



BUTTE COLLEGE

Dear LVN Nursing Program Applicant:

Thank you for your interest in the Butte College LVN Nursing Program. **The next deadline for applications is August 31, 2026. Applications must be received in the LVN Office at the Orland Glenn Center before 5:00 p.m. on August 31st in order to be processed. Postmarks and physical locations other than the Health Occupations Office will not constitute valid submission.**

Attached are application information and materials. Please read them carefully before submitting your application package.

APPLICATION PACKAGE CONTENTS

1. **Application Instructions:** PLEASE READ THESE INSTRUCTIONS CAREFULLY! Submit all application materials, including any required transcripts, directly to the Nursing Department. Original transcripts will be forwarded to Admissions and Records after they are reviewed by the Nursing Department. Electronic submission of Official Transcripts must come from your college directly to Admissions and Records at evaluations@butte.edu
2. **Program Sequence of Instruction:** During each semester, clinical rotations may be scheduled for both day and evening hours. Due to the educational demands of the programs, students should not attempt to work shifts immediately preceding clinical rotations.

ADVISORY:

The LVN program is permanently at the Glenn Center (1366 Cortina Drive, Orland, CA) since Fall of 2025. Clinic locations can be in Butte, Glenn or Tehama Counties. To participate in and complete the nursing program, Butte College Nursing students must meet the requirements of each clinical agency. These requirements may include, but are not limited to, confidentiality forms, criminal background checks, and/or drug testing.

SELECTION PROCEDURE

If more candidates qualify than there are vacancies in the class, a computerized lottery will select the individuals to be enrolled.

Thanks again for applying to the Butte College Licensed Vocational Nursing Program—best of luck as you pursue a career in nursing!

Sincerely,

John Beadle, MSN, RN, CEN, NP-c

John Beadle, MSN, RN, CEN, NP-c
LVN Program Director/Faculty

Laurie Bowles, MSN, RN

Laurie Bowles, RN, MSN
Nursing Program Chair

APPLICATION INSTRUCTIONS

1. If you have not previously been a student at Butte-Glenn Community College, apply to the college (application available online) to obtain a student ID#. Please do not submit your application prior to obtaining your ID#.
2. Fill out the nursing application completely (incomplete applications will NOT be considered).
3. Submit to the Nursing Department (as a package—do NOT send transcripts separately and do NOT include any materials (e.g., letters of recommendation) not requested):
 - a. Completed nursing application
 - b. Official college transcripts* documenting successful completion of prerequisite courses (Butte transcripts do not need to be submitted)
 - c. Copy of high school transcript or high school diploma or GED documentation**

If you wish to have confirmation of receipt of your application, please either hand deliver it and have the recipient sign for it or send it certified mail, return receipt requested or through FedEx or UPS using tracking. The Nursing Office will send you an e-mail advising you of the status of your application after it is reviewed.. We recommend that you submit your application package as soon as it is complete to allow time for any questions the Nursing Department might have regarding the information submitted.

*You do not need to submit Butte College transcripts. Other official college transcripts should be sent to you for inclusion with your application package (do NOT open them!). If you are sure that all required documentation is already on file with Butte College Admissions and Records, please check the appropriate box on the application.

** Documentation of 12th grade education is required. Butte College does not keep High School Transcripts on file so please submit a copy of your High School Transcript showing a graduation date or a copy of your High School Diploma or a copy of your GED documentation.

PROGRAM SEQUENCE OF INSTRUCTION

Certificate of Achievement

First Semester		<u>Units</u>
NSG 18	Fundamentals of Nursing	3.0
NSG 21	Clinical Nursing I	7.0
NSG 22	Gerontology Nursing	1.0
NSG 23	Pharmacology	3.0
NSG 24	Musculoskeletal Nursing	1.0
NSG 28	Role Development	1.0
Second Semester		<u>Units</u>
NSG 31	Clinical Nursing II	7.0
NSG 32	Perioperative/Patient Education	2.0
NSG 35	Cardiovascular/Respiratory Nursing	3.0
NSG 36	Gastrointestinal and Renal/Urinary Nursing	2.0
NSG 37	Metabolic Disorders	2.0
Third Semester		<u>Units</u>
NSG 41	Clinical Nursing III	7.0
NSG 42	Maternal/Child Nursing	2.0
NSG 43	Neurological and Rehabilitation Nursing	2.0
NSG 44	Psychiatric/Mental Health Nursing	2.0
NSG 47	Oncology Nursing	2.0
NSG 49	Vocational Relations/Leadership	2.0

