

Program Completion Guide

DIPLOMA - PRACTICAL NURSING (D45660)

Student Name:			ID #:	Date of E	nrollment:		
Advisor Name:	Contact Information:						
Criminal background checks and/or do course. Failure to meet clinical agency student will not be allowed to progress	requi	rements will resul					
Note: Developmental coursev information.	vork r	may be require	ed. Please refer to th	e Developmental E	Education Guid	le for additiona	
Practical Nursing Diploma (D4566	50) Co	urse Requireme	ents 44 credit hours:				
Courses	Cr.	Recommende Semester		Corequisites	Semester Registered/ Planned	Semester Completed/ Grade	
ACA 122 College Transfer Success (Course <u>not required</u> but recommended)	1	1 st year – fall	None	None			
BIO 165 Anatomy & Physiology I*	4	1 st year – fall	MAT 003 Tier 2 or BSP 4003 Tier 2, ENG 002 or BSP 4002 or ENG 111	None			
NUR 101 Practical Nursing I*	11	1 st year – fall	Admission to Practical Nursing program	BIO 165			
PSY 150 General Psychology	3	1 st year – fall	ENG 002 or BSP 4002 or ENG 111	None			
BIO 166 Anatomy & Physiology II*	4	1 st year – spring	BIO 165	None			
ENG 111 Writing and Inquiry	3	1st year – spring		ACA 122, ENG 011			
NUR 102 Practical Nursing II*	10	1st year – spring		BIO 166			
NUR 103 Practical Nursing III*	9	1 st year – summ	ner NUR 102	None			
NOTES: Must obtain a grade of "C" or be a *NUR and BIO courses must ha See course catalog for Prerequivalents please read the following and sit I understand that as an RCC student, I am time. Complete all curriculum course curriculum. Follow the established courses	ve a graisite/Co gn belo ultimate s with a	nde of 80 or better to requisite requirements. It is a grade of "C" or better to the control of	o progress. ents. my schedule. I understand th eter; obtain a grade of 80 or complete all courses.	at I must do the following	or it may affect my	ability to graduate or	
 Maintain a 2.0 GPA to progress My advisor has information regarding other understand that if I would like more information 	er colleg	ges and transfer opp	portunities that I can investig	gate after completing my c	legree/diploma/ceri	tificate and I	
Student Name:			Student Signature:		Date: _	Date:	
			Advisor Signature:				
Student Name:			Student Signature:				
Advisor Name:			Advisor Signature:		Date:	Date:	

Academic Year: 2022-2023 Revised 6/28/2022

_____ Advisor Signature: ______ Date: _____

Student Name: _____ Student Signature: _____ Date: _____

Advisor Name: _____