



Health Science Applications User Manual

San Joaquin Delta College Health Sciences Division

The San Joaquin Delta College's Health Science Program applications are now available as online forms.

This user guide contains screen shots of the online application and information related to how to fill out the online applications.

IMPORTANT NOTES REGARDING THE ONLINE APPLICATIONS

1. All health science program applications require that you login using your Delta College student ID number and date of birth.
2. You must be a currently registered student at the College and must have a Delta College student email address on file.
3. All applicants must be in good-standing with the College (e.g. no academic holds on file).
4. All applicants must have a valid social security card (required for background clearance).
5. Before you begin the application, have copies of your transcripts available so that you can correctly enter your prerequisite course information.
6. The online application saves the information on your application every time you click on the NEXT button.
7. If you are unable to finish your application, you may click on the SAVE AND FINISH LATER button to come back to your application at a later time.
8. Before you submit your application, please make sure to review all the information entered for accuracy.
9. Once you submit your application, you will NOT be able to access it again.
10. If you have any questions related to the application, please send an email to: healthscience-apps@deltacollege.edu

APPLICATION PERIODS FOR HEALTH SCIENCE PROGRAMS

Please note that the following dates are *typical* timeframes when the applications are available. For *exact dates of the application periods for each program, please check the program's website.*

PROGRAM	SUMMER Admission	FALL Admission	SPRING Admission
Nursing Assistant	Mar—Apr	Jun—Jul	Oct— Nov
Associated Degree in Nursing (R. N.)	N/A	Jan—Feb	Aug – Sept
Speech Language Pathology Assistant	N/A	Mar	Oct
Vocational Nursing/Psychiatric Technician	N/A	N/A	Aug - Sept

Health Science Programs

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INFORMATION IN THIS GUIDE IS SUBJECT TO CHANGE AT ANY TIME. ALL INFORMATION ON THE HEALTH SCIENCES WEBSITE SUPERSEDES ANY INFORMATION LISTED HERE.



GENERAL LOGIN INFORMATION

1. The **ACCOUNT NAME AND PASSWORD** will be posted on the program's webpage and you will need this information in order to access each of the health science program applications in the server.

Enter an account name and password to view databases hosted by FileMaker Server:

☐ Guest Account
☒ Account Name and Password

Account Name:

Password:



Instant Web Publishing



[NURS ADN Application](#)



[NURS Certified Nursing Assistant Application](#)

[Logout of FileMaker Server](#)

2. Once you login into the server, you will see links to the online application(s) available. Click on the online application you wish to complete.



ASSOCIATE DEGREE IN NURSING (ADN) ADMISSION REQUIREMENTS

Admission to the ADN program is based on a multi-criteria screening process. The following are the criteria used to determine eligibility for ADN admission:

1. Previous experience related to academic degrees, relevant licenses or certificates held by applicant, and health care experience in direct patient care (*Maximum Points = 15*)
2. GPA in Science, Non-Science prerequisite coursework and science repeats (*Maximum Points = 50*)
3. Life experiences or special circumstances (*Maximum Points = 2.5*)
4. Foreign language proficiency (*Maximum Points = 2.5*)
5. Test of Essential Academic Skills (TEAS) Test Scores (*Maximum Points = 30*)

Applicants can earn up to 100 total points. All applicants will be rank ordered with the highest ranking applicants being offered the available spaces in the program for the current application period. In addition to selecting applicants for available spaces, there will be an “Alternate” list where students who meet the minimum requirements earning enough points on the application (but not enough to be offered an available space) will be provided with an opportunity to be on a “wait-list” in the event a space does become available. **Please note that “Alternates” are not guaranteed a space, this list is only used for the current application period.**

The ADN application collects the criteria information in order to determine an applicant’s eligibility. Please see <http://www.deltacollege.edu/div/hs/ApplicationProcess.html> for a detailed description of the the admission criteria.

See pages 4 through 18 for detailed information about the application and information on how to complete each section of the application.

PLEASE NOTE:

- If you have submitted an application to the ADN program (since the Fall 2010 application period) all of the information you previously submitted will be populated in the application for the current period.
- Please keep in mind, that it is YOUR RESPONSIBILITY to review the information you previously submitted for completeness and accuracy. To update your information, simply click in the field.

ADN Application

Step 1: Read Welcome Page Information



Welcome!

Before you start the application:

1. You must have your Delta College student I.D. number and your Delta College student e-mail address. **All correspondence from the college regarding this application will be sent to your DELTA COLLEGE STUDENT E-MAIL ADDRESS.**
2. This online application requires that you enter detailed information related to your academic history. Please have copies of academic transcript(s) available before you start this application. The information you provide will be used to determine your eligibility for the program; failure to provide accurate information could disqualify you.
3. This online application automatically saves your information whenever you finish a page. If you are in the middle of completing a page in the application and wish to complete the application later, just click on the "SAVE AND FINISH LATER" button. You will be able to return and finish the application at a later time.
4. If you submitted an application from this system in a previous application period, the information you entered will appear. Please review this information to ensure that it is correct and current.
5. BEFORE you SUBMIT your completed application, please review your application. Once the application has been submitted you will not be able to make changes to your application information. Upon completion you will receive an email confirming receipt of your application.

NEXT

PLEASE MAKE SURE TO READ THE INFORMATION ON THIS PAGE.

Click NEXT once you have read the information on the Welcome Page.

ADN Application

Step 2: Log into the application



To apply to the following programs:

Associate Degree in Nursing - Vocational Nursing - Psychiatric Technician
please log in here:

1. Enter your Delta ID

Your Delta ID is a nine digit number starting with 98. It is assigned to you by the college when you submit your admission application.

Ex: 98XXXXXXX

If you do not know your Delta ID, you can retrieve your ID information by clicking:
<http://register.deltacollege.edu/student/login/index.cfm>

2. Enter your Date of Birth

Please enter your date of birth in the following way:
MM/DD/YYYY.

Ex: 01/01/2010

3. Click Login.

PLEASE NOTE:

On each page, if information is missing or invalid, you will be directed to a screen like the one above.

After you login into the server, you will be required to log into the application itself.

Log into the application using your Delta College Student ID number and date of birth.

Enter your birth date in the following format: MM/DD/YYYY.

If you are not currently a registered student or if you entered your Delta ID or date of birth incorrectly, you will get an error message.

ADN Application

Step 3: Verify Contact Information



CONTACT INFORMATION

This is the contact information we have on file for you. Please review the information to make sure we have the most current information.

If you need to change anything, please click in the field and make the appropriate changes.

DELTA ID

DELTA EMAIL ADDRESS

FIRST NAME

LAST NAME

MIDDLE NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER

EXIT

NEXT

After logging into the database, the contact information we have on file for you will appear in this page.

Please be sure that the contact information is correct and current. If there is missing or incorrect information, please update this form.

ADN Application

Step 4: Personal Information



PERSONAL INFORMATION

This is the demographic information we have on file for you. Please review the information.

This information is required for reporting to the Program's governing agencies and will not in any way be used to determine your eligibility.

If you need to correct anything, please click in the field and make the appropriate changes.

DELTA ID	FIRST NAME	LAST NAME
GENDER <input type="radio"/> F <input type="radio"/> M		
ETHNICITY		
<input type="radio"/> American Indian/Alaskan Native	<input type="radio"/> Laotian	
<input type="radio"/> Asian Indian	<input type="radio"/> Mexican	
<input type="radio"/> Black/African American	<input type="radio"/> Other Asian	
<input type="radio"/> Cambodian	<input type="radio"/> Other Hispanic	
<input type="radio"/> Central American	<input type="radio"/> Other Pacific Islander	
<input type="radio"/> Chinese	<input type="radio"/> Other/Unknown	
<input type="radio"/> Filipino	<input type="radio"/> Samoan	
<input type="radio"/> Guamanian	<input type="radio"/> South American	
<input type="radio"/> Hawaiian	<input type="radio"/> Vietnamese	
<input type="radio"/> Japanese	<input type="radio"/> White	
<input type="radio"/> Korean		

EXIT

BACK

NEXT

SAVE AND FINISH LATER

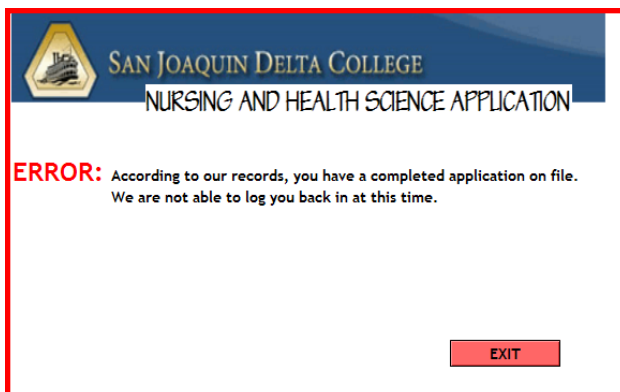
Please verify the information we have on file for you and make changes as appropriate.

