| Student Name: | |
|------------------|--|
| Student ID#: | |
| Student's Email: | |
| Date: | |

The NURS 212 Enrollment Request Form is intended to assist students with confirming their eligibility to enroll in the NURS 212 (Pathophysiology) course which serves as a prerequisite course for the Associate in Science Degree in Nursing/ Transition for Licensed Practical Nurses (aka LPN-RN Transition Program). Please complete all applicable steps below by the stated deadlines. ***Please note students are allowed to take NURS 212 at Kapi'olani CC a total of (2) times only.

| Step | Item | Target Completion Date |
|------------|--|---------------------------------|
| | Confirm Semester in which NURS 212 course will be | ◆By August 15 |
| | completed: (Check One) | (for enrollment in Fall term) |
| | , | |
| | ☐ Fall Term: NURS 212 (CRN:) | By December 31 |
| | | (for enrollment in Spring term) |
| | ☐ Spring Term: NURS 212 (CRN:) | , |
| | Spring Term: NORS 212 (CRN:) | ●By May 1 |
| | | (for enrollment in Summer term) |
| | ☐ Summer Term: NURS 212 (CRN:) | (|
| | Confirm completion of pre-requisite courses for | By target completion date |
| │ │ | Kapi'olani CC LPN-RN Transition Program: Please | referenced in Step 1. |
| | download a hard copy of your STAR Academic | Terereneed in Step 1. |
| | | |
| | Transcript and highlight (using yellow highlight pen) all | |
| | prerequisite courses as noted below. | |
| | | |
| | Chemistry (one year of high school chemistry or one semester of | |
| | college chemistry) (*) | |
| | ENG 100 | |
| | HDFS/FAMR 230 MATH 100 or higher | |
| | MICR 130 | |
| | PSY 100 or ANTH 200 | |
| | PHYL/ZOOL 141-141L (or ZOOL 240) | |
| | PHYL/ZOOL 142-142L (or ZOOL 241) | |
| | (*) If you are using your high school chemistry to fulfill the | |
| | chemistry requirement, please include a copy of your high school | |
| | transcript with your enrollment form. Or have your high school transcript | |
| | sent from your high school to Kapi'olani CC Nursing Department (at | |
| | 4303 Diamond Head Road, Honolulu, HI 96816) before the start of the | |
| | course. Please indicate the name of your high school: | |
| | Attach your highlighted STAR Academic Transcript | By target completion date |
| □ з | to this form. | referenced in Step 1. |
| | to this form. | referenced in Step 1. |
| | The same and the second and add the University of Henry ii | |
| | If you are using courses outside of the University of Hawaii System (and the courses are not included in your STAR Academic | |
| | Transcript), please attach a student copy of your previous school's | |
| | academic transcript, ultimately highlighting the prerequisite courses in | |
| | yellow on your transcript. | |
| | Attach a copy of your Practical Nursing License as | By target completion date |
| │ | issued by the State of Hawai'i Board of Nursing. | referenced in Step 1. |
| | issued by the state of Hawai i Board of Harolingi | Terereneed in Step 1. |
| | | |
| | Please list the college/program you completed the | List the Month/Year of |
| □ 5 | | |
| - | Practical nursing training: | PN program completion: |
| | | |
| | | |
| | (Name of college/program) (City, State) | (mm/yyyy) |
| | Complete University of Hawai'i System Application | By August 1 |
| | Form (UHSAF): If you are not currently enrolled within a | (for enrollment in Fall term) |
| | UH System campus or if your last date of attendance | |

| - | | |
|-----|--|--|
| | within a UH System campus was over a year prior to your | •By December 15 (for enrollment in Spring term) |
| | intended semester of enrollment, you must complete the online UHSAF. | (for enrollment in Spring term) |
| | https://www.kapiolani.hawaii.edu/admissions/?a=1 | ●By June 15 |
| | | (for enrollment in Summer term) |
| | Application Advisory: When completing (online) UHSAF, | |
| | indicate major as "LBART" or "UNCLS." | Du taurat appellation data |
| 7 | Submit NURS 212 Enrollment Request Form and all other required documents to the Kapi'olani CC | By target completion date referenced in Step 1. |
| | Nursing Department: | referenced in Step 1. |
| | | |
| | a. Mail to: Kapiolani Community College Nursing Department | |
| | 4303 Diamond Head Road | |
| | Honolulu, HI 96816 | For Office Use Only |
| | | Date Received: |
| | b. Email through UH File Drop: Go to the UH File Drop site, https://www.hawaii.edu/filedrop/ . Log in using your | |
| | full name and email address or UH account info. Upload | |
| | your documents, allow for " 14-days " to download and | |
| | send to kapnurs@hawaii.edu. | |
| | c. Hand deliver to: Kapi'olani CC Nursing Department | |
| | Counselor, Kōpiko Building, Room 201. Nursing | |
| | Department office hours: Monday to Friday, 8:00 a.m. to | |
| | 4:00 p.m. excluding state holidays. | AG 1: 11 11: 6 AU 10:0 |
| □ 8 | Obtain registration override from Kapi'olani CC Nursing Department Counselor in order to register | After eligibility for NURS 212 course confirmed. |
| | for the NURS 212 course. | 212 course commined. |
| | | |
| | Upon receipt of the NURS 212 Enrollment Request Form, | |
| | the Nursing Department Counselor will review your eligibility to register for the NURS 212 course. | |
| | angisme, to register for the Horto 212 course. | |
| | If deemed eligible, the Nursing Department Counselor will | |
| | enter the registration override into your Banner student | |
| | record and will contact you by email to confirm your eligibility to register for the NURS 212 course. | |
| | chighenity to register for the NONS 212 course. | |

For More Information: Contact the Kapi'olani CC Nursing Department at (808) 734-9305 or kapnurs@hawaii.edu.