

Medical Laboratory Scientist Direct Admit
Completion Checklist
Spring 2023

****IMPORTANT****
Form MUST be the semester and year
for which you are applying.

YOU MUST FILL IN ALL BLANKS

Student name (print): _____ NSHE #: _____
The semester for which I am applying is: _____ Phone: _____
The application deadline is: _____ Today's date: _____

1. Check if applicable:

_____ I am transferring or have transferred credits (attach a copy of MyCSN Transfer Credit Report).

Note: Grades of "P & TP," and "S or TS" received prior to spring 2020, will be considered a "C" unless you attach an **official** transcript showing a different grade – see LE Policy for additional information on "S & TS" grades. A grade of "TR" will not be accepted unless you attach an **official** transcript showing actual grade; and "LELC" courses will be accepted only with proof of approved substitution waiver.

PLEASE NOTE: PROOF OF APPROVED SUBSTITUTION/WAIVER REQUEST MUST BE ATTACHED IF APPLICABLE

2. Circle either TRUE or FALSE to ALL the following.

TRUE FALSE I understand that GPA on prerequisite courses must be 2.50 or higher.

TRUE FALSE I am not currently enrolled in a Limited Entry Program.

TRUE FALSE I have met with a Health Programs Advisor. Date of meeting: _____

TRUE FALSE I have completed the Limited Entry Workshop. Date of workshop: _____
(Quiz result must be attached).

TRUE FALSE I have paid the \$20.00 non-refundable Limited Entry Application Fee (receipt/proof of payment is attached).

TRUE FALSE A copy of my High School Diploma (or transcripts), GED transcript, or advanced degree is attached (associate or higher). Note: International (non-US) transcripts must be evaluated through a NACES member organization (<https://www.naces.org/members>).

TRUE FALSE I have completed the following classes with a "C" or higher. ("C-" is not accepted).

_____ BIOL 190, 196, 223 (grade _____) _____ MATH 126, 126E or higher (grade _____)

_____ CHEM 121 (grade _____) _____ ECON 261, PSY 210,

_____ ENG 100, 101, 110 or 113 (grade _____) _____ SOC 210, or STAT 152 (grade _____)

IF YOU ANSWERED "FALSE" OR LEFT ANY OF THE ABOVE ITEMS "BLANK", YOU CANNOT SUBMIT YOUR APPLICATION PACKET WITHOUT SELECTION SPECIFIC EXCEPTION WAIVER OR MEMORANDUM

3. Read and initial the following.

_____ I have read, understand, and agree to comply with the Limited Entry Academic Programs Policy and Procedures.

_____ I understand that my final grades, including transfer credits, must be posted in MyCSN by the deadline date.

_____ I understand that I must notify the Limited Entry office of any name, address, or phone change in writing.

_____ I understand that if I repeat a course the highest of the first three attempts, including W, WT, or AU, will be used.

_____ I understand that the official transcript evaluation of applicable transfer credits must be complete by the deadline.

_____ I understand that no additional documentation can be added to my application after the deadline.

_____ I understand that I must reproduce all documentation if I reapply in the future. The Limited Entry Office doesn't provide documents.

_____ I understand that I must submit everything at one time with this checklist even if submitted to another department.

_____ I understand that once I accept a position in a Limited Entry program I cannot apply to another Limited Entry program until I complete the program I originally accepted.

_____ I understand that I may receive a point(s) reduction if I reapply to a program that I was previously enrolled in.

4. Circle either YES or NO for each item below that you are submitting for points.

YES NO Proof of a Higher Education Degree of an Associate Degree or higher from an accredited college or university.

YES NO Proof of successful completion of the MLT/MLS Phlebotomy track (CLS 151, CLS 152, and CLS 153); the National Healthcare Association track (CLS 155) and CLS 153; or a NAACLS Approved Phlebotomy Program
YES NO Proof of National Phlebotomy Credential (ASCP, AMT, or NCCT) or a current Nevada State Laboratory Assistant License

YES NO Paid Medical Laboratory/Phlebotomy Experience (must be on approved form)

YES NO Proof of Completion of Biomedical CTE program

YES NO Proof of Certificate of Completion in Health Living and Aging

5. Check all that apply. Fill in ALL blanks.

I have completed the following general education courses with a grade of "C" or better.

_____ ENG 102, 114, or COM 101 (grade _____)

_____ CHEM 122 (grade _____)

_____ Human Relations (class taken _____ / grade _____)

_____ Fine Arts/Social Sciences/Humanities (class taken _____ / grade _____) (PHIL 102 preferred)

_____ PSC 101 or HIST 100 (grade _____) **OR** _____ HIST 101 (grade _____) **and** HIST 102/217 (grade _____)

_____ BIOL 191, 197, 224 (grade _____)

6. Check all that apply. Fill in ALL blanks.

I have completed the following unrestricted or preferred program courses with a grade of "C" or better for points.

_____ BIOL 325 (grade _____) _____ CHEM 220 (grade _____) _____ PHIL 102 (grade _____)

**SUBMIT YOUR COMPLETE APPLICATION PACKET TO THE LIMITED ENTRY OFFICE
WEST CHARLESTON, ROOM K-216, (702) 651-5633**

Student Signature: _____