Once verified, click NEXT.

PLEASE NOTE: The information on this page is not used to determine your eligibility into the program, but is used for reporting purposes only.

IMPORTANT INFORMATION

Once you click NEXT on this page, the system will do a search for your application for the application period. If you have completed an application for the CURRENT application period, you will not be able to navigate any further in the system. Click Exit to log out of the system.



ADN Application

Step 5: College Attendance



Delta ID:

Application for Term:

COLLEGE/UNIVERSITY ATTENDANCE

Please list all the regionally accredited United States colleges/universities you have enrolled in courses where you received a letter grade. Use pull down lists to record your information when possible.

PLEASE DO NOT ABBREVIATE THE NAME OF THE INSTITUTION, type out the entire name.

To add more colleges/universities, just press the TAB key on your keyboard past the TERM TYPE column

Previously used
First and Last Names: _____

COLLEGE/UNIVERSITY NAME	COLLEGE CITY/STATE	TERM TYPE

BACK

NEXT

EXIT

SAVE AND FINISH LATER

Please list ALL regionally accredited United States colleges/universities you have attended.

DO NOT ABBREVIATE THE NAME OF COLLEGE

You must also complete the following information for all colleges/universities you attended:

College City/State

AND

the College's term type

(e.g. semester or quarter system)



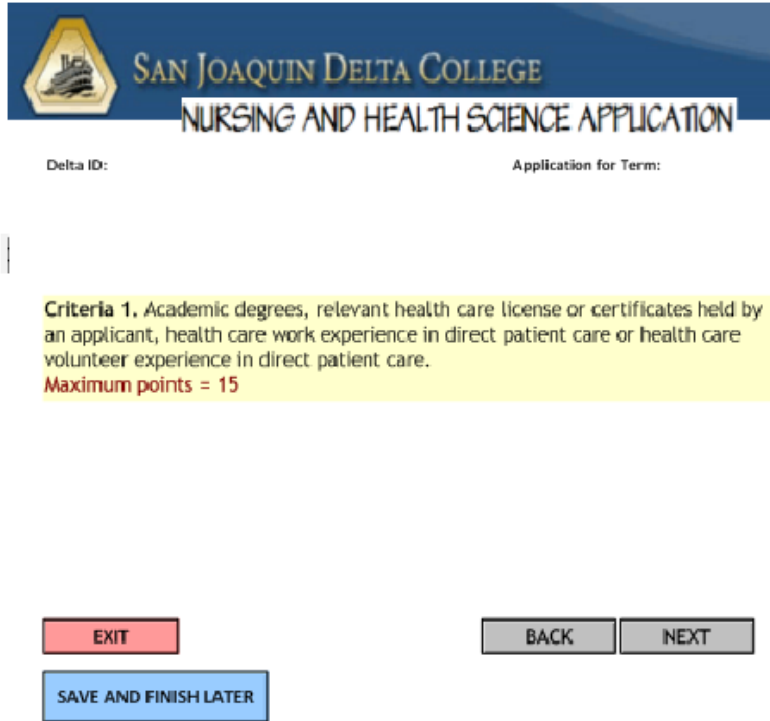
SUPPORTING DOCS NEEDED IF INVITED TO SUBMIT DOCUMENTATION

Official transcripts from all colleges/universities listed above.

Note: Students with a degree from a college/university outside the United States must have transcripts evaluated by a National Association of Credential Evaluation Services (NACES) approved independent agency (the evaluation must be in a sealed envelope from the agency), demonstrating equivalency to a BA/BS degree or higher from a U.S. regionally accredited college. The NACES evaluation will be used ONLY to award points as part of ADN admission criteria.

ADN Criterion 1A

Step 6: Previous Academic and Work Experiences



SAN JOAQUIN DELTA COLLEGE
NURSING AND HEALTH SCIENCE APPLICATION

Delta ID: _____ Application for Term: _____

Criteria 1. Academic degrees, relevant health care license or certificates held by an applicant, health care work experience in direct patient care or health care volunteer experience in direct patient care.
Maximum points = 15

EXIT **BACK** **NEXT**

SAVE AND FINISH LATER

Criterion 1A

If you have earned a degree, please indicate where and when you earned the degree.

If you have not earned a college degree, check **NONE** and click **NEXT** to continue.



SAN JOAQUIN DELTA COLLEGE
NURSING AND HEALTH SCIENCE APPLICATION

Delta ID: _____ Application for Term: _____

CRITERION 1A: ACADEMIC DEGREES
Maximum points = 5

Points will only be awarded for one degree.
Please check all degrees that you have earned.

If you do not have a college degree, please check NONE.

	Where?	When? Month/Year
<input type="checkbox"/> None		
<input type="checkbox"/> Bachelor's Degree or Higher		
<input type="checkbox"/> AA/AS Degree		

EXIT **BACK** **NEXT**

SAVE AND FINISH LATER



SUPPORTING DOCS NEEDED IF INVITED TO SUBMIT DOCUMENTATION

Official transcript from regionally accredited U.S. colleges or universities with degree posted – OR – students with a degree from a school outside the United States must have transcripts evaluated by a National Association of Credential Evaluation Services (NACES) approved independent agency (evaluation must be in a sealed envelope from the agency), demonstrating equivalency to a BA/BS degree or higher from a U.S. regionally accredited college. The NACES evaluation will be used **ONLY** to award points as part of ADN admission criteria.

ADN Criterion 1B

Step 7: Licensed Health Care and Work Experience

SAN JOAQUIN DELTA COLLEGE
NURSING AND HEALTH SCIENCE APPLICATION

Delta ID: _____ Application for Term: _____

CRITERION 1B: LICENSED HEALTH CARE AND WORK EXPERIENCE
Maximum points = 10

Points will only be awarded for one current license.

1. Do you have any of the following current licenses below? ☐ Yes ☐ No

If Yes, please enter information for the license(s) you have.

	License #	Expiration Date MM/DD/YYYY
LVN		
Psychiatric Technician.....		
Radiologic Technologist...		
Respiratory Therapist.....		
Paramedic		

2. If you answered Yes above, do you have 1000+ hours of experience or work experience for your license(s)? ☐ Yes ☐ No ☐ N/A

If YES, please list current/former employer:

EXIT **BACK** **NEXT**

SAVE AND FINISH LATER

There are two parts to Criterion 1B.

Part 1: The following are approved licenses that applicants can earn points for.

If you have a license in any of the listed areas, complete license# and expiration date information for that license(s).

Part 2: If you answered YES to part 1, you may receive additional points for any work experience related to the license you possess.

If you have previous work experience in the license(s) you currently possess, you may enter that information here.

To receive points, you must possess a CURRENT license. Pending licenses will not be accepted.

