Iowa Lakes Community College
Application to the Nursing Program

Name____________________________________________________     Date____________

Circle Interested Program: Practical Nursing (PN)  Associate Degree Nursing (ADN)
Circle the Semester: Fall  Fall  or  Spring

Practical Nursing (PN) Application Process
Deadline: June 1st for fall entry

High School GPA (2.5 or higher): _______ or GED (550 or higher)/HiSet (14 or higher) score: _______

If the above has not been met, you may be considered for admission by completing the college courses below and achieve a combined GPA of 2.5 or higher.

- Developmental Psychology, 3 cr.  Grade: _____  GPA _____
- Anatomy and Physiology I, 4 cr.  Grade: _____
- Nutrition, 3 cr.  Grade: _____

ACT test year: ___________ ACT composite score (18): _______ or equivalent exam _______

Individual minimum requirements: ACT Math (19) _____, Reading (15) _____, English/Writing (14) _____

If score requirements are not met, developmental courses may be required.

PN Prerequisites courses that must be completed before starting the program. List completed grades.

- CNA, 75 hour credit or non credit course  Grade: _____
- Anatomy and Physiology I, 4 cr.  Grade: _____

Associate Degree Nursing (ADN) Application Process
Deadline: June 1st for fall or November 1st for spring entry

Achieve a GPA of a 2.5 in the following ADN prerequisite college courses:

- Anatomy and Physiology I, 4 cr.  Grade: _____  GPA _____
- College Chemistry, 4 cr.  Grade: _____
- Introductory Biology, 4 cr.  Grade: _____
- College Algebra or Statistics, 4 cr.  Grade: _____

ACT test year: ___________ ACT composite score (20): _______

Individual minimum requirements: ACT Math (21) _____, Reading (16) _____, English/Writing (17) _____

If score requirements are not met, developmental courses may be required.

ACT exam required within 10 years. To take/retake the ACT, schedule the exam at www.actstudent.org.
Send all required information to Iowa Lakes Community College, 3200 College Drive, Emmetsburg, IA 50536

Reviewer: _________________  Advising Session: _________________  File Review Date: _______________
Prerequisite Letter: ________________  Accept to: __________________