PEARL RIVER COMMUNITY COLLEGE
PRACTICAL NURSING FULL-TIME PROGRAM
APPLICATION DEADLINE: MARCH 1

We are pleased that you have shown an interest in the practical nursing program at Pearl River Community College (PRCC). The practical nursing full time program takes three semesters to complete. The program is offered at the Poplarville Campus located in Poplarville, MS and at the Forrest County Center located in Hattiesburg, MS. PRCC has one starting date per year for practical nursing and it is in the fall semester. The deadline for submitting an application is March 1 for the class which will start each August. The PRCC practical nursing program is accredited by the “Mississippi Community College Board”. (MCCB)

DEFINITION OF PRACTICAL NURSING

The practical nursing faculty supports the description of the practical nurse from the Mississippi State Board of Nursing cited in the Mississippi Nursing Practice Law, 2010.

“The practice of nursing by a licensed practical nurse means the performance for compensation of services requiring basic knowledge of the biological, physical, behavioral, psychological and sociological sciences and of nursing procedures which do not require the substantial skill, judgment, and knowledge required of a registered nurse. These services are performed under the direction of a registered nurse of a licensed physician or licensed dentist and utilize standardized procedures in the observation and care of the injured and infirm; in the maintenance of health; in action to safeguard life and health; and in the administration of medication and treatments prescribed by any physician or licensed dentist authorized by state law to prescribe.”

ELIGIBILITY REQUIREMENTS

1. Submit an acceptable ACT score. An acceptable ACT score is a composite of 16 with a 14 in mathematics and a 14 in reading. All practical nursing applicants must have an ACT on file with PRCC.

2. Submit an official high school transcript from an accredited high school indicating date of graduation or official GED report indicating “passing”.

Revised 07/2017
FOR THOSE ELIGIBLE, THIS IS HOW TO APPLY

1. Complete an application to Pearl River Community College
   [http://www.prcc.edu/admissions](http://www.prcc.edu/admissions) and an application for the practical nursing program (in this packet). The practical nursing program application is included in this packet. Please update your Pearl River Community College application if you are currently a PRCC student. If you have been a previous student at Pearl River Community College and it has been more than one semester since you have attended, you will have to fill out another PRCC application for admissions.

2. Submit an official high school transcript/ High School Diploma with date of graduation or GED report indicating a passing score/Passed. Please note: An official high school transcript is required to verify Allied Health Classes to receive points in this category. Please note: An official GED score form is required to obtain points in the GED category toward entry into the PN Program.

3. Submit official transcript(s) from every college attended. If PRCC does not have your official transcripts on file, you must obtain them and submit them with your application.

4. If you are currently working in the healthcare field, submit the “Verification of Employment Form” with the proper signatures and contact information. The form is included in this packet.

5. If you are currently a Certified Nursing Assistant, please include a copy of your state certification.

6. Please review #5 under the **Selected Applicant** section of this packet.

7. **Submit all application materials to Frank Henry, Practical Nursing Administrative Assistant.** All applications and materials must be an original, hard copy. You may hand deliver or mail your application to:

   Mr. Frank Henry, Administrative Assistant for Practical Nursing
   Practical Nursing Department
   5448 US Highway 49 South
   Hattiesburg, MS 39401

   Mr. Henry is located at the Forrest County Center office in Building 5 Hattiesburg, MS or on the Poplarville Campus Nursing Building office in the administrative suite.

   For assistance you may contact:

   Mr. Frank Henry, Administrative Assistant for Practical Nursing
Phone: 601-403-1827
Email: fhenry@prcc.edu

Or contact:

Ms. Linda Griffis RN, Lead Instructor Poplarville Campus
Phone: 601-403-1046
Email: lgriffis@prcc.edu

You may also contact:

Dr. Melissa Bryant, District Wide Practical Nursing Department Chair
Phone: 601-554-4697 or 601-403-1254
Email: mbryant@prcc.edu

HOW SELECTION IS MADE TO THE PRACTICAL NURSING PROGRAM

Applicants will be ranked and selected by a point scale system. Each applicant’s total points are calculated and applicants are ranked based on “highest to lowest” total point score as of March 1. Following score, priority will be given to (1) in-district candidates, (2) out-of-district candidates, and (3) out-of-state candidates.

Below is an overview of how the point scale works.