SUPPORTING DOCS NEEDED IF INVITED TO SUBMIT DOCUMENTATION

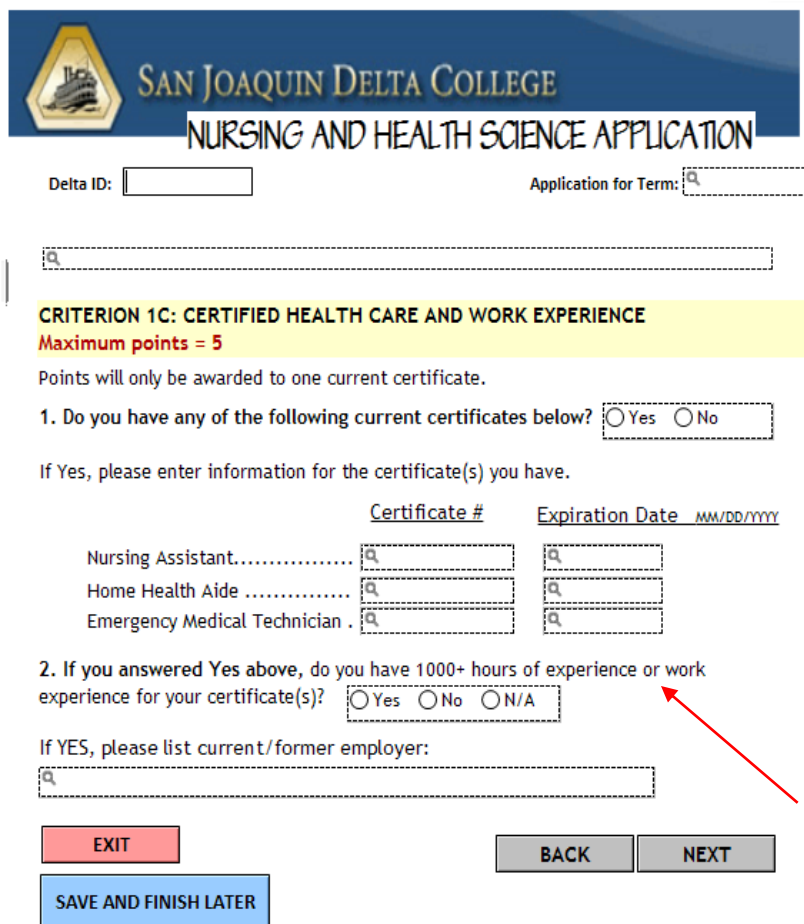


Part 1: Licensed Vocational Nursing, Psychiatric Technician, Radiologic Technician, Respiratory Therapist or Paramedic requires a copy of current license with license number, issue date and expiration date.

Part 2: Work: Letter from your current/former employer verifying employment. The letter must be on organization letterhead with an original signature and must include applicant's name, start date and end date, employee status (full-time/part-time), total number of hours worked, job title, department if applicable, and examples of duties including direct patient care.

ADN Criterion 1C

Step 8: Certificated HealthCare and Work Experience



SAN JOAQUIN DELTA COLLEGE
NURSING AND HEALTH SCIENCE APPLICATION

Delta ID: Application for Term:

CRITERION 1C: CERTIFIED HEALTH CARE AND WORK EXPERIENCE
Maximum points = 5

Points will only be awarded to one current certificate.

1. Do you have any of the following current certificates below? ☐ Yes ☐ No

If Yes, please enter information for the certificate(s) you have.

	Certificate #	Expiration Date MM/DD/YYYY
Nursing Assistant.....	<input type="text"/>	<input type="text"/>
Home Health Aide	<input type="text"/>	<input type="text"/>
Emergency Medical Technician ..	<input type="text"/>	<input type="text"/>

2. If you answered Yes above, do you have 1000+ hours of experience or work experience for your certificate(s)? ☐ Yes ☐ No ☐ N/A

If YES, please list current/former employer:

EXIT **BACK** **NEXT**
SAVE AND FINISH LATER

There are two parts to Criterion 1C.

Part 1: The following are approved certificates that applicants can earn points for.

If you have a certificate in any of the listed areas, enter your certificate number and expiration date information that certificate.

Part 2: If you answered YES to Part 1, you may receive additional points for any work experience related to the certificate you possess.

If you have previous work experience in the certificate(s) you currently possess, you may enter that information here.

To receive points, you must possess a CURRENT certificates. Pending certificates will not be accepted.



SUPPORTING DOCS NEEDED IF INVITED TO SUBMIT DOCUMENTATION

Part 1: Certified CNA, HHA, or EMT requires a copy of your current certificate including your certificate number, issue date and expiration date.

Part 2: Work: Letter from current/former employer verifying employment. The letter must be on organization letterhead with an original signature and must include applicant's name, start date and end date, employee status (full-time/part-time), total number of hours worked, job title, department if applicable, and examples of duties including direct patient care.

ADN Criterion 1D

Step 9: Other HealthCare Work Experience

Delta ID: Application for Term:

CRITERION 1D: HEALTHCARE WORK EXPERIENCE NOT COVERED UNDER CRITERION 1B OR 1C - **Maximum points = 2**

If you currently have a license or certificate that was not covered under Criteria 1B or Criteria 1C but have either of the following experiences you may earn points here.

If you do not, please check NONE.

- ☐ None
- ☐ Other current license or certificate
- ☐ Work experience in direct patient care > 1000 hours
- ☐ Volunteer with direct patient care > 200 hours

EXIT

SAVE AND FINISH LATER

BACK

NEXT

For applicants with other types of licenses or certificates, applicants may earn points if they have the following experiences:

- Other current license or certificate
- Work experience in direct patient care > 1000 hours
- Volunteer experience with direct patient care > 200 hours

If none of the experiences apply, check None.



SUPPORTING DOCS NEEDED IF INVITED TO SUBMIT DOCUMENTATION

Work: Letter from current/former employer verifying employment. The letter must be on organization letterhead with an original signature and must include applicant's name, start date and end date, employee status (full-time/part-time), total number of hours worked, job title, department if applicable, and examples of duties including direct patient care; copy of current license or certificate.

Volunteer: Letter from organization verifying volunteer service. The letter must be on organization letterhead with an original signature and must include applicant's name, start and end date, total hours volunteered, and examples of duties including direct patient care.

ADN Criterion 2A

Step 10: Science Prerequisite Course Information



Delta ID:

Application for Term:

CRITERIA 2A: SCIENCE PREREQUISITES

Please list **ALL OF YOUR ATTEMPTS** to complete the ADN Science Prerequisites. You must list every attempt for which you received a letter grade (A, B, C, D, F, W, MW, I) on your transcript. Courses in progress WILL NOT BE ACCEPTED.

Use pull down lists to record your information when possible.

To add more courses, just press the TAB key on your keyboard past the last GRADE you entered.

HUMAN ANATOMY: DELTA COURSE EQUIVALENT: BIOL 031 (PRIOR TO FALL 99: ANAT 001)

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR yyyy	UNITS	GRADE

HUMAN PHYSIOLOGY: DELTA COURSE EQUIVALENT: BIOL 032 (PRIOR TO FALL 99: ANAT 002)

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR yyyy	UNITS	GRADE

MICROBIOLOGY: DELTA COURSE EQUIVALENT: BIOL 022 OR BIOL 023

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR yyyy	UNITS	GRADE

EXIT

BACK

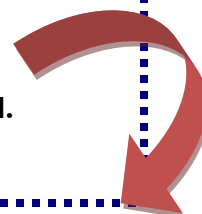
NEXT

SAVE AND FINISH LATER

Enter Science Prerequisite Course Information on this page.

For combined Human Anatomy and Physiology courses that were 2 semester/quarter classes, split the courses between the Human Anatomy and Human Physiology sections.

Each section in the science prerequisites must have at least one (1) course's information entered.



HUMAN ANATOMY: DELTA COURSE EQUIVALENT: BIOL 031 (PRIOR TO FALL 99: ANAT 001)

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR yyyy	UNITS	GRADE
American River College	BIOL 430	Spring	2008	5	B

HUMAN PHYSIOLOGY: DELTA COURSE EQUIVALENT: BIOL 032 (PRIOR TO FALL 99: ANAT 002)

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR yyyy	UNITS	GRADE
American River College	BIOL 431	Fall	2008	5	B

NOTE:

College, course ID, term, academic year, units, and grade information must be entered **for all science prerequisite courses you earned a letter grade in.**

Pull-down lists are available for all fields in yellow. The College/University Name field is based on the information you entered in the College Attendance section.

Course ID should be entered the way the college publishes its courses on the class schedule. For example, Delta College's Human Anatomy Course ID is BIOL 31. **BIOL 31 is what is entered in the Course ID field.**

Do not enter grades as having a + or - unless that is how the grade appears on the official transcript.

