MONTSERRAT COMMUNITY COLLEGE

APPLICATION FOR ADMISSION
NURSING EDUCATION

BEFORE PROCEEDING TO FILL OUT YOUR APPLICATION:

1. Review Programme Catalogue on our website before making programme selections.
2. Review the checklist on page 4 to ensure that all relevant documents are attached before submitting.
3. Have you ever applied to the Montserrat Community College before?   Y   N   If Yes, in what year?
4. If you are a returning student, kindly provide your Student ID Number:

SECTION A: PERSONAL DATA

Name:

Title   Last Name   First Name   Middle Name(s)

Gender: M   F   **Date of Birth:**   **Marital Status:**   **Current Age:**

                                          dd   mm   yyyy

Citizenship: British/ Montserratian   Caricom   OECS   Other:

Residency Certificate Number & Date (if applicable):   Country of Birth:

Address: Physical Address:

Mailing Address (if different):

Contact: Home Phone: Cell Phone: Email:

Social Networks: Facebook: Twitter: Other:

Other: Native Language: Religion:

Emergency Contact Information (Who Should We Call In An Emergency?)

Title   Last Name   First Name   Relationship

Home Phone   Cell Phone   Work Place   Email

Address:

SECTION B: MEDICAL INFORMATION.
IT IS VERY IMPORTANT THAT YOU ANSWER CAREFULLY
TO ENSURE YOUR SAFETY SHOULD ANYTHING HAPPEN!

Do you have any medical illness (such as diabetes, asthma, mental challenge, sickle cell, hypertension, etc.)?   Y   N

List of illness if yes (Y):   Medication:

Other related information: 1.
                          2.

■ **Please note that a medical report *MUST* be submitted if you have any serious conditions that may disrupt normal functioning.**

SECTION C: ACADEMIC INFORMATION

Last School Attended: **Year of Graduation:**   **Country:**

Examination Body Eg: CXC, Cambridge, London, Etc.	**Subject/ Cource**	**Level**	**Year**	**Status**	**Grade**

STATUS: O- Obtained; P- Pending/ Awaiting results. These must be produced as soon as possible. (Copies of Certificates gained at the secondary and post-secondary levels must accompany application (originals or certified copies).

Which of the following activities might interest you while attending the college?

Basketball   College Chorale   Debating Society   Hiking/ Nature Club   Modern Languages Club

Public Speaking   Red Cross   Student Government   Track & Field   Travel and Tourism Club

Other:

SECTION D: CAREER GOALS

My career goal is to become:

First Choice:

Second Choice:

SECTION E: PROGRAMME OF CHOICE

Choose any two (2) programmes listed hereunder: Indicate First Programme of choice using "No 1" and Second Programme of choice using "No 2" in the box provided. YOU WILL **ONLY** BE ADMITTED INTO **ONE**.

(Please review our program catalogue on our website before making your selection (*www.mcc.ms*)

NURSING EDUCATION

Nursing Assistant Program [NAP]

Registered Nursing Programme

Continuous Professional Development [CPD]

CONTINUING EDUCATION - FOUNDATION COURSES

Mathematics
English A
Basic ICT Course
Other *(Please Specify):*

SECTION F: FINANCIAL RESOURCES (EXPECTED SOURCE OF FUNDING)

Please visit our website to view our detail programme catalogue for programme costing. *(www.mcc.ms)*

| Parent | Guardian | Loan | Scholarship | Self | Government/ Agency |

SECTION G: RECOMMENDER (if applicable)

	Name	Address	Contact Number
1.			
2.			

SECTION H: WORK EXPERIENCE

Employer	Position	Period	
		from	to
		from	to
		from	to
		from	to

SECTION I: DECLARATION

YOUR SIGNATURE IS REQUIRED BELOW. WITHOUT YOUR SIGNATURE AND YOUR PARENT/ GUARDIAN SIGNATURE (IF UNDER THE AGE OF 18), YOUR APPLICATION CANNOT BE PROCESSED.

■ I hereby grant permission for CXC to release my results to the Montserrat Community College.

■ I hereby certify that the information provided in this application form is true and complete to the best of my knowledge. I am aware that the information given by me in this application will be investigated, with my full permission, and that any misrepresentation or ommissions may cause my application to be rejected and make me ineligible for admission to the Montserrat Community College. Falsified statements on this application shall be considered sufficient cause for dismissal.

■ If accepted by the Montserrat Community College I pledge to abide by all rules and regulations.

■ I grant permission for my parent/ guardian/ caregiver to access my student records (grades, attendance, etc).

■ Montserrat Community College reserves the right to withdraw courses at any time, change fees, academic calendar, curricula, degree programmes, degree requirements, graduation procedures, and any other requirement affecting students. Change will become effective whenever the proper authorities so determine and will apply to both current and prospective students.

Applicant's Full Name   Applicant's Signature   Date

Parent/ Guardian's Full Name   Parent/ Guardian's Signature   Date
Parent/ Guardian's must sign if applicant is under the age of eighteen (18) years.

SECTION J: FOR OFFICIAL USE ONLY

Checklist:

    Local Applicant   Overseas Applicant   Certified copy of identification (Birth Certificate/ Passport).
Status: Citizen   Permanent Resident   Reside & Work   Immigrant
    Awaiting CSEC Results   Original and Photocopy of CSEC Results Slip or other Results. *Applications are accepted without result slips ONLY IF students are awaiting results in which case results slips are submitted AFTER CSEC results are released.*
    One recommendation letter *(applicable ONLY for persons requiring Mature Entry- 25 years and over).*
    $25 Application Fee (Non-refundable). Late Application Fee- $50

YOUR APPLICATION WILL NOT BE CONSIDERED UNLESS ALL RELEVANT DOCUMENTS ARE PRESENTED AT THE TIME OF SUBMISSION.

Receipt Number   Approved Signature   Date Received

Checked by   Principal's Signature   Date

■ P. O. Box S24, Salem, MSR1350, Montserrat   ■ mcc@candw.ms | principalmcc@candw.ms   ■ 664-491-9009/ 9001/ 9010   ■ www.mcc.ms

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