ASSOCIATE DEGREE HUMAN SERVICES
Health Science Program Application Packet Checklist
2024-25 Academic Year

ADMISSION INFORMATION: (Please print legibly.)

Name: _____ Student ID#: _____

Address: _____ City: _____ Zip: _____

Cell Phone: _____ Additional Phone: _____

Preferred email address: _____

> **NOTE:** verify completion of the following before submitting the **Admission Packet Checklist:**

- o Application to the college (completed online through CFNC for Nurse Aide Diploma D45970).
- o Health Science Program Interest Form completed online indicating Human Services Technology.
- o Official Transcripts: (List all schools attended. Attach additional pages if needed).

  ☐ High School/Equivalency Institution: _____

  ☐ College: _____   ☐ College: _____

  ☐ College: _____   ☐ College: _____

ADMISSION REQUIREMENTS: (Please check one box for English)

Academic Readiness in English:

- ENGLISH Equivalents (Check only one option that best meets the requirement):

☐ Placement Test completed (RISE, NCDAP or ACCUPLACER) within 10 years of starting semester with ENG-111 placement. Date taken: _____

☐ Completed ENG 011 or ENG 002 with grade of P, or equivalent

☐ Placement Waiver per high school GPA > 2.8, SAT, or ACT within 10 years of starting semester.

☐ Completed ENG-111 or equivalent. Equivalent Course: _____ College: _____

Other Requirements:

☐ I understand that some clinical sites require a criminal background check, which may include fingerprinting. Some clinical sites may also require drug screening, proof of immunizations, or TB Test.

I certify that the information provided by me on this form is true and accurate to the best of my knowledge and that I understand that I have read and understand the Admission's Requirements packet.

_____   _____

Student Signature   Date