ADN Criterion 2B

Step 11: Non-Science Prerequisite Course Information

Delta ID: Application for Term:

CRITERIA 2A: NON-SCIENCE PREREQUISITES

Please list your: Nutrition and English course information. Please record your **FIRST** passing grade. A passing grade is any letter grade: A, B, C. You are not required to list all attempts for Nutrition or English. Courses in progress WILL NOT BE ACCEPTED.

Use pull down lists to record your information when possible.

Any prerequisite courses taken at San Joaquin Delta College will be shown below.
If the courses below were not the **EARLIEST** passed courses you took in the area, please update the information to reflect the **EARLIEST PASSED** course you enrolled in.

NUTRITION - DELTA COURSE EQUIVALENT: FCS 006

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR YYYY	UNITS	GRADE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ENGLISH COMPOSITION - DELTA COURSE EQUIVALENT: ENG 001A or 001B or 001D

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR YYYY	UNITS	GRADE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

NOTE: The system is sensitive to data entry errors. If you are unable to move on, check each entered field to make sure there are not extra lines/spaces. If there is, delete the lines/spaces so that when you click in the field only the entered text is present.

Unlike the Science Prerequisite courses, enter the **FIRST PASSING** grade you received in Nutrition and **ANY** passing grade in the approved English Composition courses.

(Eng 1A, 1B, 1D or equivalent)

Passing grades are letter grades A, B, or C.



**SUPPORTING DOCS
NEEDED IF INVITED
TO SUBMIT**

DOCUMENTATION

For ALL PREREQUISITE COURSES, Official transcripts for ALL lower and upper division courses completed at any and all regionally ac-

credited U.S. institutions, regardless of applicability to nursing requirements, are required.

Official transcripts will not be required for courses completed at San Joaquin Delta College.

Prerequisite courses completed at other regionally accredited United States colleges or universities must be equivalent to San Joaquin Delta College courses.

For determination of course equivalency, official transcripts AND course descriptions for prerequisite courses will be required.

Course descriptions for prerequisite courses only must accompany the official transcript for the purpose of determining course equivalency. Course descriptions must come from the specific catalog year in which the course was taken and may be obtained from the college catalog where courses were taken, or may be available at <http://www.collegesource.org/>.

San Joaquin Delta College does not evaluate foreign transcripts nor is credit granted for foreign coursework.

ADN Criterion 3

Step 12: Life experiences or special circumstances

Applicants can earn up to 2.5 points for specific life circumstances and special experiences.

Using the checklist shown, check ALL circumstances/experiences that apply.

If you select an option other than **None of the above**, you will only earn 2.5 points regardless of how many apply to you.



Delta ID:

Application for Term:

CRITERIA 3: LIFE CIRCUMSTANCES AND SPECIAL EXPERIENCES

Maximum Points = 2.5

Please check ALL life experiences/special circumstances that apply for which you can provide supporting documentation for.

***IF NONE OF THESE APPLY TO YOU -- PLEASE CHECK *None of the above*

- ☐ Disability
- ☐ Low Family Income
- ☐ First generation of family to attend college
- ☐ Need to work at least part-time
- ☐ Disadvantaged social or educational environment
- ☐ Difficult personal or family situations or circumstances
- ☐ Veteran or Refugee Status
- ☐ None of the above

EXIT

BACK

NEXT

SAVE AND FINISH LATER



Life experiences or special circumstance Maximum Points for Criterion 3 = 2.5 points	
Disabilities <i>(Same meaning used in Section 2626 of the Unemployment Insurance Code)</i>	Documented disability from college Learning Disability Program or Disability Support Programs & Services
Low family income <i>(Eligibility for, or receipt of, financial aid under a program that may include, but not limited to, a fee waiver from the Board of Governors, the Cal Grant Program, the federal Pell Grant program or CalWORKs)</i>	Proof of eligibility or proof of receipt of financial aid e.g. BOGG fee waiver, Cal Grant, Pell Grant or other federal grant, CalWORKs
First generation to attend college <i>First generation college students are defined by the U.S. Department of Education as "Neither parent had more than a high school education."</i>	Complete the ADN Criterion 3 Supporting Documentation form explaining situation or circumstances. The form can be found at http://www.deltacollege.edu/div/hs/adnhome.html
Need to work <i>(Need to work means student is working at least part-time while completing academic work that is prerequisite for the Nursing Program)</i>	Paycheck stub during period of time enrolled in prerequisite courses or letter from employer (must be on organization letterhead) verifying employment was at least part-time while completing prerequisite courses
Disadvantaged social or educational environment	Participation or eligibility for Extended Opportunity Programs & Services (EOPS)
Difficult personal and family situation/circumstances	Complete the ADN Criterion 3 Supporting Documentation form explaining situation or circumstances. The form can be found at http://www.deltacollege.edu/div/hs/adnhome.html
Refugee status	Documentation or letter from United States Citizens and Immigration Services (USCIS)
Veteran status	Copy of Defense Department Form DD-214, Honorable Discharge required

ADN Criterion 4

Step 13: Foreign Language Proficiency



Delta ID:

Application for Term:

CRITERIA 4: FOREIGN LANGUAGE PROFICIENCY

Maximum Points = 2.5

If you are proficient in more than one of the following languages, check all that apply.

If the language you are proficient in is not listed below, check Other and enter the language.

If you ARE NOT proficient in ANY of the following languages, please check "None of the above"

- ☐ American Sign Language
- ☐ Arabic
- ☐ Chinese, including its various dialects
- ☐ Farsi
- ☐ Russian
- ☐ Spanish
- ☐ Tagalog
- ☐ Other: Please Specify
- ☐ None of the above

EXIT

BACK

NEXT

SAVE AND FINISH LATER

Applicants can earn up to 2.5 points for being proficient in a language other than English.

If you select an option other than **None of the above**, you will only earn 2.5 points regardless of how many languages you are proficient in.



SUPPORTING DOCS NEEDED IF INVITED TO SUBMIT DOCUMENTATION

Official transcript from a U.S. regionally accredited college or university verifying four (4) semesters of the same foreign language with a "C" or better for each semester

– OR –

Official transcript from U.S. high school verifying four (4) years of the same foreign language completed with a "C" or better

– OR –

Complete the **ADN Criterion 4 Supporting Documentation Form – Foreign Language Certification**. The form can be found at <http://www.deltacollege.edu/div/hs/adnhome.html>

ADN Criterion 5

Step 14: TEAS

Delta ID: Application for Term:

CRITERIA 5: Test of Essential Academic Skills (TEAS) Score

Maximum Points = 30

All students applying for the SJDC ADN program must meet the minimum passing score on the Test of Essential Academic Skills (TEAS). *If you have taken the TEAS test more than once, please report the HIGHEST of the first three (3) passing scores.*

Attention Spring 2012 Applicants - Only TEAS Version 5 scores will be accepted

TEAS Version 5: Students without TEAS scores or scores below 62% will be automatically disqualified from the current application period.

San Joaquin Delta College uses the Test of Essential Academic Skills (TEAS).

Effective Spring 2012 only TEAS Version 5 test scores will be accepted.

Have you successfully passed the TEAS test?

☐ Yes ☐ No

Place/Location TEAS was Taken

Date Taken
MM/DD/YYYY

TEAS Score*

Number of times you
took the TEAS test

*For the TEAS Score, please list your adjusted Individual Total Score

SUPPORTING DOCS NEEDED IF INVITED TO SUBMIT DOCUMENTATION

TEAS taken at San Joaquin Delta College – Applicants do **not** need to submit any documentation; your results will be on file.

TEAS taken at any other location – Do NOT send your official TEAS results unless you are invited to submit documentation in support of your application. If documentation is required, you must go to www.atitest.com online store and request that your official TEAS results be sent to the college. Please make sure you request the scores to be sent to: San Joaquin Delta College-ADN (**There are other colleges listed with similar names to San Joaquin Delta College on the list**). There is a fee for this service.

ADN Statements of Understanding

Step 15: READ, SIGN, REVIEW, SUBMIT



Delta ID:

Application for Term:

CONFIRMATION OF APPLICATION

Please read the following information carefully and INITIAL each line to verify that you have: read, understand and agree to each term.

