

Registered Nursing - Chattanooga State Community College - 4501 Amnicola Highway - Chattanooga, TN 37406

Name (Please Print): (Last) _____ (First) _____ (Date) _____
 Address/City/State/Zip _____
 Phone Numbers: Home: _____ Cell: _____
 School Email address (please print clearly): _____
 Student A Number: _____ Year you plan to enter program? _____

Programs:

___ Nursing RN Program - A.A.S. Day; ___ Nursing RN Program - A.A.S. Night; ___ Nursing RN Program - A.A.S. Transition

Please Read Carefully

Lab Science courses must have been completed no more than 5 years prior to enrollment in program courses. A waiver of the 5-year limit for a lab science course will only be considered if the applicant....

- Has applied for admission to Chattanooga State (credit, degree seeking - not TCAT).
- Can provide evidence as to how the knowledge of the subject(s) is current (such as current license or certifications in a healthcare field).
- Can provide evidence of current employment displaying active use of subject knowledge (Letter from Employer or HR verifying current employment and position)
- Has a grade of "C" or better in the lab science course(s). A waiver request for courses with a grade of "C -" or lower will not be considered.
- Provides transcript documentation (official or unofficial) that the course(s) were completed.

Note: It is the student's responsibility to submit all requested information at the time the waiver form is submitted.

To request a waiver of the 5-year limit for a program, provide all of the following information and submit completed form to the appropriate program director prior to the application deadline:

	<i>Semester/Year Taken</i>	<i>Grade</i>	<i>Requesting Waiver</i>
BIOL 2010 (Anatomy and Physiology I)	_____	_____	_____
BIOL 2020 (Anatomy and Physiology II)	_____	_____	_____
BIOL 2230 (Microbiology)	_____	_____	_____

Please submit your completed Waiver Request to NAH@chattanoogastate.edu. Attach a copy of your Chattanooga State transcript verifying this information. If these courses were taken else-where and do not appear on your ChSCC transcript attach a copy of the appropriate transcript(s). You will upload the returned Waiver with Committee Decision directly to your Nursing Program Application.

Note: Incomplete applications will not be considered. Waivers are only valid within one year of official RN program start. Late waivers past the program application date will not be accepted. Submit your Waiver Requests early to ensure it can be returned in time to be uploaded to your nursing application.

Describe in detail: "Why do you believe a 5-year waiver should be granted?" (Use back of the page or attach a typed document.) Keep in mind that the content included in these courses is not taught during your program courses. It is assumed that students have current knowledge of the sciences upon which to build knowledge in your chosen healthcare field. Explain why you believe your knowledge is current enough to be granted a waiver of the 5-year limit. Include in this explanation such things as:

- Do you have prior health career education? What career? When were you enrolled?
- Are you currently certified or licensed in a health profession?
- Describe any work experience since completion of the biology courses(s) related to maintaining current knowledge.

Student Signature _____

Program Director Signature: _____ Date: _____

Approved (List any conditions): _____

Denied: _____