

UH FILE DROP:

ONLINE SUBMISSION PROCEDURES

Directions: Please complete each item by typing directly into the fields or neatly printing on a hardcopy, and submit this Admission Application Checklist with all required documents to the Nursing Department via [UH File Drop](#). *We are also accepting in-person applications this application period.*

To use file drop follow the directions below:

1. Scan application or save to your computer all supporting documents
 - a. If you do not have access to a scanner, use a free smartphone app like *Scannable* or *Scanner Pro* or *Cam Scanner*. Save your application and all supporting documents in PDF format.
2. From any web browser, go to <https://www.hawaii.edu/filedrop>
3. Log in as a UH User or Non-UH user (Non-UH Users will be sent a verification email, click on the link in the email)
 - a. In the recipient field, type: kapnurs@hawaii.edu
 - b. Click in the drop down menu in the expiration timer, change it to 14 days.
 - c. In the “Optional Message” field, enter FULL NAME and the PROGRAM you are applying to
 - d. After you’ve completed the Recipient field, extended the expiration timer (**set to “14-days”**), type in the Optional Message, click Proceed.
 - e. Click the Choose File button to browse for your application and supporting documents. If you upload your documents in different files (i.e. application, transcripts, etc.), please write a description of the file in the Description box.
 - f. Click the Start Upload button.
 - g. You will be redirected to a confirmation page with the link to your uploaded file. You’re finished.

Please contact us at kapnurs@hawaii.edu or 808-734-9305 if you have any questions or need assistance with these temporary application submission procedures.

NURSE AIDE PROGRAM - Certificate of Competence
ADMISSIONS APPLICATION/CHECKLIST FORM

Fall Application Period: Continuous

Spring Application Period: Continuous

Submit Applications (via USPS) at:

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

For More Information, Contact:

Kapi'olani CC Nursing Department
Kōpiko Building, Room 201
Tel: (808) 734-9305
E-Mail: kapnurs@hawaii.edu

Application Advisory: Applications must be **mailed or hand-delivered or emailed**

through UH File Drop to the Kapi'olani CC Nursing Dept. Applications will not be accepted via fax.

Directions: 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. Additional information on the application and acceptance process is provided on the attached pages 3-5. **If pages 1-2 of the application are not completed in its entirety, the application will be deemed incomplete and will NOT be processed by the Nursing Department and will NOT be considered by the Nursing Department.**

APPLICANT INFORMATION Indicate Application Term (and Year): ☐ Fall OR ☐ Spring OR ☐ Summer ____
Indicate Preferred Course Days: ☐ Mon/Wed/Fri OR ☐ Tues/Thurs/Fri

Name: _____ **UH ID# or Username:** _____
(Last Name, First Name and M.I.)

Mailing Address: _____
(Street Address) (City) (State) (Zip Code)

Phone: Home: _____ Cell: _____ Work: _____

Email Address: (@hawaii.edu email preferred) _____

List other name(s) used on documents: _____

Current Home Institution Designation for Continuing Students: If you are currently attending an institution within the University of Hawai'i System, please indicate your current home institution. **(Choose Only One)**

<input type="checkbox"/> Kapi'olani CC	<input type="checkbox"/> Hawai'i CC	<input type="checkbox"/> Leeward CC	<input type="checkbox"/> Windward CC	<input type="checkbox"/> UH-West O'ahu
<input type="checkbox"/> Honolulu CC	<input type="checkbox"/> Kaua'i CC	<input type="checkbox"/> Maui CC	<input type="checkbox"/> UH-Hilo	<input type="checkbox"/> UH-Mānoa

New Home Institution and Major Designation for All Applicants:

☐ If accepted your home institution may be changed to Kapi'olani CC and your major will be updated to "CO-NALT", Long-Term Care Nurse Aide.