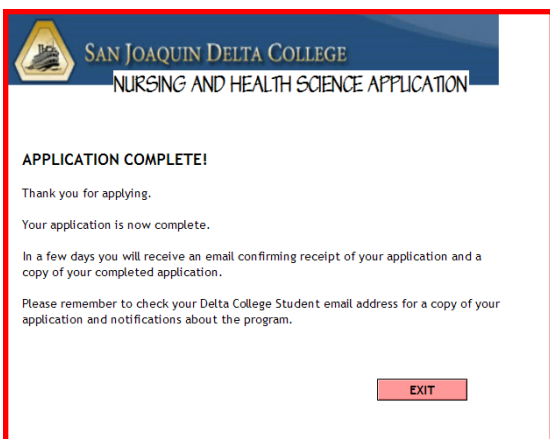
- ☐ 1. I understand that all correspondence regarding this application will be sent to my Delta College student email address.
- ☐ 2. I understand that it is MY RESPONSIBILITY to review and respond to email in a timely manner and within prescribed timelines. I further understand that failure to review and respond to email within prescribed timelines may result in my disqualification from this filing period.
- ☐ 3. I understand that the information I submit in my application is used to determine my eligibility for the program.
- ☐ 4. I understand that if I am invited to submit documentation, that I must provide documentation to support the information included in my application. Failure to submit all required documentation will result in disqualification for the filing period.
- ☐ 5. I have reviewed the admission criteria and read the FREQUENTLY ASKED QUESTIONS on the Nursing webpage.
- ☐ 6. I understand that it is my responsibility to review my application information before I submit this application.
- ☐ 7. I understand that once I SUBMIT this application for processing that no changes can be made.
- ☐ 8. I verify that my application is accurate and complete to the best of my knowledge.

[REVIEW MY APPLICATION](#)

EXIT

BACK

SUBMIT



Prior to submitting this application, applicants will need to read and initial each of the statements indicating their agreement and their understanding to each of the terms stated.

IT IS THE APPLICANT'S RESPONSIBILITY TO REVIEW ALL INFORMATION PRIOR TO SUBMISSION.

APPLICANTS WILL HAVE AN OPPORTUNITY TO REVIEW THEIR APPLICATION BY CLICKING ON THE **REVIEW MY APPLICATION** BUTTON.

After the application is reviewed for accuracy, click the **SUBMIT** button to submit the application.

PLEASE REMEMBER:

Once the application is submitted, you will be not be able to access the application again.

ADN Advanced Placement Option

ADVANCED PLACEMENT OPTION

Based on your previous response, you may be eligible to also apply as an advanced placement into the ADN Program. This option is available for qualified applicants who have a current license as a LVN or a Psychiatric Technician AND who have successfully passed HS 43, Nursing Synthesis.

This option recognizes prior education and allows waiver of one or more courses in the ADN program *should a space become available. Applicants are admitted under this option ONLY IF space becomes available in the program.*

PLEASE NOTE: If you select YES you will only be considered for this option under 2 circumstances:

1. You are selected in the regular pool and decline your space. If you get selected in the regular pool, you are forgoing your opportunity to waive one semester in the ADN program.
2. You were not selected in the regular pool but meet all the minimum requirements AND there are spaces available.

Choosing this option does not guarantee that there will be advanced placement spaces available.

If a space becomes available, are you interested in being considered as an advanced placement?

☐ Yes ☐ No

HS 43: NURSING SYNTHESIS

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR <small>YYY</small>	UNITS	GRADE
HS43 College	HS43 COURSE	HS43 Ter	HS43 Y	HS	HS4

EXIT

BACK

NEXT

Advanced Placement Option

Vocational Nurses (VN) and Psychiatric Technicians (PT) may elect to apply to the ADN Program for Advanced Placement and waive some courses based upon their prior education.

VNs and PTs who apply for advanced placement must:

- 1) Complete all ADN prerequisite courses prior to application, and

- 2) Comply with online application directions found on the Health Sciences

Division website:

<http://www.deltacollege.edu/div/hs/ApplicationProcess>.

Applicants who are eligible for advanced placement will be accepted on a space-available basis

-and-

Must meet all minimum ADN requirements to be considered.

ADN Transfer Option



Important information regarding the ADN Transfer Option

Please note that admittance into the San Joaquin Delta College ADN program is based on space availability. Applicant's are essentially "on call" until a space is available for the transfer student.

Please be advised that in order to be admitted as a transfer student, you must meet the following criteria:

1. Meet all of Delta College's minimum program requirements
2. Be a currently registered student at Delta College
3. Complete the Delta College ADN application
4. Submit all required documentation for the Delta College application
5. Submit all Nursing course transcripts and course descriptions
6. Submit a Letter of Recommendation from your previous Nursing program dean/director
7. Must be in "good-standing" in your previous Nursing program.

If you are able to meet ALL of these "Transfer In" requirements, please check Yes and then click Next.

☐ Yes

be considered for transfer.

Good standing is defined as a student who has earned passing grades in all nursing courses and is eligible to continue or reenter that program.

Students who left their program due to academic failure and/or clinical failure will not be accepted as a transfer student.

Transfer credit shall be given for related or previous nursing education completed within the last five years and found to be equivalent to current course curriculum.

Courses may include state-accredited nursing courses leading to licensure as a Registered Nurse or Armed Services nursing courses.

Only students who leave a nursing program in good standing will

Vocational Nursing & Psychiatric Technician Admission Information

Admission to the VN and PT program is based on a lottery process. The following are the minimum requirements applicants must satisfy in order to be eligible for lottery (random drawing) into the VN and PT programs.

1. Grade of "C" or better in all prerequisite courses (Human Anatomy, Human Development, Introduction to Psychology, and Medical Terminology).
2. Cumulative GPA of 2.5 for all prerequisite courses: Human Anatomy, Human Development, Introduction to Psychology, and Medical Terminology
3. High school diploma or GED

Applicants will be notified via their Delta College email address of their status based on the random drawing (lottery) a few weeks after the application period.

Vocational Nursing & Psychiatric Technician Application

Step 1: Login



To apply to the following programs:

Associate Degree in Nursing - Vocational Nursing - Psychiatric Technician

please log in here:

1. Enter your Delta ID

Your Delta ID is a nine digit number starting with 98. It is assigned to you by the college when you submit your admission application.

Ex: 98XXXXXXXX

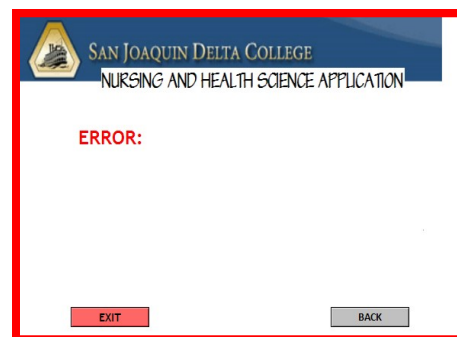
If you do not know your Delta ID, you can retrieve your ID information by clicking:
<http://register.deltacollege.edu/student/login/index.cfm>

2. Enter your Date of Birth

Please enter your date of birth in the following way:
MM/DD/YYYY.

Ex: 01/01/2010

3. Click Login.



PLEASE NOTE:

On each page, if information is missing or invalid, you will be directed to a screen like the one

After you log in into the server, you will be required to log into the application itself.

Log into the application using your Delta College Student ID number and date of birth.

Enter your birth date in the following format: MM/DD/YYYY.

Vocational Nursing & Psychiatric Technician Application

Step 2: Choose program(s) applying for



What program(s) are you applying for?

Please CHECK ALL that apply.

- ☐ Associate Degree in Nursing
- ☐ Vocational Nursing
- ☐ Psychiatric Technician

PLEASE NOTE:

For VN and PT applicants, if you choose to apply for the ADN program, please see Pages 4 through 20 of this manual for information on how to fill out the application.

Please also note that some programs may not be offered in a given year. Please refer to the program's webpage for a program's availability during an application period.

EXIT

NEXT

During the fall terms, applicants have the opportunity to apply for any or all programs open for admissions in one application.

VN and PT applicants that also apply for the ADN program will be navigated to the ADN application first. Upon completion, applicants will then be navigated to the VN and PT application.

Vocational Nursing & Psychiatric Technician Application
Step 3: Verify Contact Information



CONTACT INFORMATION

This is the contact information we have on file for you. Please review the information to make sure we have the most current information.

