Licensed Practical Nursing Applications
For the <u>Fall 2026</u> Class

Application for the <u>Fall 2026</u> class should be completed and returned to Giles County Technology Center by March 27, 2026 to be notified of the testing session for the entrance exam. The entrance exam is the Test of Essential Academic Skills (TEAS). Testing for applicants will begin in March/April 2026. Individuals with an application on file will receive notice when the TEAS test will be administered. All students are required to take the TEAS test before admission. However, if you have taken the test within the last 3 years at an alternate site and can submit a copy of your scores, they will be acceptable.

Applications are accepted year- round for the Practical Nursing program.

Information about the TEAS assessment and study materials is included at the end of this application packet. There is a $70.00 charge for taking the TEAS test.

Giles County Technology Center
Practical Nursing Program
Application Process

Read the directions on this cover sheet carefully so you will submit a successful application packet. There are several documents that are required in the application packet for an individual to be considered for admission into the Practical Nursing Program. A description of each document and directions for completing it follow.

APPLICATION FOR ADMISSION: The *Application for Admission* is included with this cover sheet and collects personal information including education/training, work history and references. The applicant must also answer three questions regarding criminal convictions, medical/physical/ chemical dependency and licensure in a health care field. The questions are similar to those asked on the application for licensure exam by the Virginia Board of Nursing. Directions are provided on the application and should be followed closely. An application with missing data will be considered incomplete and discarded.

TRANSCRIPTS: The minimum educational level of achievement for admission is a high school standard diploma or GED credential. After requesting a transcript from a school, you should check with Giles County Technology Center to see if it arrived. Transcripts usually arrive 7 – 10 days after you submit a request to a school.
If you graduated from high school: An official high school transcript must be requested by the applicant to be submitted to Giles County Technology Center.
If you obtained a GED credential: A copy of the original GED certificate or copy of the official notice of test results must be submitted to Giles County Technology Center.
All other schools or colleges attended after high school: An official transcript from each school or college must be requested by the applicant to be submitted to Giles County Technology Center.

BACKGROUND VERIFICATION: Each person seeking admission to the Practical Nursing Program must authorize a *background verification* through a company approved by Giles County Technology Center. The background verification will include criminal history check, employment history verification, review of civil records and name verification. The report will be submitted directly to Giles County Technology Center from the company. The information will be provided to only those applicants that receive a passing score on the entrance exam.

DRUG SCREENING: If accepted, students will be subject to drug screening at an unannounced time. Although the use of marijuana has been legalized in Virginia, it has not been accepted by our clinical sites. Therefore, the drug screen will include marijuana testing and students will be dismissed if it shows in the drug screen.

For additional information or assistance in completing the application form contact Giles County Technology Center at 540-921-1166.

Mailing address for submitting forms:
Office of Giles County Technology Center
1827 Wenonah Ave.
Pearisburg, VA 24134

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Giles County Technology Center
1827 Wenonah Avenue
Pearisburg, Virginia 24134
Phone 540-921-1166
Fax 540-921-3906

Practical Nursing Program
Application for Admission

The Application for Admission must be completed in black or blue ink or typed. Applications completed in pencil or any other color ink will be discarded.

All questions must be answered. If an application is received with missing information the application will be considered incomplete and may be discarded by the school.

This application is only one of several documents that are part of a complete application packet. All documents must be received by the Office of Giles County Technology Center before an applicant will be considered for admission to the program.

Date of Application: _____

Full Legal Name: _____

Date of Birth: _____   Gender: _____ Female   _____ Male

Mailing Address: _____

_____

Telephone Number: Home: _____Work:_____

Cell Phone Number: _____

Email Address: _____

Emergency
Contact - Name: _____Phone Number: _____

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For Office Use  -- Date Materials Received

Application: _____          HS Transcript/GED Certificate:
_____
Background verification: _____          Other
Transcripts:_____
Entrance Exam: _____          P / F & Score:_____
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Education/Training Data

Enter high school information even if you did not finish high school but later obtained a GED credential. If you have a GED credential provide information on where and when the GED was obtained.

High School Name & Location	Dates Attended	Graduated? (YES or NO)	If you did not complete high school at what grade level did you stop attending school?

City/State where GED Exam Was Taken	Date GED Obtained		

List all schools you have been officially enrolled in as a student whether or not a semester was completed or a degree earned. Failure to comply will void the application. (If additional space is needed attach a page to the application.)

School/College Name & Location	Dates Attended	Date Completed	Describe course of study, degree/diploma earned. If none earned explain why.

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Have you ever been dismissed, suspended or withdrawn as a student by a school (including high school)?
      NO   **YES**   If yes give the name of the school/training program, the reason and the date.

