JEFFERSON COMMUNITY COLLEGE  
NURSING A.A.S.  
SUPPLEMENTAL APPLICATION

An applicant seeking admission into the Jefferson Community College Nursing A.A.S. program must complete the Nursing A.A.S. Supplemental Application. Please refer to the college’s website, www.sunyjefferson.edu, or the online college catalog for complete information concerning nursing program pre-requisites, and/or transfer credit, readmission policies, or contact JCC Enrollment Services at 315-786-2437.

NURSING A.A.S. SUPPLEMENTAL APPLICATION REQUIREMENTS

Please Note: The following are required for the Nursing A.A.S. Supplemental Application to be complete and eligible for review. Incomplete applications will be considered ineligible for review.

1. **MUST be at least 18 years of age** by the first clinical day (see attached application).
2. Complete the Nursing A.A.S. Supplemental Application.
3. Attach a letter of intent with the Nursing A.A.S. Supplemental Application. Guidelines for the letter of intent are included with the application packet.
4. Submit to the Nursing Department (Gregor Building, Rm. 5-211), by the deadline date.
   Email – nursing@sunyjefferson.edu; Fax – 315-786-2381; regular mail; personal delivery, are all acceptable modes for application submission.

The Nursing Admissions Committee will notify all applicants, in writing, of application decisions.

FIRST TIME APPLICANTS

Prior to the initial review for admission into the JCC Nursing A.A.S. program, the applicant must (1) submit a completed SUNY Jefferson free application, available on the JCC website www.sunyjefferson.edu. (2) provide a high school transcript or a copy of your GED report with diploma, and college transcripts. Please forward official transcripts directly to Jefferson Community College Enrollment Services.

If placement testing is requested, this can be completed prior to class registration in an effort to assist with proper class placement. Please visit www.sunyjefferson.edu/testingreg to schedule an appointment online. If you live 50 miles or more from Jefferson and would like to complete your placement test at a location closer to you, please send an email to thetestingcenter@sunyjefferson.edu or call 315-755-0300. The applicant may be exempt from the testing requirement if Enrollment Services is provided evidence of successful completion of a college math and/or English class or College Board scores.

Applications for admission to the program will not be considered until all official transcripts and documentation are on file. Unofficial transcripts are not evaluated for transfer credits.

READMISSION TO THE NURSING A.A.S. PROGRAM

Students applying for readmission to the program must meet all requirements as if entering the program. The student must submit a Jefferson Community College A.A.S. Supplemental Application, a letter describing what they will do or have done to be successful in this attempt, a recommendation letter from a faculty member, and have a minimum GPA of 2.0.

Applications may be submitted to the Nursing Department by mail; emailed to nursing@sunyjefferson.edu; faxed to 315-786-2381, or personal delivery.

Revised 8/19
GUIDELINES FOR APPLICATION LETTER OF INTENT

- Background information
  - Education
  - Work history
  - Any medical/allied health work experiences

- Statement of “Why do you want to become a nurse?”

- How do you plan to manage your time related to family/ work demands and the Nursing Program workload demands?

- Describe your support system. Do you have back-up plans for child care, transportation, family concerns?

- What are your future plans related to area of interest in Nursing and obtaining your Bachelor’s Degree in Nursing in 10 years?
JEFFERSON COMMUNITY COLLEGE
NURSING A.A.S.
SUPPLEMENTAL APPLICATION

JCC ID#: ____________________

First name: ____________________________ Middle initial: ____ Last name: ____________________________

Address: __________________________________________________________
                   (Street)                   (City)                   (State)                   (Zip code)

Contact number: ________________________________

1. Please indicate the nursing program option for which you would like to be considered. If you are applying for both options, submit a separate application for each option. (You may use your letter of intent for both-attach to both applications).
   ______ Traditional option (Fall start – August) Application deadline: January 30th
   ______ Weekend option (Spring start – January) Application deadline: October 1st

2. Are you currently enrolled at Jefferson Community College? ____ Yes ____ No

3. Are you a new student? (i.e. 1st time taking classes in a degree program at JCC) ____ Yes ____ No
   (If you answers “YES”, you must submit a college application and all required documentation to Student Enrollment Services.)

4. Are you a returning student? ____ Yes ____ No
   (i.e. A student who previously enrolled in a degree program at JCC, took some time off and are now returning)

   **If you answered “Yes,” are you applying for readmission to the Nursing program? ____ Yes ____ No

   **If “Yes,” which course? NUR _______

5. Are you a Licensed Practical Nurse (LPN)? ____ Yes ____ No

6. Are you currently working as a CNA or LPN? ____ Yes ____ No

7. Will you be at least 18 years of age by the first clinical day?
   (Traditional – October 1st) (Weekend – January 1st) ____ Yes ____ No

In order to be considered for admission into the Nursing A.A.S. program at Jefferson Community College, first-time applicants must have met all requirements, submit both this completed supplemental application and letter of intent.

Students applying for readmission to the program must meet all requirements as if entering the program. The student must submit a Jefferson Community College A.A.S. Supplemental Application, a letter describing what they will do or have done to be successful in this attempt, a recommendation letter from a faculty member, and have a minimum GPA of 2.0.

If it has been longer than four years since attending the program, applicants must apply to the program as a new applicant and have the GPA required for a new applicant (2.5).

Signature____________________________________________________ Date________________________