



Allan Hancock College Nursing Priority Registration

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| FOR OFFICE USE ONLY |
| Start _____ |
| End _____ |
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The purpose for Nursing Priority Registration allows a student to register early (2nd day registration) for pre-requisites needed to apply for the AHC nursing programs (Anatomy (BIO124), Physiology (BIO125) and Microbiology (BIO128)).

Eligibility Requirements:

- All transcripts need to be on file with Admissions and Records (Building A).
- Completion** of English 101, Math 331 and Psych 101 with a grade of "C" or better.
- Be in good standing with Allan Hancock College and not on academic or progress probation.
- SEP (Student Evaluation Plan) needs to be up-to-date and completed with Nursing as your major. You can obtain an SEP by meeting with a counselor.
- Complete and pass each credit course held in the semester prior (Fall/Spring) AND not have any withdraws from courses after the first week of the semester at Allan Hancock College.
- Complete and sign this form and submit it along with a copy of the completed SEP to the Health Sciences Department (M132).

In order to maintain eligibility:

- ✓ You must take a nursing pre-requisite (Anatomy, Physiology or Microbiology) science course each semester (Spring and Fall) and make satisfactory progress on your SEP (Student Education Plan).

You can lose priority registration by:

- Allowing your GPA to fall below a 2.00 in any semester
- Failing or withdrawing from any course listed on the SEP toward your nursing degree requirements.

Guidelines:

Nursing priority registration is good for two years (4 semesters, Fall/Spring) and/or when all science courses (Anatomy, Physiology, Microbiology) are completed (whichever is first). This benefit will only be issued one (1) time during your AHC college career. In some cases, you may be reinstated into nursing priority registration but you must be enrolled at AHC for two (2) semesters prior to being reinstated. You must pass each credit course held in both semesters, and must not have any withdraws from courses after the first week of each semester.

By signing this contract, you acknowledge that you are eligible for nursing priority registration and understand the commitment required to maintain it. You also understand that your registration status will be checked each semester for compliance. No notification will be sent if you are removed.

Print Name _____ AHC Student ID: _____

Email Address _____ Phone Number _____

Signature _____ Date _____