_____

_____

Have you ever been enrolled as a student in any nursing preparation program and not complete it?   **NO**   **YES**
     If yes, list the school in this section and describe the reason that you did not complete the program.

_____

_____

EMPLOYMENT DATA

Begin with the most recent employment. If additional space is needed complete and attach as an additional page to the application.

Business/Agency of Employment, Address, Phone and Name of Immediate Supervisor	Dates of Employment	Position Held	Reason for Leaving

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REFERENCE DATA

Two references are to be listed. Acceptable references are current or former employers, supervisors, teachers, ministers or community leaders. Do not list friends or relatives as references. Also please obtain a professional reference letter. You can use one of the people listed above. Please have the letter sent to: Connie Blevins   Giles County Technology Center….1827 Wenonah Avenue Pearisburg, VA 24134

Name	Relationship to Applicant	Mailing Address	Telephone Number

List any community organizations that you are now or have been involved with as a volunteer or member and describe any activities you assisted with. (May attach an additional page if more space is needed.)

_____

_____

_____

Briefly describe your reasons for choosing nursing and specifically this program. (May attach an additional page if needed.)

_____

_____

_____

_____

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Do you have any medical, physical, chemical or any other dependency condition which could interfere with your current ability to practice nursing? _____**NO** _____ **YES**
If yes provide explanation:

_____
_____
_____
_____

****

Have you ever been convicted of, pled guilty to, or pled Nolo Contendere to the violation of any federal, state or other statute or ordinance constituting a felony or misdemeanor? Include any charges currently pending against you but final disposition has not been determined.   (Include all traffic violations including convictions for driving under the influence.   Report minor speeding tickets for only the past two years.)

_____**NO** _____**YES**   **If yes provide all information below.**

DATE OF OFFENSE: _____

CHARGE(S):_____

_____

MISDEMEANOR OR FELONY (Circle All That Apply)

COURT LOCATION: _____

FINAL DISPOSITION: _____

_____
If there are additional incidents to be reported on this application attach an additional page and include all information as listed above for all reportable offenses.

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HEALTH CARE LICENSE INFORMATION
Have you ever had action taken against you (terminated or asked to resign), or been denied a license or certification in a health-related field in any jurisdiction?
_____**YES** _____ **NO**
If yes provide an explanation on a separate page attached to this application. If you answer yes and do not provide an explanation, <u>or you answer no and it is found that you have had action taken against you or been denied a license or certification,</u> the application will be considered incomplete and may be discarded by the school.

Provide the following information for current and past health care licenses that you have held. You may attach an additional page for information on any additional licenses.

Professional License Number: _____ **State issued:** _____
Status of license: Current ___ **Lapsed** ____ **Inactive** ___

Professional License Number: _____ **State issued:** _____

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Status of license: Current ___ Lapsed ____ Inactive ___

APPLICANT AGREEMENT
TO PROGRAM REGULATIONS

I understand that the school reserves the right to require a drug/alcohol screening at the expense of the applicant/student as part of the application process, as a requirement for clinical instruction and at the discretion of the Giles County Technology Center administration and nursing staff if at any time they have reasonable suspicion an applicant/student may be impaired.

I understand that a Background Verification check is a required document in the application process and the report must be received prior to the school considering an applicant for admission. I understand I am responsible for the cost of the background verification.

I certify that the responses/explanations to each and all of the questions/statements on this application are true. I understand that falsification or not providing all information as requested in this document or any document associated with my application process will result in non-admission to or dismissal from this program.

I understand that should any of the information on this application form change after it is submitted I am required to send written notification to the office of Giles County Technology Center.   I understand that not providing information that has changed since the application was submitted will result in non-admission to or dismissal from this program.

I understand upon notification that I have been accepted to enroll in the Practical Nursing Program a $200 non-refundable tuition payment is required by a date stated in the acceptance letter. I understand and agree to the condition that if I should decide not to enter the program for any reason I forfeit the $200 tuition payment.

I understand all textbooks, materials, supplies and technology resources that are purchased through Giles County Technology Center are my property and Giles County Technology Center does not refund or purchase back any of these items even if I decline to enter the program before the first day of class.