APPLICANT CERTIFICATION: I certify that the answers and responses provided for all of the items on this Admissions Application/Check List (on pages 1 and 2) are true to the best of my knowledge and belief. I understand that providing incorrect or false information will subject me to the requirements and/or discipline measures as provided under the University's Student Conduct Code. I understand that if I am not accepted into the program of application, I must submit a new application and all required documents for any subsequent semester. I also allow KISC to change my major and home institution if I am not accepted into the Long-Term Care Nurse Aide program. **I have read and agree to abide by the application policies within pages 3-5.**

Date: _____ **Signature:** _____

For Office Use Only

Student Type: ☐ F ☐ M ☐ T ☐ C ☐ R (Indicate home institution below)

Current Home Institution: ☐ HAW ☐ HON ☐ LEE ☐ KAP ☐ WIN
☐ KAU ☐ MAU ☐ HIL ☐ MAN ☐ WOA

Residency: ☐ Resident ☐ Nonresident (Type: _____) ☐ Pending

Action: ☐ Accepted ☐ Denied ☐ Redirected to: _____

Date Stamp Here

ADMISSIONS CHECKLIST for Nurse Aide Program

APPLICANT NAME: _____ **UH ID# or Username:** _____
(Last Name, First Name and M.I.) **DATE:** _____

Date Completed

Item

1. _____ **UH System Application Form (UH SAF) for New or Returning Students.**
2. _____ **English (Reading) Requirement:** Complete **one** of the items (A, B, C or D) below.
 - A) Complete the ACCUPLACER WritePlacer Test with a score of (4) or higher.**
•Test Date: _____ **•Score:** _____
 - OR
 - B) Completion of ENG 21 or higher** (e.g., ENG 22 or ENG 98/100S)
 - Course Title: _____
 - Course Completion Date: _____ (e.g., Fall 2020)
 - Institution Name (where course completed): _____
 - Official (non-UH System) Transcripts sent to Kapi‘olani CC on: _____
 - OR
 - C) Provide copy of your U.S. High School transcript or diploma.**
 - OR
 - D) Provide copy of your General Educational Development (GED) certificate.**

Note: Selection is made on the FIRST QUALIFIED, FIRST ACCEPTED basis. Applicants with a cumulative grade point average (GPA) below 2.0 (who are on probation/suspension at Kapi‘olani Community College) will not be considered for selection or admission to the program. Applicants not accepted into the program must reapply and resubmit required information. Residents of the state of Hawai‘i receive selection priority.

EXPLANATION OF ADMISSION CHECKLIST (page 3) – Nurse Aide Program

Item 1 UH System Application Form (SAF)

If you are new to Kapiolani Community College or are returning after being out a semester, you must complete the UH System Application Form. Indicate your major as: **Long Term Care Nurse Aide Training (CO-NALT)**.

Students withdrawing from college on or after the first day of instruction of the Fall 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 for Fall. Students who do not indicate their intent to return or who withdraw in the Spring Semester will be required to apply for readmission by submitting the UH SAF to the Kapi‘olani CC Kekaulike Center by the program application deadline. All students who withdraw from college are subject to the program requirements in effect at the time of re-entry.

Item 2 The English (reading) requirement may be fulfilled via one of the options below.

Option A – Placement Test.

- i. Complete the Accuplacer WritePlacer Test at the Kapi‘olani CC Testing Center in the Lama Building, Room 101. To schedule, contact the Testing Center, <https://guides.library.kapiolani.hawaii.edu/testing>.
- ii. Request two (2) copies of your test results. **Submit one copy with your application. Keep the second copy for your records.**
- iii. **An Accuplacer WritePlacer score of 4 or higher** is required for entrance into the Nurse Aide program.
- iv. The placement test is valid for 2 years. If more than one test is taken, the highest score will be used. You may retake the test after 60 days have elapsed after taking the test.
- v. The placement test can be taken at any of the Community Colleges within the University of Hawai‘i System.

Option B – Placement Test Waiver by English Course Completion

- i. If you completed English 21 or higher (i.e., English 22, 97, 98, 100S, 100 or ESOL 94 or ESL 100) with a grade of “C” or higher within the past ten years, you do not need to take the placement test.
- ii. If the course was completed at a campus outside 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 Kekaulike Center in order to evaluate the English course you completed. To be considered for transfer, a course description must accompany each course taken outside of the UH system.
- iii. Courses completed outside of the UH System and which were evaluated by UH System schools (other than Kapi‘olani Community College) will also need to be evaluated by the Kekaulike Center.
- iv. If the course was completed at a campus within the UH System, transcripts do not have to be 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 relative to your program of study.
- v. If there are any questions or concerns about the transferability of the course, it is recommended that you complete the placement test.