<table>
<thead>
<tr>
<th>ACT Prior to 10/1/1988</th>
<th>Enhanced ACT Score</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>25 or higher</td>
<td>27 or higher</td>
<td>10</td>
</tr>
<tr>
<td>23-24</td>
<td>25-26</td>
<td>8</td>
</tr>
<tr>
<td>20-22</td>
<td>23-24</td>
<td>6</td>
</tr>
<tr>
<td>17-19</td>
<td>20-22</td>
<td>4</td>
</tr>
<tr>
<td>15-16</td>
<td>18-19</td>
<td>2</td>
</tr>
<tr>
<td>13-14</td>
<td>16-17</td>
<td>1</td>
</tr>
</tbody>
</table>

Ranking of college GPA based on a minimum of 12 semester hours applicable towards a degree or a four year cumulative high school GPA IF no college courses have been acquired.

<table>
<thead>
<tr>
<th>G.P.A. Range</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.8 – 4.0</td>
<td>10</td>
</tr>
<tr>
<td>3.5 – 3.7</td>
<td>8</td>
</tr>
<tr>
<td>3.2 – 3.4</td>
<td>6</td>
</tr>
<tr>
<td>2.9 – 3.1</td>
<td>4</td>
</tr>
</tbody>
</table>

Revised 07/2017
Ranking of assigned points for applicants with a GED and no college GPA:

<table>
<thead>
<tr>
<th>Score Range</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>190-200</td>
<td>10</td>
</tr>
<tr>
<td>180-189</td>
<td>8</td>
</tr>
<tr>
<td>170-179</td>
<td>6</td>
</tr>
<tr>
<td>160-169</td>
<td>4</td>
</tr>
<tr>
<td>150-159</td>
<td>2</td>
</tr>
<tr>
<td>145-150</td>
<td>1</td>
</tr>
</tbody>
</table>

High school Allied Health classes Points Awarded

<table>
<thead>
<tr>
<th>Two years completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two years completed</td>
</tr>
<tr>
<td>One year completed</td>
</tr>
</tbody>
</table>

Verifiable Health Care Employment (1 year) Points Awarded

<table>
<thead>
<tr>
<th>Form must be complete (1 year or longer)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form must be completed (Less than 1 year)</td>
</tr>
</tbody>
</table>

State Certification in Certified Nursing Assistant Points Awarded

<table>
<thead>
<tr>
<th>Points Awarded</th>
</tr>
</thead>
</table>

Paul River practical nursing program does not require prerequisites, however, if a student has completed any of the following courses with a final grade of “A” or “B”, points will be awarded (see application ‘point scale system’ above):

- Principles of A & P I and II lecture and labs
  BIO 1511, BIO 1513, BIO 1514, BIO 1521, BIO 1523 BIO 1524
- Anatomy and Physiology I & II lecture and labs BIO 2511, BIO 2513, BIO 2514, BIO 2521, BIO 2523, BIO 2524
- Human Growth & Development EPY 2533 or Nutrition FCS 1253
- Medical Terminology I HIT1213 or Medical Office Terminology I & II BOT 1613 and BOT1623
*Courses completed prior to March 1 of the application year will be considered for awarding of points.

**Point Scale for Selected College Courses**

<table>
<thead>
<tr>
<th>Points Awarded</th>
<th>2 points per hour for an A</th>
<th>1 point per hour for B</th>
</tr>
</thead>
</table>

**Example**

- Official transcript grade of an A in a one hour course: 2 points
- Official transcript grade of a B in a one hour course: 1 point
- Official transcript grade of an A in a three hour course: 6 points
- Official transcript grade of a B in a three hour course: 3 points
- Official transcript grade of an A in a four hour course: 8 points
- Official transcript grade of a B in a four hour course: 4 points

**Selected Applicant**

For those applicants **selected** for admission as determined by this point system (highest point accumulation to lowest):

1. A mandatory information session will be conducted for those selected for admission. The information session(s) will be held on each campus. Date(s): to be announced.

2. A physical is required. The physical is to confirm that the applicant is in good health and possesses the required physical abilities to function satisfactorily within the program and the occupation. TB screening is required as part of the physical exam. The results must render a negative TB result or treatment protocol completed.

3. Drug screening will be required from a specific lab; Health Works located at 5909 US Hwy 49, Hattiesburg, and must render a negative result in order to continue. Applicants are given specific time frames for obtaining their drug screen.

4. Obtain “Form #121, Certificate of Immunization Compliance” from the Mississippi State Department of Health. Immunizations required to perform the clinical portion of courses in the PN Program are: Hepatitis A, Hepatitis B, Diphtheria, MMR (2), Tetanus, and Varicella.

5. Applicants must submit fingerprints for a criminal background check in accordance with section 43-11-13 of the Mississippi Code of 1972. The criminal background check process is necessary for the practical nursing student to enter the healthcare facilities to complete the required clinical experience.

