



## Nursing

College of the Siskiyou, 2001 Campus Drive, Yreka, CA 96097

Phone: (530) 841-5929 - Fax: (530) 841-5214 – Email: [nursing@siskiyous.edu](mailto:nursing@siskiyous.edu)

# Licensed Vocational Nursing Program Application Packet

June 2, 2025 - May 2026

## Vocational Nursing Pre-Admission Procedures

The application period will begin March 3, 2025 and continue through March 21, 2025. **Applications postmarked before March 3 or after March 21, 2025 will not be accepted.**

Application Process:

1. Read complete Application.
2. Student applies to attend COS and receives an “S” number.
3. Complete the nursing pre-admission checklist and application (include all items on checklist).
4. This is a fillable form that needs to be printed and signed on multiple pages.
5. **Mail** completed application, including official transcripts from all colleges attended, and unofficial transcripts from College of the Siskiyou, to the Nursing Office.
6. Hand delivered applications will **not** be accepted.

**NOTE:** Special accommodations are available for any phase of the application or testing process for individuals with disabilities. Contact the Student Access Services office at (530) 938-5297, or email [sas@siskiyous.edu](mailto:sas@siskiyous.edu)

## Application Instructions

Thank you for your interest in the 2025-26 Vocational Nursing program. You are applying for the cohort that will begin in June 2025.

The vocational nursing program at College of the Siskiyou is approved to accept 30 students. Students who meet admission criteria will be admitted in the order applications are received (1<sup>st</sup> come, 1<sup>st</sup> served), contingent upon submission of a **complete** application packet. The application period will begin March 3, 2025 and continue through March 21, 2025. Applicants must have completed **all** prerequisites in order to apply.

Completed applications must be received in the Nursing Program office, 2001 Campus Drive, Yreka, CA 96097, no later than March 31, 2025 with a post-marked date no later than March 21, 2025. It is the applicant's responsibility to verify that application materials have been received and are complete. To confirm receipt of a completed packet, email the Yreka Nursing Office at [nursing@siskiyous.edu](mailto:nursing@siskiyous.edu)

Incomplete application packets will **not** be evaluated for admission.

**Official transcripts from all colleges attended must be included in packet. Transcripts from only COS can be printed copies.**

Applicants will be notified of acceptance by email. If the applicant does not accept placement into the current program, the applicant must re-apply for a subsequent program. Applicants who accept the position and later withdraw their name from the list are also required to reapply for a subsequent class.

We are pleased you are considering College of the Siskiyous Nursing Program and wish you the best,



Hallie Coppi, PhD, RN  
Dean of Health Sciences and Director of Nursing

## General Information

The Vocational Nursing Program is a 1 year course. Classroom instruction is offered concurrently with clinical experience. The curriculum has been organized under the standards mandated by the State of California Board of Vocational Nursing and Psychiatric Technicians.

It is the **applicant's responsibility** to review and understand all program requirements. Visit our [Vocational Nursing webpage](#).

The Vocational Nursing curriculum is designed to prepare students to participate in the National Council Licensure Examination. Upon successful completion of the examination, the student becomes a Licensed Vocational Nurse (LVN). A Certificate of Completion is granted, and with additional coursework, an Associate of Science Degree may be obtained.

## Background Clearance & Drug Screening

CastleBranch background check and drug screen clearances are required prior to final acceptance into the Vocational Nursing Program (information will be provided). If you have questions regarding your background clearance, please contact the Nursing Program Director. Students accepted into the nursing program are required to disclose "any crime" incurred prior to the program start date **through** program graduation. Such offenses may be grounds for immediate dismissal. Students must meet standards of all clinical facilities utilized by the program in order to qualify for the program. The student must discuss any potential issue with the Director of the Nursing Program. Failure to disclose will result in immediate dismissal.

Disqualifying Penal code information is available through the BVNPT at (916) 263-7800 or through their [website](#).

NOTE: An additional background check is now a requirement during the licensure application process.