Option C – U.S. High School Diploma: Provide a copy of your high school diploma, if you graduated from a high school within the United States.

Option D – General Educational Development (GED) certificate: Provide a copy of your General Educational Development (GED) certificate.

EXPLANATION FOR ACCEPTANCE – Nurse Aide Program

A. Minimum Requirements for Acceptance

1. Completion of the Accuplacer WritePlacer test with a score of 4 or higher; or
2. Completion of ENG 21 or higher; or
3. Possession of a U.S. high school diploma; or
4. Possession of a General Educational Development (GED) certificate.

B. Acceptance Criteria

1. All applicants who meet the minimum requirement are considered for acceptance on a first qualified basis.
2. Applicants are notified of their application status by e-mail.

C. Post-Acceptance Requirements

1. **Health Requirements for Accepted Students:** Accepted students will be sent a Health Packet with specific information requirements and forms that must be completed in order to register. The health requirements below will vary by facilities.

- a. Current certificate for **CPR** for Health Care Providers.
- b. Current certificate for **First Aid** (depending on clinical practicum site requirement)
- c. Two-step **tuberculosis clearance** (card or physician's report) within the past 12 months.
- d. Positive titer blood tests for **Rubeola (Measles), Mumps and Rubella** or two MMR immunizations.
- e. Positive titer blood test for **Varicella (chicken pox)** or after receiving two Varicella 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 Vaccination**.
- i. **Physical examination** completed by a primary care provider confirming health status and ability to fulfill the technical standards for the nursing program (as described on page 5).
- j. Nursing Dept. Forms: **Understanding & Agreement; Medical Consent; Exclusion of Worker's Compensation; Document Release**.
- k. Verification of personal **health insurance**.

2. **Purchase of Medical Malpractice Liability Insurance:** Accepted students will purchase the KCC medical malpractice liability insurance via the KCC Cashier's Office when they register for their nursing courses and pay for their tuition and related fees.

3. **Criminal Background Check for Accepted Students:** A criminal background check and urine drug screening to be completed via the clinical facility. See "Health Care Student Notification" below.

HEALTH CARE STUDENT NOTIFICATION

Health care students are required to complete University-prescribed academic requirements that involve clinical practice in a University-affiliated health care facility with no substitution allowed. Failure of a student to complete the prescribed clinical practice shall be deemed as not satisfying academic program requirements. 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.

NURSE AIDE COURSES, TUITION, FEES, BOOKS AND SUPPLIES

Nurse Aide Courses: NURS 100 – Nurse Aide (4 credits), NURS 100C – Nurse Aide Clinical (1.2 credits) NURS 100L – Nurse Aide Lab (0.8 credits)

Tuition and Fees: For current tuition cost, please check the Kapi'olani CC website, specifically the Nurse Aide Program Schedule/Flyer within the Forms & Documents section within the Nurse Aide Program webpage. Program fees include a professional fee (for lab supplies), liability insurance fee, student transportation (bus pass) fee, student publication fee and student activity fee will also be applied. Tuition and fees are paid at the time of registration.

Nurse Aide Book include: Textbook, Study Guide and NURS 100 Module/Lecture Notes. Please check the Nurse Aide Program Schedule/Flyer for cost of textbooks.

Nurse Aide Supplies include: White uniform, white shoes, stethoscope, stop watch and (black/red ink) pens (to be purchased via the Kapi'olani CC Bookstore) and nursing student photo ID badge (to be purchased via the Kapi'olani CC Office of Student Activities).

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.

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 and Adult Residential Care Home Operator 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 KCC Health Science Department at 808.734.9270 or visit the KCC website at <http://www.kcc.hawaii.edu/page/programs> (and scroll to "Health Sciences").

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 reagent tests, color of body fluids, changes in skin color.