If you need to change anything, please click in the field and make the appropriate changes.

DELTA ID

DELTA EMAIL ADDRESS

FIRST NAME

LAST NAME

MIDDLE NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER

EXIT

NEXT

After logging into the database, the contact information we have on file for you will appear on this page.

Please verify that the contact information is correct and current. If there is missing or incorrect information, please update this form.

Vocational Nursing & Psychiatric Technician Application

Step 4: Personal Information



PERSONAL INFORMATION

This is the demographic information we have on file for you. Please review the information.

This information is required for reporting to the Program's governing agencies and will not in any way be used to determine your eligibility.

If you need to correct anything, please click in the field and make the appropriate changes.

DELTA ID FIRST NAME LAST NAME

GENDER ☐ F ☐ M

ETHNICITY

- | | |
|--|--|
| <input type="radio"/> American Indian/Alaskan Native | <input type="radio"/> Laotian |
| <input type="radio"/> Asian Indian | <input type="radio"/> Mexican |
| <input type="radio"/> Black/African American | <input type="radio"/> Other Asian |
| <input type="radio"/> Cambodian | <input type="radio"/> Other Hispanic |
| <input type="radio"/> Central American | <input type="radio"/> Other Pacific Islander |
| <input type="radio"/> Chinese | <input type="radio"/> Other/Unknown |
| <input type="radio"/> Filipino | <input type="radio"/> Samoan |
| <input type="radio"/> Guamanian | <input type="radio"/> South American |
| <input type="radio"/> Hawaiian | <input type="radio"/> Vietnamese |
| <input type="radio"/> Japanese | <input type="radio"/> White |
| <input type="radio"/> Korean | |

EXIT

BACK

NEXT

SAVE AND FINISH LATER

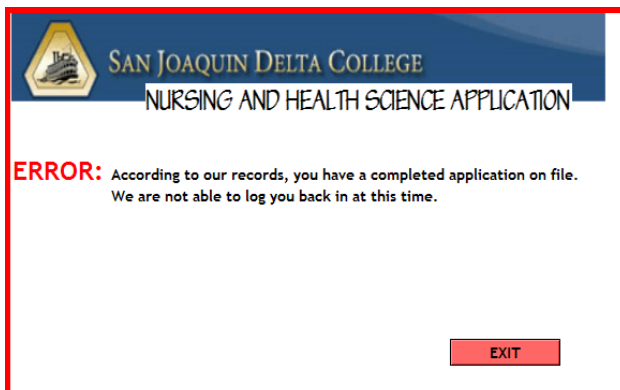
Please verify the information we have on file for you and make changes as appropriate.

Once verified, click NEXT.

PLEASE NOTE: The information on this page is not used to determine your eligibility for the program but is used for reporting purposes only.

IMPORTANT INFORMATION

Once you click NEXT on this page, the system will do a search for your application for the application period. If you have completed an application for the CURRENT application period, you will not be able to navigate any further in the system. Click exit to log out of the system.



Vocational Nursing & Psychiatric Technician Application

Step 5: College Attendance



Delta ID:

Application for Term:

COLLEGE/UNIVERSITY ATTENDANCE

Please list all the regionally accredited United States colleges/universities you have enrolled in courses where you received a letter grade. Use pull down lists to record your information when possible.

PLEASE DO NOT ABBREVIATE THE NAME OF THE INSTITUTION, type out the entire name.

To add more colleges/universities, just press the TAB key on your keyboard past the TERM TYPE column

Previously used
First and Last Names: _____

COLLEGE/UNIVERSITY NAME	COLLEGE CITY/STATE	TERM TYPE

BACK

NEXT

EXIT

SAVE AND FINISH LATER

Please list ALL regionally accredited United States colleges/universities you have attended.

DO NOT ABBREVIATE THE NAME OF COLLEGE

For all colleges and universities you attended, you must also complete the following information:

College City/State

AND

the College's term type

(e.g. semester or quarter system)



SUPPORTING DOCS NEEDED IF INVITED TO SUBMIT DOCUMENTATION

Official transcripts from all colleges/universities listed above.

Note: Students with a degree from a college/university outside the United States must have transcripts evaluated by a National Association of Credential Evaluation Services (NACES) approved independent agency (evaluation must be in a sealed envelope from the agency), demonstrating equivalency to a U.S. degree from a U.S. regionally accredited college.

Vocational Nursing & Psychiatric Technician Application

Step 6: Previous Education/Experience

Delta ID: Application for Term:

VOCATIONAL NURSING/PSYCHIATRIC TECHNICIAN PROGRAM REQUIREMENTS

- This is the application for the Psychiatric Technician Program.

At a minimum, applicants must:

- 1) Be a high school graduate or equivalent

-AND-

- 2) Have taken and passed (Passed grade is A, B, C):

Human Anatomy
Medical Terminology
Human Development
Introduction to Psychology

In order to be eligible for admission into the VN and PT programs, applicants must have a high school diploma or equivalent.

February 2011—At this time only the PT program has space to consider CNA (Certified Nursing Assistant) upgrades. Your certification must be current (as of the application

SUPPORTING DOCS NEEDED IF INVITED TO SUBMIT DOCUMENTATION

Official high school transcripts with completion of 12th grade posted

-OR-

Copy of high school diploma or GED

-OR-

Students who graduated 12th grade from a school outside the United States must have transcripts evaluated by a National Association of Credential Evaluation Services (NACES) approved independent agency (evaluation must be in a sealed envelope from the agency), demonstrating equivalency to 12th grade.

Vocational Nursing & Psychiatric Technician Application

Step 7: Prerequisite Course Information



Delta ID:

Application for Term:

VOCATIONAL NURSING/PSYCHIATRIC TECHNICIAN PREREQUISITE COURSE INFORMATION

For each of the prerequisite courses listed, only list the first passing grade you received.

NOTE: Yellow fields are pull-down lists.

HUMAN ANATOMY - DELTA COURSE EQUIVALENT: BIOL 31 OR BIOL 33

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR YYYY	UNITS	GRADE

HUMAN DEVELOPMENT- DELTA COURSE EQUIVALENT: HS 19 OR FCS 19

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR YYYY	UNITS	GRADE

INTRO TO PSYCHOLOGY- DELTA COURSE EQUIVALENT: PSYCH 1

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR YYYY	UNITS	GRADE

MEDICAL TERMINOLOGY DELTA COURSE EQUIVALENT: HS 36

COLLEGE/UNIVERSITY NAME	COURSE ID	TERM	YR YYYY	UNITS	GRADE

This section is for Prerequisite Course Information.

Enter the information for the FIRST PASSING GRADE received in each prerequisite course section. PASSING LETTER GRADES include A, B, or C.

The minimum cumulative GPA is 2.50 for prerequisite courses.

If you completed a multi-term Human Anatomy/Physiology combination course you must report all sections.

Do not enter grades as having a + or - unless that is how the grade appears on the official transcript.



SUPPORTING DOCS NEEDED IF INVITED TO SUBMIT DOCUMENTATION

For **ALL PREREQUISITE COURSES**, Official transcripts for ALL lower and upper division courses completed at any and all regionally accredited U.S. institutions, regardless of applicability to nursing requirements, are required.

Official transcripts will not be required for courses completed at San Joaquin Delta College.

Prerequisite courses completed at other regionally accredited United States colleges or universities must be equivalent to San Joaquin Delta College courses. For determination of course equivalency, official transcripts AND course descriptions for prerequisite courses will be required.

Course descriptions for prerequisite courses only must accompany the official transcript for the purpose of determining course equivalency. Course descriptions must come from the specific catalog year in which the course was taken and may be obtained from the college catalog where courses were taken or may be available at

<http://www.collegesource.org/>.

Vocational Nursing & Psychiatric Technician Application

Step 8: Other Options (Based on space availability)

Delta ID: Application for Term:

PSYCHIATRIC TECHNICIAN OPTIONS FOR PREVIOUS EXPERIENCE

1. All PT applicants who have a **CURRENT** nursing assistant certificate are eligible for advanced placement into the PT program.
If you currently possess a Nursing Assistant certification would you be interested in this option?