## Requirements for Admission

Current CNA License (include copy of license) **or** must have worked in a health care facility and/or employed with **direct** patient care of 200+ hours within the last 3 years. If verifying by hours, you must have a signed letter from an employer to verify direct patient care hours. (Receptionist, Registration, Scribe etc., do not meet criteria.)

**For this application ONLY:** Students who are currently enrolled in a Certified Nursing Assistant course are eligible to apply for this program/application.

## Prerequisites for Admission

To be considered for admission the LVN program, you must meet the following minimum qualifications:

- GPA of 2.5
- Completion of Human Anatomy (BIO 2700) or approved course, with a grade of "C" or higher
- Completion of Nutrition (KINE 1011) or approved course, with a grade of "C" or higher
- Completion of Medical Terminology (NURS 1045) or approved course, with a grade of "C" or higher
- Completion of Statistics (MATH 1050) or approved course, or a higher-level math course with a "C" or higher, or qualification through assessment.
- Completion of English (ENGL 1001) or approved course, with a "C" or higher or qualification by assessment.
- Seventeen years of age or older by the time of licensure (additional requirements apply for students under eighteen years of age)
- All prerequisites must be complete with final grades posted on your transcripts.
- Official transcripts showing high school graduate, GED or equivalent
- Official college transcripts from all schools attended (We will accept copies of COS transcripts)

## Additional Requirements

- Ability to provide own transportation to clinical area.

- Satisfactory physical health verification, verification of all required immunizations and titers –must stay current through program. The health requirements include the following:
  - A medical examination
  - Immunizations
  - American Heart Association Health Care Provider CPR card
  - All students must complete a background clearance and drug screening.

**Approximate Costs (actual costs will vary)**

| <b>Item</b>   | <b>Cost</b>      |
|---|------------------|
| Tuition * (approximately \$767 per semester)                | \$ 2,300         |
| Student Fees  | \$ 96            |
| Materials Fee   | \$ 350           |
| Books   | \$ 1,350         |
| CPR Certification   | \$ 75            |
| Tools ** (includes uniforms and equipment)                  | \$ 700           |
| Physical & Immunizations and/or Titers                      | \$ 375           |
| Assessment Testing  | \$ 350           |
| Exams, Licensure, Fingerprinting                            | \$ 870           |
| Pinning Ceremony  | Varies           |
| <b>Total Approximate Cost (three semesters LVN program)</b> | <b>\$ 6,466+</b> |

\* Tuition is based on the 2024/2025 rate, established by the California State Legislature. Out-of-state tuition is \$256 per unit.

\*\* This is only a cost estimation of what you will need for the LVN program. Prices and fees are subject to change.

**Financial Aid**

Financial aid is available for students in the form of Pell Grants, EOPS grants, and nursing scholarships. For more information regarding financial aid, contact the Financial Aid Office at (530) 938-5209.

**SAS special accommodations are available for any phase of the application or testing process for individuals with disabilities.** Contact SAS at (530) 938-5297 or email [sas@siskiyous.edu](mailto:sas@siskiyous.edu) for details. Support is available throughout the program.

**Resources**

- COS Nursing Office: (530) 841-5929 or [nursing@siskiyous.edu](mailto:nursing@siskiyous.edu)
- Financial Aid: (530) 938-5209
- Counseling Services: (530) 938-5353
- [Nursing website](#) for program requirements for the **Vocational Nursing Program**

## Eligibility for Credit for Previous Education or Experience

Credit may be given for related previous education or experience within the last five years. This includes the following courses:

- Accredited vocational or practical nursing courses.
- Accredited registered nursing courses.
- Accredited psychiatric technician courses.
- Armed services nursing courses.
- Other courses determined to be equivalent to courses in the VN program.

Competency-based credit may be granted for knowledge and/or skills acquired through experience. Credit shall be determined by written and/or practical examinations.

If requesting credit for previous education and/or experience, all relevant work experience/course information must be included with your application packet.