If fingerprinting or criminal history records checks disclose a felony conviction, guilty plea or plea of nolo contendere to (a) felony possession or sale of drugs, (b) murder, (c) manslaughter, (d) armed robbery, (e) rape, (f) sexual battery, (g) sex offense listed in Section 45-33-23(h), (h) child abuse, (i) arson, (j) grand larceny, (k) burglary, (l) gratification of lust and/or (m) aggravated assault, and/or (n) battery of a vulnerable
adult that has not been reversed on appeal or for which a pardon has not been granted, the student shall not be eligible to participate in the health care vocational technical education (CTE) program of study (the PN Program). If the applicant has been accepted when these results are revealed the student will forfeit their seat.

Fingerprinting for Criminal Background Check must be done and results approved by the Mississippi Board of Nursing (MSBN) prior to licensure. The MSBN Criminal background Check requires you pay a separate fee directly to the MSBN.

6. CPR-C (Health Care Provider certification) is required. This certification may be the American Heart Association, American Red Cross, or other acceptable agencies. This certification is required prior to any clinical activity and must not expire prior to graduation from the practical nursing program.

7. Applicants are selected by the point system indicated in this packet (highest to lowest). Priority in tie point instances will be given to (1) in-district candidates, (2) out-of-district candidates, and (3) out-of-state candidates.

8. Qualified alternates will be placed on a waiting list and may be selected to fill any vacancies that occur prior to the end of late registration for the current year.


CRITICAL ELEMENTS

As a student seeking admission to the practical nursing program, we would like to make you aware of some of the critical elements for performance in the practical nursing program:

- Stand for prolonged periods, up to eighty percent of clinical time (6-8 hours)
- Walk, bend, stoop, kneel, squat, push, pull, lift, and reach overhead
- Possess sufficient gross and fine motor coordination to perform nursing procedures
- See, talk, and hear with sufficient acuity to perform client care
- Tolerate exposure to disinfectants, soap, cleansers, plastic and other materials used in protective equipment and for procedures
- Students are expected to travel as needed for clinical, convention, or lectures and learning opportunities off the campus and overnight
- All students must complete each course with a grade of 80 percent or better in order to progress to the next semester

REQUIREMENT FOR LICENSURE

Upon graduation, the practical nursing student will receive a “Certificate of Proficiency” and may be eligible to apply for the National Council Licensure Exam (NCLEX) for practical nurses. Licensing of practical nursing is regulated by the Mississippi Board of Nursing (MSBON). The MBON requires a separate fingerprinting and background check conducted by their criminal
investigations department prior to graduation. This will be the second Criminal Background check you will have completed while in the program. You will be charged a fee for this service by the Mississippi Board of Nursing. Conviction of a misdemeanor or felony offense may be a “disqualifying event” grounds for refusal by the board to issue a license. This will be scheduled during the third semester of the program.

CREDIT FOR PREVIOUS LEARNING

Credit for the PNV 1213 Body Structure and Function course will be awarded if the student has:

1. Passed a college level Anatomy and Physiology course with a minimum grade of “B”.
2. Notifies the practical nursing faculty to schedule a “Pre-Test Exam” for PNV 1213.
3. Passes the “Pre-Test Exam” with a score of 80% or better.

GRADUATION REQUIREMENTS

1. Complete all practical nursing courses, including clinical components, with a minimum grade of “80” percent
2. Complete the program in three semesters
3. Meet all other PRCC class and graduation requirements
4. Apply for graduation at www.prcc.edu

PRACTICAL NURSING CURRICULUM

<table>
<thead>
<tr>
<th>Semester I</th>
<th>Hours Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Body Structure and Function PNV 1213</td>
<td>3</td>
</tr>
<tr>
<td>Nursing Fundamentals and Clinical PNV 1443</td>
<td>13</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>16 semester hours</strong></td>
</tr>
</tbody>
</table>

The student will attend, class/lab/clinical, a total of 375 clock hours fall semester.

<table>
<thead>
<tr>
<th>Semester II</th>
<th>Hours Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Health Nursing Concepts &amp; Clinical PNV 1682</td>
<td>12</td>
</tr>
<tr>
<td>IV Therapy &amp; Pharmacology PNV 1524</td>
<td>4</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>16 semester hours</strong></td>
</tr>
</tbody>
</table>

The student will attend, class/lab/clinical, a total of 375 clock hours spring semester.

