Los Angeles Valley College

Allied Health Science Department

Application for Registered Nursing Program

For the Spring 2024 Semester

Please ensure that all fields are filled out or we may have to consider your application form incomplete.

# Personal Information

Social Security Number: Click or tap here to enter text.

Student ID Number: Click or tap here to enter text.

Are you a Veteran of the US Armed Forces:  Yes  No

LACCD Email Address: Click or tap here to enter text.

Other Email Address: Click or tap here to enter text.

Legal Last Name: Click or tap here to enter text.

Legal First Name: Click or tap here to enter text.

Middle Name: Click or tap here to enter text.

Mother’s Maiden Name: Click or tap here to enter text.

List any Legal Previous Names Used: Click or tap here to enter text.

Address: Click or tap here to enter text.

Cell Phone Number: Click or tap here to enter text.

Home Phone Number: Click or tap here to enter text.

Birthdate: Click or tap here to enter text.

Birthplace/Country:Click or tap here to enter text.

# Citizenship Status (Select One)

U.S. Citizen

Permanent Resident

Temporary Resident/Amnesty

Refugee/ Asylee

Student Visa (F-1 or M-1)

None Apply

DACA Recipient

Other: Click or tap here to enter text.

# Gender (Select One)

Female

Male

Non-binary

Decline to state  
 Other: Click or tap here to enter text.

# Ethnic Group (Select One)

Black / African American

American Indian or Alaska Native

Asian  
 White / Caucasian

Hispanic or Latino

Middle Eastern or North African

Native Hawaiian or Other Pacific Islander

Other: Click or tap here to enter text.

# Colleges and Universities Attended

|  |  |  |
| --- | --- | --- |
| Please List All Colleges/Universities Attended | What semesters/years have you attended (example: Fall 2020 – Spring 2021) | Degrees |
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Do you have a LVN License:  Yes  No

Have you taken the ATI TEAS Version 7 Exam:  Yes  No

If “YES”, Did you pass on your first attempt?  Yes  No

I hereby certify that the above information is true and correct to the best of my knowledge. I understand that any missing information may render my application incomplete:  Yes  No

I hereby certify that I have correctly submitted all updated official transcripts of my classes as recent as Summer 2023:  Yes  No