- Verification of work related experience
- Evidence of Course completion including:
  - Transcript verifying a “C” or higher
  - Official copy of course description from college attended

Once accepted into the program, make an appointment with the Vocational Nursing Director to discuss testing for competency and knowledge to determine eligibility for credit.

## LVN Application Check-off List

**Application packet must include the following** (Retain copies for your records):

- Data Form (pg. 7)
- LVN Drug Screening and Background Clearance Policy/Procedure (pg. 8)
- Application for Clinical Practice Form (pg. 9 and 10)
- Official transcripts from **all** colleges attended verifying completion of all prerequisites. COS transcripts can be a photocopy.
- Official high school diploma or transcripts, GED or High School Equivalency Diploma
- Eligibility for Credit for Previous Education or Experience Form (pg. 11)
- Signed, LVN Application Check-off List (this page)

**I agree to comply with all Vocational Nursing Program and Clinical Site requirements. I understand that non-compliance may result in removal from the Vocational Nursing Program.**

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

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

**Incomplete applications will be discarded.**

## Vocational Nursing Data Form

Full Name: \_\_\_\_\_

COS Student #: S \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## LVN Drug Screening and Background Clearance Policy/Procedure

The Joint Commission requires hospitals to have a process to ensure that a person's qualifications are consistent with his or her job responsibilities. As a result, hospitals are required to have the same standard for students as they would for their staff. To meet this requirement, all students who participate in clinical rotations must submit proof of their drug screening and background check prior to starting the Vocational Nursing Program.

Accepted students are provided information for obtaining their "CastleBranch" immunization tracker, background check and drug screening at Orientation, forms are also available in the Nursing Office.

The background check must be completed no later than 4 weeks prior to the start of class in order for the Nursing Office to receive results 2 weeks prior to the first day of class. **If this requirement is not completed within this timeframe, students may be dropped from the program.** Convictions will be addressed on an individual basis between the student and the Director of Nursing. Students accepted into the nursing program are required to disclose "any crime" incurred prior to the program start date through graduation of the LVN Nursing Program. Such offenses may be grounds for immediate dismissal. The student must discuss any potential issue with the Director of the Nursing Program. Failure to disclose will result in immediate dismissal. A student will be excluded from participation in clinical rotations and therefore unable to complete the College of the Siskiyous Nursing programs for the following background check/drug screen findings:

- Capitol felony conviction at any time in student's past.
- Felony elder abuse, child abuse, or sexual abuse conviction at any time in student's past.
- Felony conviction within the past 7 years
- Misdemeanor convictions within the past 3 years
- Medicare Fraud
- Any crime that results in requirement to register as a sex offender
- Positive Drug Screen

A fingerprinting and background check is required by the BVNPT before candidates are able to sit for licensure examination. A positive criminal history does not disqualify a candidate from taking the licensure examination. However, should the candidate pass the exam, issuance of licensure will be delayed pending the Board's investigation of the candidate's criminal history and a decision rendered relative to the candidate's eligibility for licensure.

**Anyone who has a criminal history may be denied licensure by the Board of Vocational Nurse and Psychiatric Technicians. This is confidential information declared to the BVNPT at the time of examination application.** Felony convictions that may jeopardize licensure include, but are not limited to: elder abuse, child abuse, sexual abuse, and possession of drugs for sale. **If you have specific questions or concerns contact the BVNPT at 916-263-7800.**

BVNPT screening is more rigorous and intensive than program screening. Licensure may be delayed or denied if there are legal issues.

**I have read and understand the drug screen and background check requirements for the LVN program.**

Full Name: \_\_\_\_\_

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



# Application for Clinical Practice

## Applicant Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Maiden: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Gender:  Male  Female

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## Person to Notify in Case of Emergency

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

## Criminal Public Record Check

Have you been convicted\* of any crime\*\* under your current name or any other name?

Yes  No

\* "Convicted" means plea, verdict of finding of no contest or guilt, regardless of whether sentence was imposed by the court.

\*\* "Any Crime" means misdemeanors or felonies including motor vehicle/driving violations excluding minor traffic infractions, conviction for marijuana more than two years ago, and convictions for which the records has been sealed, expunged, eradicated or judicially dismissed.

