



## **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 Bachelor of Science in Nursing (BSN) Program 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, please be sure to read and follow all of the instructions within the application packet. 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:** (per COVID-19 Advisory)

Due to the COVID-19 advisory restricting in-person walk-in advising, 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](mailto:kapnurs@hawaii.edu).



**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.

**Academic Transcript Process:** 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 for Admissions, Records, Graduation & Financial Aid by the application deadline. In addition, **please attach a student copy of all your college coursework (i.e., academic transcripts) to your nursing 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, please attach a student copy of your high school transcript to your nursing application** 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 not have to submit a high school academic transcript.)

**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 not 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.

4303 Diamond Head Road, Kopiko 201

Honolulu, Hawai'i 96814 -4421

Telephone: (808)734-9305

Facsimile: (808)734-9147

Website: www.kapiolani.hawaii.edu

An Equal Opportunity/Affirmative Action Institution

**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

**For More Information:**

Kapi'olani CC Nursing Department  
Tel: (808) 734-9305; Office Hours: 9:00am-4:00pm  
E-Mail: [kapnurs@hawaii.edu](mailto:kapnurs@hawaii.edu)

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

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 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.

**APPLICANT INFORMATION**

Indicate Application Term (and Year):  Fall \_\_\_\_\_  Spring \_\_\_\_\_

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: \_\_\_\_\_

List other name(s) used on documents: \_\_\_\_\_  
(Notify the Kapi'olani CC Kekaulike Center regarding other names used on college 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 Designation for All Applicants:**

If accepted your home institution will be changed to Kapi'olani CC and your major will be changed to "AS-NURS". IF not accepted your home institution and major will remain as it is when applied.

**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 Kapi'olani CC Kekaulike Center to change my major and home institution if I am not accepted into the Associate in Science Degree in Nursing program. **I have read and agree to abide by the application policies within pages 3-6.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**For Office Use Only (Application Attachments):**

- |   |                                      |                                 |                               |  |
|---|--------------------------------------|---------------------------------|-------------------------------|--|
| <input type="checkbox"/> ATI Profile Report                                   | <input type="checkbox"/> STAR Report | <input type="checkbox"/> MyPlan | <input type="checkbox"/> SASE |  |
| <input type="checkbox"/> Academic transcripts:                                | _____                                |                                 |                               |  |
| <input type="checkbox"/> Health-related work experience/training verification | _____                                |                                 |                               |  |
| <input type="checkbox"/> Other:   | _____                                |                                 |                               |  |

**Date Stamp Here**

**ADMISSIONS/APPLICATION CHECKLIST for Associate in Science Degree in Nursing (AS-NURS) DATE:** \_\_\_\_\_

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

- 1. UH SYSTEM APPLICATION FORM for New, Returning & Transfer Student.** Completion Date: \_\_\_\_\_
- 2. ATI Test of Essential Academic Skills (ATI-TEAS) Exam Score** (to be verified by the Kapi'olani CC Nursing Department)  
**Exam Date:** \_\_\_\_\_ **Exam Adjusted Individual Total (or Scaled) Score:** \_\_\_\_\_ **Exam Site:** \_\_\_\_\_
- 3. PREREQUISITE and CO-REQUISITE COURSES:** To affirm that you've completed the prerequisite and/or co-requisite courses, please complete the chart below indicating the courses that you completed within and/or outside of the UH System.

Time Limit	PREREQUISITE Courses	Course Credits	Course Grade	Equivalent Course (if applicable)	Where Completed (i.e., School Name)	When Completed			
						Term	Year		
none	Chemistry(*)					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	
none	ENG 100					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	
none	FAMR/HDFS 230					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	
none	MATH 100 or higher					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	
none	MICR 130					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	
none	PSY 100 or ANTH 200					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	
none	PHYL 141					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	
none	PHYL 141Lab					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	
none	PHYL 142					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	
none	PHYL 142Lab					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	

(\*) Chemistry requirement can be fulfilled by completing one year of high school chemistry or one semester of any (three-credit) college chemistry course with a grade of "C" or higher. Chemistry grade not used for applicant ranking.

