NURSING PROGRAM REINSTATEMENT APPLICATION
Dear Nursing Student,

Thank you for your interest in returning to our nursing program. In our attempt to help you succeed, we are requesting submission of a Letter of Intent to accompany your reinstatement application. This Letter should address answers to the following questions, which will help you and the faculty to evaluate your request.

1. What personal and/or academic factors led to your previous withdrawal/or failure?

2. What changes, personal and/or academic, have occurred that will foster your success if reinstated?

3. Considering the above mentioned changes, what are your personal and academic goals for correcting factors that have proven detrimental to your success in prior nursing classes?

The faculty at Coastal Alabama genuinely desire to see you succeed in this program and will go to great lengths to foster your education. Success, however, ultimately depends on you and your commitment. Please attach your Letter of Intent to your nursing application and submit to the appropriate nursing department.

We look forward to hearing from you. Please feel free to call for further questions at 251 580-2257.

Sincerely,

Jean D. Graham, MSN, ANP, CNOR
Director of Nursing and Allied Health
COASTAL ALABAMA NURSING REINSTATEMENT APPLICATION

Course(s) to be reinstated: __________________________

Campus attended: Bay Minette ___ Fairhope ___ Brewton ___ Monroeville ___ Thomasville ___

Application Deadline: Due within 48 hours of posting of the last final grade for semester classes in order to be considered for the following semester. All other reinstatement requests must be received prior to the last 3 weeks of any one semester.

I. PERSONAL DATA

Date: ______________

Last Name: _______________________ First: ____________________ MI: ___ Maiden: ___________

Social Security Number: ____________________________ Student Number: _________________

Mailing Address: __________________________________________

City: _____________________ State: ___ Zip Code: _________ Telephone: (___)_____________

Home e-mail address: _________________________ College e-mail address: _______________________

Emergency Contact: ______________________________ Telephone: (___)_____________

The following policies apply to reinstatement requests:

1. All nursing program admission standards at time of reinstatement must be met.

2. Students must have a 2.0 cumulative GPA at the current institution for consideration of reinstatement.

3. Students must apply for readmission to the college if not currently enrolled. College readmission must be accomplished by published deadlines.

4. CPR, TB skin tests, Hep B vaccination, and Flu vaccination must be updated and submitted with this application.

5. Students who have been out of the nursing program for one or more semesters will need to demonstrate the following competencies as appropriate to the course(s):
   a. Pass a comprehensive written exam at 75% within two attempts
   b. Demonstrate acceptable skills proficiency for the following within two attempts:
      Head to toe assessment
      Medication administration by all legal routes for nurses
      Vital signs check and interpretation
      IV therapy (IV start, IV administration of a medication, identification of complications)
      Sterile procedure (dressing change, tracheostomy suction, and/or urinary catheterization)
I understand that completion of this application does not in itself grant reinstatement to the Nursing Program. A student may be reinstated to the nursing program only one time. Reinstatement is not guaranteed due to limitations in clinical and/or classroom space. All information must be submitted by the appropriate deadline or the application will be considered incomplete. It is recommended that applicants check with the Admissions Office, at (251) 580-2111, to confirm ACTIVE STATUS and confirm ALL TRANSCRIPTS are on file and up to date.

_________________________________________________________  ______________________________
Applicant’s Signature                                      Date

Submit this reinstatement application and letter of intent to the appropriate campus.

Bay Minette: Coastal Alabama Community College
             Nursing Department
             1900 Hwy 31 South
             Bay Minette, AL 36507
             (Physical location is the same as the mailing address)

Brewton: Coastal Alabama Community College
          Nursing Department
          PO Box 958
          Brewton, AL 36427
          (Physical location is 220 Alco Drive)

Monroeville: Coastal Alabama Community College
             Nursing Department
             PO Box 2000
             Monroeville, AL 36460
             (Physical location is 2800 South Alabama Ave)