If the above answer is yes, please detail information for each conviction.

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Do you have a criminal case now pending?

Yes  No

Clinical assignments are in health facilities that allow you regular access to drug and medications. Have you ever been arrested for an offence involving controlled substances (CA Labor Code 432.7f, CA Health and Safety Code 11590)?

Yes  No

Clinical assignments are in health facilities that allow you regular access to patients. Have you ever been arrested for a sex offense for which registration as a sex offender would be required upon conviction (CA Labor Code 432.7f, Penal Code 290)?

Yes  No

Do you understand that a background check; reference verification; and drug screening is a part of the enrollment decision making process, and if you are invited to participate in the program that you consent to a complete background investigation?

Yes  No

Please schedule an appointment with the Director of Nursing if you have questions/concerns regarding the information in this document

Existence of convictions will not necessarily disqualify an applicant from enrollment. However, failure to fully disclose may be considered falsification, and will result in offer of enrollment being rescinded and is grounds for immediate termination upon discovery at any time during enrollment. Students accepted into the nursing program are required to disclose “any crime” incurred prior to the program start date through program graduation. Such offenses may be grounds for immediate dismissal. The student must discuss any potential issue with the Director of the Nursing Program. Failure to disclose will result in immediate dismissal. A student will be excluded from participation in clinical rotations and therefore unable to complete the College of the Siskiyous Nursing programs for the following background check/drug screen findings:

### Information Regarding Criminal History

| Date | Conviction | Court Name | City / County |
|------|------------|------------|---------------|
|      |            |            |               |
|      |            |            |               |
|      |            |            |               |
|      |            |            |               |
|      |            |            |               |
|      |            |            |               |

### Exclusion from Clinical Placement

In collaboration with the clinical agencies used by College of the Siskiyous, a student will be excluded from participation in clinical rotations and therefore unable to complete the College of the Siskiyous Nursing programs for the following background check/drug screen findings:

- Capitol felony conviction at any time in student’s past.
- Felony elder abuse, child abuse, or sexual abuse conviction at any time in student’s past.
- Felony conviction within the past 7 years
- Misdemeanor convictions within the past 3 years
- Medicare Fraud
- Any crime that results in requirement to register as a sex offender
- Positive Drug Screen

There are some specific restrictions imposed by the state for nursing students that require additional clearance, a criminal record may disqualify you from state licensure testing.

### Applicant Statement

I hereby certify that all statements made on this form are true and correct and I authorize investigation of all statements herein recorded. I release from liability persons and organizations reporting information required by this application. I understand that any misrepresent or falsification of material facts in this application may be cause for immediate disqualification and removal from program.

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

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

## Eligibility for Previous Education or Experience Credit

Credit may be given for related previous education completed within the last five years. This includes the following courses:

- Accredited vocational or practical nursing courses.
- Accredited registered nursing courses.
- Accredited psychiatric technician courses.
- Armed services nursing courses.
- Other courses determined to be equivalent to courses in the VN program.

Competency-based credit may be granted for knowledge and/or skills acquired through experience. Credit shall be determined by written and/or practical examinations.

If requesting credit for previous education and/or experience, all relevant work experience/course information must be included with your application packet.

- Verification of work related experience (letter from employer providing job description, dates of employment and position held)
- Evidence of Course completion including:
  - Transcript verifying a "C" grade or better
  - Official copy of course description from college attended

Once accepted into the program, make an appointment with the Vocational Nursing Director to discuss testing for competency and knowledge to determine eligibility for credit.

- I would like to receive competency-based credit for knowledge and/or skills acquired through experience within the past five years
- I would like to receive credit for previous education acquired within the past five years
- I am not eligible or choose not to apply for credit for previous education or experience

I have read the above information regarding requirements and procedure for requesting credit for previous education and/or experience. I understand the Vocational Nursing Director will determine if I meet the initial requirements for written and/or practical examination to receive credit.

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

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

**This signed form and required documentation must be submitted with your application packet.**