<table>
<thead>
<tr>
<th>Semester III</th>
<th>Hours Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialty Areas in Nursing PNV 1728</td>
<td>8</td>
</tr>
<tr>
<td>Nursing Transitions PNV 1914</td>
<td>4</td>
</tr>
</tbody>
</table>

Revised 07/2017
Totals 12 semester hours
The student will attend, class/clinical, a total of 230 clock hours summer semester
Program:
Total clock hours = 980
Semester hours = 44

DISABILITIES STATEMENT
If you have a disability that qualifies under the Americans with Disabilities Act and you require
special assistance or accommodations, you should contact the designated coordinator for your
campus for information on appropriate guidelines and procedures: Poplarville Campus, Tonia
Moody at 601-403-1060 or tmoody@prcc.edu; Forrest County Center, Beth Strahan at 601-554-
5530 or bstrahan@prcc.edu; Hancock Center, Raymunda Barnes at 228-252-7000 or
rbarnes@prcc.edu. Distance Learning Students who require special assistance, accommodations,
and/or need for alternate format should contact Tonia Moody at tmoody@prcc.edu.

NON-DISCRIMINATION POLICY
Pearl River Community College offers equal education and employment opportunities. The
College does not discriminate on the basis of race, religion, color, sex, age, national origin,
veteran status, or disability. For inquiries regarding the non-discrimination policies or to request
accommodations, special assistance, or alternate format publication please contact Tonia Moody,
Director of Admissions and Records, ADA/Civil Rights, and Title IX Coordinator, at P.O. Box
5537, Poplarville, MS 39470 or 601-403-1060

Revised 08/10/16
Application Packet Checklist: (This is to ensure that you have completed the whole application process.) Please initial below and the PN Administrative Assistant will initial each item you submit. It is the applicant’s responsibility to make certain all information is received by the PN Department by March 1 at 3pm.

<table>
<thead>
<tr>
<th>Applicant (Initial)</th>
<th>PN Received (Initial)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>______</td>
<td>______</td>
</tr>
</tbody>
</table>

You have gone to [www.prcc.edu](http://www.prcc.edu) and filled out or updated an application to Pearl River Community College.

|                     |                       |
| ______              | ______                |

You have included your High School transcript/ Diploma or GED or you have verified that PRCC has this information on file.

|                     |                       |
| ______              | ______                |

You have included copies of your transcripts from each college/university attended or verified that PRCC has this on file.

|                     |                       |
| ______              | ______                |

You have included a copy of your most recent ACT score or verified that PRCC has this information on file. (If you took the ACT in the same year you are applying you must include a copy of this score.)

Student Comments:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

PRCC PN Department Verification Comments and follow up:
____________________________________________________________________________
____________________________________________________________________________

Revised 07/2017
APPLICATION DUE MARCH 1, FOR AUGUST START DATE

DEPARTMENTAL APPLICATION FOR ADMISSION
PRACTICAL NURSING PROGRAM

Campus you wish to attend?
- Poplarville
- FCC (Hattiesburg)
- Either (But prefer _______ Campus)

Date of Application: ___________________________ Date of Birth: ________________

Name: ____________________________________________
Last                First               MI                Maiden

Address: ___________________________________________
Street or P. O. Box          City               ST.               Zip

Phone Number(s): ___________________________ or ___________________________

Email address: ________________________________ (This is our contact information)

Are you presently a high school student? _________ If so, when do you expect to graduate? _________

Have you taken the ACT? _______ yes _______ no. If so, what is your composite score? _________

Have you attended ANY CAMPUS of PRCC before? _______yes _______ no

In addition to this application for Practical Nursing, have you applied for admission to any other nursing?

Or allied health program? If so, which program? ___________________________________________

Have you ever been convicted of a misdemeanor or a felony? _______yes _______ no
If so, please list: ___________________________________________
Date: ___________________________ Conviction: ___________________________

Revised 07/2017
I agree that this application is true to the best of my knowledge and that deliberate falsification of information will result in denial of admission to the Practical Nursing program at Pearl River Community College. I am aware of and agree to submitting fingerprints for Criminal Background Checks. Materials submitted for the application process will be securely disposed of, after the class has been selected.

Applicant’s Signature: ___________________________ Date: __________

VERIFICATION FOR HEALTH CARE EMPLOYMENT FORM
PEARL RIVER COMMUNITY COLLEGE
PRACTICAL NURSING PROGRAM

Instructions: Applicant to Practical Nursing program should have employer fill out verifying medical (medical related) work experience.

Applicant: ____________________________________________________________

Facility: _____________________________________________________________

Facility Address: _______________________________________________________

Length of employment: ________________________________________________

Position: ______________________________________________________________

Brief description of duties: ______________________________________________

______________________________________________________________________

Supervisor Name: _______________________________________________________

Signature of Supervisor: __________________________ Date: __________

Contact information: __________________________________________________
Signature of applicant: __________________________
Date: __________