☐ YES ☐ NO ☐ N/A

Please enter your Certified Nursing Assistant (CNA) information below.

NOTE: Your certificate **must be current** in order to be eligible for the PT Upgrade option. Pending certificates are not eligible for the PT Upgrade option.

Certificate #

Expiration Date MM/DD/YYYY

2. PT applicants who have completed the Vocational Nursing or Psychiatric Technician program (fully or partially) are eligible to apply to the PT program as a **TRANSFER**. Applicants may apply for this option only if they were in **GOOD STANDING** with the program. (Current PT/VN Licenses are not required).

☐ YES ☐ NO ☐ N/A

For additional information, please visit <http://www.deltacollege.edu/div/hs/ptfaq.html>

Special admittance into the PT program is available for applicants with specific former education.

1. Currently certified nursing assistants are eligible for **advanced placement** into the PT program.

2. Applicants who have previously completed (fully or partially) another PT or VN program are eligible to apply to the PT program as a **TRANSFER**.

EXIT

BACK

NEXT



SUPPORTING DOCS NEEDED IF INVITED TO SUBMIT DOCUMENTATION

ADVANCED PLACEMENT OPTION: Applicants must be able to provide a copy of your **CURRENT** nursing assistant certification. Your certification **MUST** include your Certification Number and Expiration Date.

TRANSFER OPTION:

1. Applicants must be able to provide **copies of official transcripts** for ALL courses completed in their former PT or VN program. In addition, **course descriptions** must be provided for these courses in order to determine course equivalency.

2. To verify "good-standing", applicants must be able to provide a letter of recommendation from their former program's dean/director.

VN and PT Application - Statements of Understanding

Step 8: READ, SIGN, REVIEW, SUBMIT



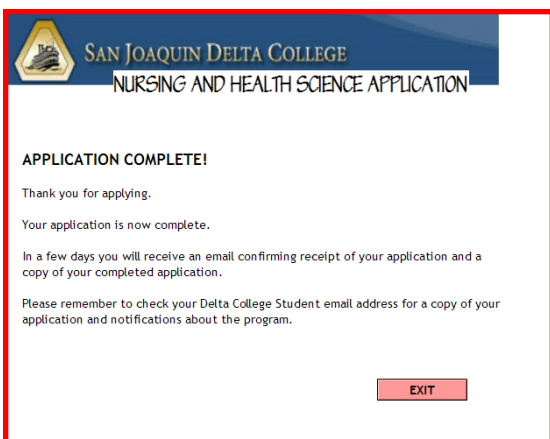
Delta ID:

Application for Term:

CONFIRMATION OF APPLICATION

Please read the following information carefully and INITIAL each line to verify that you have: read, understand and agree to each term.

- ☐ 1. I understand that all correspondence regarding this application will be sent to my Delta College student email address.
- ☐ 2. I understand that it is MY RESPONSIBILITY to review and respond to email in a timely manner and within prescribed timelines. I further understand that failure to review and respond to email within prescribed timelines may result in my disqualification from this filing period.
- ☐ 3. I understand that the information I submit in my application is used to determine my eligibility for the program.
- ☐ 4. I understand that if I am invited to submit documentation, that I must provide documentation to support the information included in my application. Failure to submit all required documentation will result in disqualification for the filing period.
- ☐ 5. I have reviewed the admission criteria and read the FREQUENTLY ASKED QUESTIONS on the Nursing webpage.
- ☐ 6. I understand that it is my responsibility to review my application information before I submit this application.
- ☐ 7. I understand that once I SUBMIT this application for processing that no changes can be made.
- ☐ 8. I verify that my application is accurate and complete to the best of my knowledge.

[REVIEW MY APPLICATION](#)
[EXIT](#)
[BACK](#)
[SUBMIT](#)


Prior to submitting this application, applicants will need to read and initial each of the statements indicating their agreement and their understanding to each of the terms stated.

IT IS THE APPLICANT'S RESPONSIBILITY TO REVIEW ALL INFORMATION PRIOR TO SUBMISSION.

APPLICANTS WILL HAVE AN OPPORTUNITY TO REVIEW THEIR APPLICATION BY CLICKING ON THE **REVIEW MY APPLICATION** BUTTON.

After the application is reviewed for accuracy, click the **SUBMIT** button to submit the application.

PLEASE REMEMBER:

Once the application is submitted, you will be not be able to access the application again.

Nurse Assistant Training Program Application Information



Nurse Assistant Training Program Application

EXIT

This application will be available

In order to be eligible for admittance into the Nurse Assistant Training Program you must be:

- * At least 16 years of age
- * Be a registered student at Delta College
- * Have a valid social security number (required for background clearance)

Effective Spring 2010; admission into the Nursing Assistant Training Program will be based on a RANDOM DRAWING.

Upon completion of this application, you will be assigned an APPLICATION NUMBER that will be put into a random drawing during the week of

CONTINUE

The Nurse Assistant Training program is a 6-week course that based on a lottery admission process.

Applicants are eligible for the program if they meet the minimum requirements listed on above.

Applicants will be notified via their Delta College email address of their status based on the random drawing a few weeks after the application period.

Nurse Assistant Training Program Application

Step 1: LOGIN



Nurse Assistant Training Program Application

To complete an application for the Nurse Assistant Training Program, please log in here:

EXIT

1. Enter your Delta ID

Your Delta ID is a nine digit number starting with 98. It is assigned to you by the college when you submit your admission application.

98XXXXXXXX
No dashes

If you do not know your Delta ID, you can retrieve your ID information by clicking:
<http://register.deltacollege.edu/student/login/index.cfm>

2. Enter your Date of Birth

Please enter your date of birth in the following way:
MM/DD/YYYY.

3. Click Login.

LOGIN

PLEASE NOTE:

On each page, if information is missing or invalid, you will be directed to a screen like the one above.

After you login into the server, you will be required to log into the application itself.

Login into the application using your Delta College Student ID number and date of birth date.

Enter your birth date in the following format: MM/DD/YYYY.

Nurse Assistant Training Program Application Step 2: Contact Information



SAN JOAQUIN DELTA COLLEGE

Health Sciences Division - Nursing Assistant Program Application System

EXIT

This is the contact information we have on file for you.
Notifications by the Health Sciences Division regarding your application
status will be mailed to your DELTA EMAIL ADDRESS below.

FIRST NAME

LAST NAME

DATE OF BIRTH

DELTA ID

EMAIL ADDRESS

To submit an application to the Nursing Assistant Program, please click on
START APPLICATION.

START APPLICATION

Once logged in, please review the contact information we have on file for you for accuracy.

If the information is incorrect or missing, please update the information by clicking on the field that
needs to be updated. Once reviewed for accuracy, click START APPLICATION to begin.

Nurse Assistant Training Program Application Step 3: Statements of Understanding



Nurse Assistant Training Program Application

EXIT

The Nurse Assistant Training Program is designed to qualify the student for state certification. Preparation includes classroom instruction and supervised clinical training within the guidelines set by the State Department of Health Services.

STATEMENTS OF UNDERSTANDING

You must initial after each of the following statements to show that you have read and agreed to each of the terms written in each statement and then click SUBMIT APPLICATION to complete the application process.

- ☐ I am applying to the Nursing Assistant Training program at SJDC for the application period:
- ☐ I am at least 16 years of age.
- ☐ I am currently a registered student at San Joaquin Delta College.
- ☐ I understand that I must have a valid Social Security Number.
- ☐ I understand that the Nurse Assistant Training Program is now based on random selection of my application number.
- ☐ I understand that all correspondence related to my application will be sent to my Delta College email: and that it is MY RESPONSIBILITY to check my email and respond accordingly.

SUBMIT APPLICATION

Finally, please read and initial each statement to complete your application. Click submit once you have read and initialed each item.



Speech Language Pathology Assistant Application

Step1: Login

Header

SAN JOAQUIN DELTA COLLEGE
SPEECH LANGUAGE PATHOLOGY ASSISTANT APPLICATION

Welcome to the Speech, Language, and Pathology Assistant Program Application.

There are no prerequisite courses to be completed prior to applying to the program at this time.

Students interested in pursuing a SLPA degree need to complete a program application prior to enrolling in COMM DIS 003, Therapy Analysis and Fieldwork or higher courses in the program.

