

Nursing Program

Request for Waiver of 5-Year Limit for Biology Lab Science Courses

Deadline dates for submission: Day Program March 1 and Evening Program September 1

Name (Please Print): _____ Date: _____
Last Name First Name

Address: _____
Street/PO Box City State Zip

Phone Number: _____
Home Cell "N" Number

Email Address (Please Print Clearly): _____

Nursing Program? Day Night Year you plan to enter the 1st Nursing Course? _____

PLEASE READ CAREFULLY: A waiver of the 5-year limit for Anatomy and Physiology and/or Microbiology, will be considered if the applicant:

- Has applied for admission to Cleveland State and submitted an application to the nursing program
- Is currently licensed or certified in healthcare career or can provide evidence as to why knowledge of the biology subject is current.
- Has a grade of "B" or better in the biology course(s). A waiver request for courses with a grade of "C" will not be considered.
- Provides documentation that the courses were completed within no more than 8 years of the date of entry in the first nursing course.

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

Waiver Request	Semester/Year Taken	Grade	Note: Attach an unofficial copy of your Cleveland State transcript from CougarNet. If these courses were taken elsewhere, attach an unofficial copy of the appropriate transcript(s). Incomplete applications will not be considered.
<input type="checkbox"/> Anatomy and Physiology I			
<input type="checkbox"/> Anatomy and Physiology II			
<input type="checkbox"/> Microbiology			

Healthcare career: _____ Licensed/Certified? Yes No Date training completed? _____

Describe in detail: "Why do you believe a 5-year waiver should be granted?"

Keep in mind that the nursing program faculty do not teach the content included in these courses. It is assumed that students have current knowledge of the sciences upon which to build nursing knowledge. Provide a detailed explanation of educational and/or work experiences since the biology course(s) were completed that would convince the program admissions committee that your knowledge is current enough to be granted a waiver of the 5-year limit. Just stating that you are licensed in healthcare profession is not sufficient.

(Use back of the page if needed.)

Student Signature: _____

Admissions Committee Action: Date: _____

Approved Approved with conditions: _____

Denied