Nursing Programs Laboratory Science Waiver Petition Form

HCC student ID number: ____________________________

Name of Applicant: ____________________________ Date of Birth: __________________

LAST FIRST

A waiver may be granted for potential students applying for the LPN2RN Program who have taken science courses more than seven-years, but no more than fourteen-years prior to program start, who are currently employed in the healthcare field with two-years of direct patient contact experience. A grade of C+ or greater in all science courses is required for all HCC Nursing Programs.

Coursework: List course(s) you are seeking to petition to meet NUR course requirements.

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester/Year Completed</th>
<th>Grade Received</th>
<th>College/University</th>
</tr>
</thead>
<tbody>
<tr>
<td>Microbiology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anatomy &amp; Physiology I</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anatomy &amp; Physiology II</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Employment experience related to the course(s) being petitioned: (Please describe how and in what capacity you use the curriculum from the course(s) listed above in your current employment). Please attach a separate sheet if more space is needed.

Other certifications: List any current healthcare related certifications you hold (e.g. CNA, CPR, HHA, etc.)

I certify that all information stated on this application form is accurate and complete and that concealment of facts or making a false statement may result in dismissal.

Applicant Signature ________________________________ Date __________

Director of Nursing Signature ________________________________ Date __________

☐ Approved ☐ Denied Comments: