

Division of Health Sciences • 101 Cunningham Blvd • Booneville, Mississippi 38829 Phone (662) 720-7236/ (800) 555-2154 Fax (662) 720-7215

Alternate Placement Practical Nursing Education

The Alternate Placement Practical Nursing Education option is available to assist individuals who were unsuccessful in their original program of study (NEMCC ADN) with career options, employment opportunities, and alternate pathways for achieving career goals.

Eligible students under consideration for the Alternate Placement Practical Nursing Education Program must apply, fulfill all program requirements, and be evaluated for acceptance to the program. The PNE Alternate Placement Application includes completed Medical Forms and verification of skills competencies. Students are only eligible for consideration within one year of leaving the A.D.N. program. Eligibility does not guarantee admission to the program. Available slots for admission may be limited; therefore, students should strongly consider their commitment to the program prior to accepting an admission slot. Eligible students will be admitted based on the Alternate Placement PNE rating scale.

In order to be considered for the Advanced Placement Practical Nursing Education, the student must:

- Submit application to the PNE Program. These applications may be obtained from Dr. Kristi Tooley, Program Director, Wright Hall Office # 203-B or Mrs. Kelly Marshall, Health Science Assistant, Office # 203-A or printed and turned in to one of the above
- Update the application(s) each semester up until one year after leaving A.D.N. program.
- Meet the PNE program requirements for admission.
- Have successfully completed NUR 1118 Nursing Fundamentals in the Associate Degree Nursing curriculum with a "C" or higher grade and must have successfully completed all skills check offs in NUR 1229. A copy of completed skills check-off, signed by ADN faculty will be required.
- Have a cumulative GPA of 2.0 at time of program application.
- Provide payment of transcription fees

Dr. Kristi Tooley
PNE Program Director
Wright Hall # 203-B
662-720-7288
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Mrs. Kelly Marshall
Health Science Office Assistant
Wright Hall Suite # 203-A
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Alternate Placement 1	Alternate Placement 2	Alternate Placement 3
Student completes NUR 1118 with	Student completes NUR 1118 and NUR	Student completes NUR 1118, NUR
passing grade and completes all skills	1229 with passing grade	1229, and NUR 2339 with passing
check offs in NUR 1229 successfully		grade
Entrance Option:	Entrance Option:	Entrance Option:
Enter PN Program Summer Semester	Enter PN Program Spring Semester	Enter PNV Program Summer Semester
Semester 1: Course of Study:	Semester 1 Course of Study:	Semester 1 Course of Study:
PNV 1728 and PNV 1524	PNV 1524 and PNV 1682	PNV 1524
Semester 2-Fall Course of Study:	Summer Semester: PNV 1914	Fall Semester PNV 1682 and PNV
PNV 1682 and PNV 1914	(45 hours theory and 45 hours	1914
Graduate in Fall	Preceptorship)	Graduate in Fall
	Graduate in Summer	
Must complete two semesters of the	Must complete one semester of the	Must complete one semester of the
PNV program	PNV program	PNV program
Upon entering the PNV program, the	Upon entering the PNV program, the	Upon entering the PNV program, the
student will:	student will:	student will:
Submit completed skills-check off	Complete the Psychiatric Nursing	Complete the Psychiatric Nursing
sheet from ADN, signed by ADN	Workshop covering Communication,	Workshop covering Communication,
faculty.	Mood Disorders, Personality Disorders,	Mood disorders, Personality Disorders,
	Schizophrenia, Substance Abuse and	Schizophrenia, Substance Abuse and
	Psych Pharmacology, Psychiatric	Psych Pharmacology, Psychiatric
	Mental Health HESI and Maternal-Peds	Mental Health HESI and Maternal-Peds
	HESIs.	HESIs.
Pay the Course Exempted	Pay the Courses Exempted	Pay the Courses Exempted
Transcription Fee – of \$50.00 –	Transcription Fees - \$50.00/course –	Transcription Fees - \$50.00/course –
before PNE classes start. (Will also	total: \$100.00 before PNE classes	total: \$100.00 before PNE classes
be charged regular tuition and fees	start. (Will also be charged regular	start. (Will also be charged regular
each semester).	tuition and fees for the semester).	tuition and fees for the semester).
Complete and Graduate	Complete and Graduate	Complete and Graduate

PRACTICAL NURSING EDUCATION – APPLICATION FOR ADMISSION						
Date: Date of	f Birth:		Student ID) #:		
Name:						
Last	First		Middle		Maiden	
Address: Street/Apt#/PO Box		City		State	Zip Code	
Email Address:						
Telephone #s: Home:			Cell:			
List all colleges attended, including Northeast MS Community College, AND the dates of attendance:						
	Expected da	ate of enrolls	ment:			
_	<u> Expected da</u>	ate of efficien	nent.			
If requesting readmission, indicate which semester:				undamentals	011 1 1 11 1	
		Ц	Adult Health Ca Therapy and P	•	·	
			☐ Specialty Area			
If requesting <u>alternate placement</u> , indicate ADN courses completed:			_] 1118 Skills Check off	io.	
courses comple	icu.			3 1229	3	
				2339		

Answer all questions, and if appropriate, sign the release of information. Applications submitted with unanswered questions will be considered incomplete and may delay your ability to enter the program.				
YES	NO	Have you ever been charged with, convicted of, pled no contest to, or are charges pending against you for a felony or misdemeanor in any state/jurisdiction? (The Mississippi Board of Nursing may, in its discretion, refuse to accept the application of any person who has been convicted of a criminal offense.) (If YES, please request a personal interview appointment with the Practical Nursing Education Program Director.)		
YES	NO	Have you ever been disciplined by or pled no contest to charges filed by or entered into any agreement restricting your practice with any regulatory agency or certification organization? (If YES, please request a personal interview appointment with the Practical Nursing Education Program Director.)		
YES	NO	Do you understand that you will submit a notarized criminal background check/fingerprinting and must have no disqualifying offenses as listed in §37-29-232 and §43-11-13 of the MS Code in order to be admitted into the Practical Nursing Education program? (Please ask if you do not understand.)		

Application continued on reverse side

YES	NO	Do you understand the functional skills/abilities to practice of nursing as listed below? These include competence, emotional stability, analytical thinking communication skills, mobility, (Please ask if you do not understand the communication)	e: fine motor skills, hearing, arithmetic g, critical thinking, interpersonal skills, vision, and reading.			
Please indicate with √ any that currently apply to you (see applicant rating scale for point assignments):						
		☐ Paramedic ☐ BS, BA or higher-level degree ☐ EMT ☐ Allied Health program certification/ ☐ Certified Nursing Assistan ☐ Nurse Aide Training Progra ☐ Intro to Health Professions I o ☐ First Responder ☐ High School Allied Health/Health Sciences of	licensure t m or II			
Date & place degree/certificate was awarded:						
PLEASE NOTE: > You are responsible for providing copies of certificates, letters from employers, etc. to validate the above information. > Documentation must be submitted to the Health Sciences office by the deadline date to receive points on the rating scale.						
l attes	st that th	ne information provided on this application is true falsification of the information invalidates the				
	Sign	ature	Date			

Comments: