



3 Year Part-Time BSN Program

Checklist and Prerequisite Form

Entry Term: Fall 2025

The following form is used for those applying to the 3-Year Part-Time program of the Undergraduate BSN degree for the Fall 2025 term.

DIRECTIONS: Complete this form and indicate which nursing prerequisite course(s) you have completed, and/or indicate your plan to complete any remaining prerequisites. Information should be provided for all prerequisite courses indicated below. Incomplete or unsigned forms will result in an incomplete application and not be considered for admission. Once you have completed this form and all supporting documents are submitted (due May 5th, 2025), you will receive communication via email in June 2025 regarding your application status.

The 3YPT program is an evening and weekend program with courses required in Fall, Spring, and Summer semesters. Students in the 3YPT program are taking the nursing curriculum on a part-time basis, but can be full-time students at the university by enrolling in a combination of nursing and LEP courses (minimum 12 credits). If you are seeking entry to the full-time Traditional BSN program to complete the nursing curriculum on a full-time basis, please do not complete this checklist/application. Return back to the BSN Application Support page for more information: <https://inside.southernct.edu/nursing/bsn-application-support>.

Academic Eligibility Requirements:

- Minimum cumulative GPA of 3.0
- All 9 prerequisites completed with a C+ or greater (All 9 prerequisites must be completed with the minimum grade requirement prior to Fall 2025, no exceptions.)
- Maximum of 2 prerequisite repeats
- Personal statement describing your interests and motivations in pursuing a nursing career (150 words or less)
- Submit resume and two letters of recommendation



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SECTION 1: STUDENT INFORMATION

Student Name: _____ SCSU ID#: _____

SCSU Email Address: _____

Alt. Email Address: _____

Phone #: () _____ - _____

Employment Status: ____ Full time ____ Part-time ____ Unemployed

SECTION 2: ACADEMIC HISTORY

Please list, in chronological order, all educational institutions attended since graduation from high school, including SCSU if applicable. Official transcripts must be sent to the admission office for each school listed if they have not already been sent.

COLLEGE/UNIVERSITY & LOCATION	DEGREE/MAJOR & YEAR(S) OF ATTENDANCE	TOTAL GPA	TOTAL CREDITS

All transcripts must be provided as part of the application, including transcripts outside of SCSU. Additionally, AP Scores and CLEP Reports for any prerequisite courses being fulfilled by AP credit or CLEP examination must be provided. You must provide transcripts showing your most up-to-date semester grades/GPA. If you are taking courses at SCSU or outside of SCSU during the Spring 2025 semester you must provide an updated transcript to reflect your grade(s) as soon as grades are submitted.

SECTION 3: PREREQUISITE COMPLETION CHART

To be considered for admission into the nursing program, you must have all 9 (nine) nursing prerequisites completed with the proper minimum grade by the end of the Spring 2025 semester with a C+ or greater. All students who accept admission into the nursing program are required to show proof of completion of all 9 prerequisites with a C+ or greater. Prerequisite courses left incomplete with the proper grade will result in a student's inability to participate in the nursing program, and students will have to reapply in the next application cycle. Please indicate completion of the following prerequisites (and include a grade). If you are transferring courses into SCSU, please list equivalent course names and numbers. If you have not yet completed these courses, please list when and where you plan to complete the prerequisite courses (ex. Spring 2025, SCSU). *Please note: Transfer credits are determined by the Transfer Office at SCSU. Only list transfer courses as evident by your unofficial SCSU transcript.*

NURSING PREREQ	COLLEGE/UNIVERSITY COMPLETED	COURSE TITLE/#	SEMESTER & YEAR	# OF CREDITS	GRADE EARNED
BIO 200 Anatomy & Physiology I					
BIO 201 Anatomy & Physiology II					
BIO120 or 233 Microbiology					
MAT107 Elementary Statistics					
MAT 108 (or 111, 112, 120, 122, 130, 150, or 151)					
PCH 200 Introduction to Nutrition					
PSY 100 Introduction to Psychology					
PSY 219 Lifespan Development					
CHE 125 Principles & Applications of General, Inorganic, and Biochemistry					



SECTION 4: ACKNOWLEDGEMENTS

- Submit my completed Prerequisite Checklist Form to the online portal by 5/5/25;
- Ensure that I have all proper equivalents for the required prerequisites;
- I understand that if I do not have the 9 required prerequisites with the minimum grade requirement, I am considered an ineligible applicant;
- I understand that if I accept admission into the nursing program, I must show proof of prerequisite completion with a C+ or greater. If I do not complete the prereqs prior to the Fall 2025 semester, I will not be able to progress into the nursing program and curriculum, and I will need to reapply and complete all prerequisites;
- Have a cumulative GPA of 3.0 or higher by 5/5/25;
- Provide a true and inclusive history of my academic performance and schools attended;
- Verify that all my unofficial SCSU Transcripts and other official transcripts have been submitted into my application portal;
- Not have more than 2 prerequisite repeats due to a course grade below the minimum requirements. If you have more than two (2) repeats, for any of the required prerequisites, you are ineligible to apply. Please contact the School of Nursing for additional clarification if needed;
- Complete Nursing Disclosure Form, if I am a transfer student who has previously been enrolled in a nursing program. I understand that being previously enrolled/dismissed from a nursing program does not guarantee admission. I understand that I may not not be able to transfer in any nursing credits towards the SCSU Nursing Program;
- I understand I am required to attend the Pre-Immersion & Orientation week from August 11th-15th, 2025.

By completing this form, I understand that failure to carefully review and submit the items above results in an incomplete application and I will not be considered for the 3YPT program for the 2025-2028 application cycle.

Full Name

Signature

___ / ___ / 2025
Date