Fee	\$27
	Parking/Mileage	\$258 (est)
	Total	\$2, 433
		•
Fall	Tuition (per credit) & Fees	\$1380
NURS 320/C/L – Health and Illness II (10 credits)	Nursing Books	\$404 (est)
	Liability Insurance	\$15
	Professional Fee	\$500
	Online Exam Fee	\$27
	Health Insurance	\$5300/yr (est)
	Parking/Mileage	\$258 (est)
	Total:	\$7,884
Spring	Tuition (per credit) & Fees	\$1,380
NURS 360/C/L – Health and Illness III (9 credits)	Nursing Books	\$403 (est)
NURS 362 – Professionalism in Nursing II (1 credit)	Professional Fee	\$500
	Online Exam Fee	\$27
	Parking/Mileage	\$258 (est)
	Graduation Costs	\$155
	Total:	\$2,723
RN License	NCLEX-RN Exam Fees	\$223
A. C.	RN License	\$36
	Total:	\$259
	104814	ψ = 07

TOTAL ESTIMATED COST: \$24, 377