Print Full Name: _____

Signature and Date:_____

Criteria for Admission
Giles County Technology Center School of Practical Nursing

1. Adult and high school senior applicants must have a complete and up-to-date application packet on file with the school. The following elements are required in the application packet:
    a. An Application for Admission with all statements/questions answered;
    b. Background Verification Check completed;
    c. High School transcript or copy of GED certificate or test results sent to Giles County Technology Center;
    d. Transcripts from other schools or colleges attended;
    e. Acceptable score on the entrance exam.
2. Adults and high school seniors must take the entrance exam and receive an acceptable score to be considered an applicant for the program.
3. Adults and high school seniors must furnish acceptable reference data.
4. For adult applicants the Background Verification report shall indicate an applicant that is respectful of rules, regulations, people and property. When the high school senior turns 18, they will be given a link for obtaining a background check.
5. Adult and high school senior applicants must attend an interview/orientation to be held late May or early June of each year.
6. Adult and high school senior applicants must demonstrate commendable standing within the community and exhibit behaviors that are acceptable to the nursing industry.
7. Adult and high school senior applicants must complete a satisfactory physical examination prior to actual enrollment in the program.
8. Even though Virginia has legalized Marijuana use, most of our clinical sites and this school does not allow marijuana use. Marijuana usage appearing on a drug screen or any other way will be grounds for removal from the program.

All criteria being equal Giles County residents are offered positions in the program first over out of county residents.

Non-Discrimination Policy
Giles County Public Schools does not discriminate on the basis of race, color, national origin, sex, disability or age in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups. The following persons have been designated to handle inquiries regarding the non-discrimination policies:
Assistant Superintendent or Special Education Director
Giles County Public Schools, 151 School Road, Pearisburg, VA 24134
540-921-1421 x 16

Giles County Technology Center
Practical Nursing Program Costs
2026-2028

Tuition payments: Upon receiving notification for admission to the program, the applicant will be required to pay a <u>$200 non-refundable deposit</u> that will be applied toward the total tuition cost. This will be due in July sometime. You will get a date when you attend orientation if selected for the program. Tuition will be due on the first day of the new semester. (August and January of each year). (* - vary) All fees are the best estimate at this time.

<u>**First Semester – August 2026**</u>
Tuition - $600.00
Textbooks – ($ 65.00 Anatomy & Physiology)
Name Pin - $5.00 ($5.00 – Replacement fee)
*Stethoscope (depends on the quality of the stethoscope) $30.00 – $100.00
*School Uniform/Watch with Second Hand - $100.00
*Nursing Shoes - $65.00
Liability Insurance - $25.00
Random Drug Screen - $75.00
Technology Resource Fee - $300.00 (includes online Fundamentals text)
CPR – $10.00
Parking Fee – First Year -- $20.00

<u>**Second Semester – January 2027**</u>
Tuition - $600.00
Textbooks - $80 (March)
Technology Resource Fee - $150.00

<u>**Third Semester – August 2026**</u>
Tuition - $600.00
Textbooks – ($115 – June/July - $85.00 – Dec)
Liability Insurance - $25.00
*Updated PPD - $25.00
Technology Resource Fee - $300.00 (Includes online Medical Surgical text)
Parking Fee – Second Year -- $20.00

<u>**Fourth Semester – January 2028**</u>
Tuition - $600.00
Textbooks - $65.00 (March)
*Cap - $23
*Graduation Pin & Lamp - $60.00
Technology Resource Fee - $150.00
Archer NCLEX Review - $140.00

At the end of the 4th Semester you will be expected to apply for the Practical Nursing License through the Board of Nursing. Virginia students – the cost is $170.00. For West Virginia students, the cost is $70.00. You will also need to sign up for the NCLEX at this time through the NCSBN. The cost is $200.00. You will schedule the date for testing after you get your Authorization to Test (ATT). You will also be expected to purchase the Archer NCLEX PN Review in May $140.00.

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TEAS V INFORMATION

The Test of Essential Academic Skills (TEAS V) is a multiple-choice assessment of basic academic knowledge in reading, mathematics, science and English and language usage. The objectives assessed on the TEAS V exam are those which nurse educators deemed most appropriate and relevant to measure entry level skills and abilities of nursing program applicants.

Composite scores, as well as several sub-scores, are computed in each of the four content areas to assess specific content comprehension. Educators, as well as those completing TEAS V, will have available the reports reflecting individual results.

ATI Testing sponsors the TEAS V assessment and provides a study manual and online practice assessments. For more information about their study materials you may visit their website.
https://www.atitesting.com/teas-prep

Products that may be purchased to prepare for TEAS V

Giles County Technology Center does not require or endorse use of these supplemental materials. It is up to the applicant if they wish to purchase and use these study materials.

Learning Strategies: Your Guide to Classroom and Test-Taking Success
This comprehensive book is designed to help students develop learning and test-taking strategies. It is intended for students preparing to take entrance exams and beginning post-secondary education.

TEAS V Online Practice Assessments: There are two different versions of the online practice assessments available. Each on-line assessment has 150 questions, patterned after the original TEAS V exam and is designed to give a sense of what to expect in both content and format.

TEAS V preparation materials may be ordered from:
www.Amazon.com; or
https://www.atitesting.com/teas-prep or at your local book stores.

Of course – you can google for help. Lots of people have posted information that may help for free!