Time Limit	CO-REQUISITE Courses	Course Credits	Course Grade	Equivalent Course (if applicable)	Where Completed (i.e., School Name)	When Completed			
						Term	Year		
none	PHRM 203					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	
none	Humanities					<input type="radio"/> Fall	<input type="radio"/> Spring	<input type="radio"/> Summer	

**4. ACADEMIC TRANSCRIPTS:** For courses completed within the UH System, **please attach a copy of your STAR academic transcripts.** For courses completed outside of the UH System, **please attach a student copy of your transcripts to verify course completion.** After completing the chart above, **please highlight all courses listed above within your academic transcripts using a yellow highlighting pen.** (See page 3 for additional instructions.)

**5. COLLEGE TRANSCRIPTS for courses completed outside of the University of Hawai'i System:** Please attach student copy of your college transcript to your application. Official transcript(s) must also be sent to Kapi'olani CC. Please complete items below.

• Institution(s): \_\_\_\_\_ Transcript Request Date(s): \_\_\_\_\_

**6. HIGH SCHOOL TRANSCRIPT required only if chemistry prerequisite was satisfied in high school:** Please attach student copy of your high school transcript to your application. Please complete items below.

• High School: \_\_\_\_\_ Name on transcripts: \_\_\_\_\_

**7. HEALTH-RELATED WORK EXPERIENCE OR TRAINING:** To receive additional consideration on your application for work experience or training completed within the health care field, please attach a letter of reference from a previous employer (to verify work experience) or have official academic transcripts sent from the training agency (to verify training completed). See page 4 for additional instructions.

**8. MY PLAN FOR THE NURSING PROGRAM:** After completing the MyPlan essay, please attach your essay to your application. See page 4 for additional instructions.

**For Nursing Department Use Only:**

- No ATI Exam Score     KCC Cum.GPR <2.0 (\_\_\_\_)     Did Not Complete Prerequisites: \_\_\_\_\_
- ATI Exam Score <78%     No STAR/College Transcripts     Prerequisite Courses Expired     MyPlan (Yes / No)     WorkEx/Trng (Yes / No)
- ATI Exam Expired     No H.S. Transcripts     Tuition Status: Res./ Non-Res.     Gender: M / F     **Qualified / Not Qualified**

## EXPLANATION FOR ADMISSIONS CHECK LIST (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 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. 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 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 score is 65% and the score remains current for 3 years. Applicants may retake the exam every three (3) months.**

### **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 (located next to the “PDF” button) to print out your transcript;**

**g. After downloading a hard copy of your STAR transcript, please use yellow highlighting pen to delineate ADN 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 College Transcripts and Transfer Credit Evaluation**

**a. For required courses 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 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 outside the UH System and which were evaluated by UH System schools (other than Kapi‘olani Community College), these courses will also need to be evaluated by the Kapi‘olani CC Kekaulike Center**

**c. For required courses completed at a campus within the UH System, you do not 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.**

**d. 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 official transcript should be attached to your application to verify the completion of one year of high school chemistry.

**Item 7 Health-Related Work Experience or Training:** 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 care giving experience. Official academic transcripts or a copy of certification should be submitted to document the applicant's completion of a training program.

**Item 8 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 is 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, Diphtheria 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.**
2. 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.
3. **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.
4. 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 after completing the pre-admissions course requirements.

## 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 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. To join the LCC off-campus instructional site cohort, you must first apply to Kapi'olani CC and be accepted by the Kapi'olani CC Nursing Department. During the ADN New Student Orientation Session, accepted students will have an opportunity to select their preferred Kapi'olani CC campus site (Diamond Head or Leeward Community College). After confirming the students' preferred campus site, and in order to achieve the required number of students at each site, a lottery system will be used by the Nursing Department to randomly assign students to a specific site.

## 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 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 reagent 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	Health Promotion Across the Life Span (WI)	3 cr.
	NURS 210C	Health Promotion Across the Life Span CLINICAL	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.
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	<u>One course</u> from Humanities listing for A.S. Degrees	3 cr.
Spring	NURS 360	Health and Illness III	3 cr.
	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	Health Promotion Across the Life Span (WI)	3 cr.
	NURS 210C	Health Promotion Across the Life Span CLINICAL	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.
Fall	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.
Spring	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	<u>One course</u> from Humanities listing for A.S. Degrees	3 cr.
Fall	NURS 360	Health and Illness III	3 cr.
	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.

+ 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.**

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

**TOTAL ESTIMATED COST: \$24, 377**