All applicants must be a current Delta College student in order to access the SLPA application.

Student ID

Delta.id

Ex: 98XXXXXXX

Date of Birth

Date Of Birth

Ex: MM/DD/YYYY

START

After you login into the server, you will be required to log into the application itself:

SLPA Application

Log into the application using your Delta College Student ID number and date of birth.

Enter your birth date in the following format: MM/DD/YYYY.

If you are not currently a registered student or if you entered your Delta ID or date of birth incorrectly, you will get an error message.

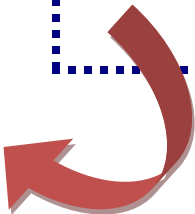
SAN JOAQUIN DELTA COLLEGE
SPEECH, LANGUAGE, & PATHOLOGY ASSISTANT APPLICATION

ERROR

The following error(s) occurred:
Invalid Delta ID Number and/or Date of Birth (Format or Incorrect Combination of Delta ID and Date of Birth)
OR
You do not have an active and current application on file with the College.

EXIT

BACK



Speech Language Pathology Assistant Application

Step 2: Contact Information

SAN JOAQUIN DELTA COLLEGE
SPEECH LANGUAGE PATHOLOGY ASSISTANT APPLICATION

EXIT

DELTA ID

DELTA EMAIL ADDRESS

FIRST NAME

LAST NAME

DATE OF BIRTH

PLEASE COMPLETE THE FOLLOWING CONTACT INFORMATION

PERSONAL EMAIL ADDRESS

MAILING STREET ADDRESS

CITY

STATE

ZIP CODE

HOME PHONE

CELL PHONE

EMERGENCY CONTACT PHONE

NEXT

After logging in you will be navigated to a page to complete your contact information.

If you do not fill out an address and contact phone number, you will see the following error.



Currently, for all students interested in taking Comm Dis 3 or 9 you will need to complete an application in order for the Health Science office to send you a course code to register for the class.

This application should only be completed once.

SAN JOAQUIN DELTA COLLEGE
SPEECH, LANGUAGE, PATHOLOGY ASSISTANT APPLICATION

EXIT

ERROR
Please complete the fields for your address and home phone number.

BACK

Speech Language Pathology Assistant Application

Step 3: Demographic Information

SAN JOAQUIN DELTA COLLEGE

SPEECH LANGUAGE PATHOLOGY ASSISTANT APPLICATION

EXIT

The information collected on this page is for reporting program planning purposes only.

It will not be used to determine your eligibility into the program.

Ethnicity

Please check all that apply.

- | | |
|---|---|
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Laotian |
| <input type="checkbox"/> Asian Indian | <input type="checkbox"/> Mexican |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Other Asian |
| <input type="checkbox"/> Cambodian | <input type="checkbox"/> Other Hispanic |
| <input type="checkbox"/> Central American | <input type="checkbox"/> Other Pacific Islander |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Other/Unknown |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Samoan |
| <input type="checkbox"/> Guamanian | <input type="checkbox"/> South American |
| <input type="checkbox"/> Hawaiian | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Japanese | <input type="checkbox"/> White |
| <input type="checkbox"/> Korean | |

Gender

☐ Female ☐ Male

What language do you speak at home?

BACK

NEXT

Speech Language Pathology Assistant Application

Step 4: Academic Information

SAN JOAQUIN DELTA COLLEGE
SPEECH LANGUAGE PATHOLOGY ASSISTANT APPLICATION

EXIT

The information collected on this page is for reporting purposes only.

Please complete the following information to complete your application.
If a question does not apply, please leave it blank.

1. Please check the course(s) you will be enrolling in Fall 2011

☐ Comm Dis 003
☐ Comm Dis 005
☐ Comm Dis 007
☐ Comm Dis 009

2. Highest College Degree Earned:

☐ AA/AS ☐ None of the above
☐ BA/BS
☐ MA/MS
☐ Doctorate

3. College Degree Earned At:

4. Degree Major:

5. Term/Year Degree was Earned:

BACK

NEXT

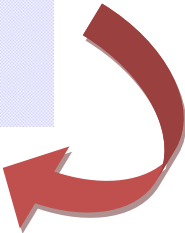
A response is required for Questions 1 and 2. If you are missing information you will be directed to the following error page.

ERROR

Missing information.

You must answer Questions 1 and 2.

Questions 3 - 5 require a response if you checked any other option other than "None of the above"



Speech Language Pathology Assistant Application Step 5: Statement of Understanding

I must:

- Be a student at San Joaquin Delta College
- Be at least 17 years of age and have satisfied the College's assessment placement test requirements.
- Read the San Joaquin Delta College Catalog sections pertaining to academic regulations and graduation requirements.

I understand that this program consists of coursework and also clinical practice.

- Clinical classes require time in the field at off campus locations and students in the SLPA program must provide their own transportation to these sites.
- The Speech Language Pathology Assistant Program at San Joaquin Delta College does not guarantee practicum placement opportunities.
- Opportunities are offered as available determined by number of students and site availability.

To maintain compliance with regulatory agencies, Clinical fieldwork sites may require background clearance prior to admittance to the facility.

Students who are unable to be placed will be withdrawn from the program due to the inability to meet the program requirements.

I understand that the following are required costs associated with general public health and safety and these costs include a:

- Tuberculosis (TB) test
- Annual Physical Examination
- Current Immunizations
- Professional Liability Insurance
- Background check
- Drug test

These costs are MY responsibility for participating in the program. (Specific instructions are provided by the Health Science Division Office once the student has been accepted into the program.)

I understand that in the performance of my duties as an SLPA student at San Joaquin Delta College, I shall hold ALL client information confidential. I understand that any violation of client confidentiality will result in dismissal from the program.

All SLPA students must be able to demonstrate the following ESSENTIAL PHYSICAL REQUIREMENTS to successfully meet the clinical objectives:

1. Operate a computer terminal and other office equipment
2. Lift at least 25 pounds
3. Sit or stand for extended periods of time
4. Verbally communicate with patients/students
5. Complete visual assessments of patients/students
6. Ability to see pictures, read words and distinguish colors on therapy materials with or without visual aids
7. Have hearing acuity sufficient to understand speech at normal classroom/therapy room levels and to distinguish correct speech sound productions.

PLEASE INITIAL HERE ----->
TO CONSENT TO THE STATEMENT ABOVE

Applic Initial Date
Date Initial

BACK

SUBMIT

You must initial below at the bottom of the statement in order for the system to mark your application as complete.

If you try to submit your application without initialing that you agree and understood the statement you will be directed to an error page.

Print this page for your records.

Student ID name_last name_first
DELTA ID# LAST NAME FIRST NAME

Thank you!

Your application has been submitted at: Completed App

You will be receive additional information regarding the program via your Delta College email address by the end of the term.

HEALTH SCIENCE APPLICATIONS ONCE APPLICATION IS SUBMITTED

For all applications to the Health Science Division, all completed applications will be emailed to your Delta College email address 1-2 weeks after you submit it.

Please remember, that all correspondence regarding the status of your application will be emailed to your Delta College email address, so be sure to check that email address for notifications.

For programs that require submission of supporting documentation, you will be notified via your Delta College email address about what types of supporting documentation will be accepted for verification of your application information. **However, information regarding what acceptable forms of supporting documentations required can be found on the Health Sciences Division webpage.**

If you are selected for admission into any of the programs, IT IS YOUR RESPONSIBILITY TO SUBMIT THE APPROPRIATE FORMS OF SUPPORTING DOCUMENTATION AND MEET ANY ADDITIONAL REQUIREMENTS STATED BY THE PROGRAM BY THE DEADLINES POSTED ON THE WEBSITE.



Health Science Applications User Guide

San Joaquin Delta College

Health Sciences Division

<http://www.deltacollege.edu/div/hs/adnhome.html>

CONTACT INFORMATION:

Health Sciences Division
209-954-5454

Associate Degree in Nursing
hs-adn@deltacollege.edu

Vocational Nursing/Psychiatric Technician
hs-vnpt@deltacollege.edu

For questions about the application, please send an email to:
healthscienceapps@deltacollege.edu

Dean of Health Sciences Division; Karen Ippolito, EdD, FNP