Associate Degree

Completion of general education requirements in addition to the program prerequisites and the three semesters of nursing coursework qualify the student for an Associate Degree. The following Associate Degree requirements may be completed before or after the nursing sequence.

	<u>Units</u>
Area 1A: English Composition (satisfied by English prerequisite)	3.0
Area 1B: Oral Communications	3.0
Area 2: Mathematical Concepts and Quantitative Reasoning	3.0
Area 3: Arts and Humanities	3.0
Area 4: Social and Behavioral Sciences	3.0
Area 5: Physical/Biological Science (satisfied by Human Anatomy prerequisite)	4.0
Area 6: Ethnic Studies	3.0
Self-Integration, Physical Education or CTE Pathways (satisfied by Nutrition prerequisite)	3.0

**BUTTE COLLEGE APPLICATION
 LICENSED VOCATIONAL NURSING PROGRAM
 Spring 2027 Program
 Due August 31, 2026**

It is the responsibility of the applicant to complete the application and provide all required documentation to the Nursing Department by the application deadline. Do NOT submit prior to obtaining a Butte ID#.

NAME _____ BUTTE ID# _____
 (Last) (First) (Middle)

MAILING ADDRESS _____ Last 4 of SS# or ITIN# _____
 (Street) (Apt. #)

 (City) (State) (Zip) DATE OF BIRTH _____

PREFERRED PHONE # _____ (Home/Work/Cell) ALT. PHONE # _____
 (Home/Work/Cell)

E-MAIL ADDRESS (required) _____

PERMANENT ADDRESS OR ADDRESS WHERE YOU CAN BE REACHED FOR NEXT TWO-YEAR PERIOD.

 (Street) (Apt. #)

 (City) (State) (Zip)

PERSON TO NOTIFY IN CASE OF EMERGENCY: NAME: _____ PHONE # _____

NAME USED IN HIGH SCHOOL IF DIFFERENT FROM ABOVE: _____

NAME AND ADDRESS OF HIGH SCHOOL _____

Must Attach - DIPLOMA: Yes _____ No _____ or GED: Yes _____ No _____

The following information is required for reporting to the Program's governing agencies:

Sex: Male Female Unknown Military Vet: Y N Primary language spoken in home: _____
 Ethnicity (circle one)

African American	American Indian	Asian	South Asian	Filipino	Non-Filipino Pacific Islander	Caucasian	Hispanic	Mixed Race	Other
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LIST ALL SCHOOLS ATTENDED AFTER HIGH SCHOOL:

<u>SCHOOL</u>	<u>DATES ATTENDED</u>	<u>TRANSCRIPT</u>
_____	_____	<input type="checkbox"/> Attached <input type="checkbox"/> Already on file
_____	_____	<input type="checkbox"/> Attached <input type="checkbox"/> Already on file

ACADEMIC DEGREES COMPLETED:

<u>DEGREE & MAJOR</u>	<u>COLLEGE</u>	<u>DATE</u>
_____	_____	_____
_____	_____	_____

Name: _____
 Last First

Butte ID #: _____

PREREQUISITE DOCUMENTATION

Requirements	Course # <small>(e.g., ENGL 1A)</small>	Course Name <small>(e.g., College Composition)</small>	School Where Completed	# Units	Grade	Semester/Year Taken
PREREQUISITES:						
BIOL 20 - Human Anatomy	_____	_____	_____	_____	_____	F W S Su _____
BIOL 21 - Human Physiology	_____	_____	_____	_____	_____	F W S Su _____
FN 2 - Nutrition	_____	_____	_____	_____	_____	F W S Su _____
ENGL C1000 or C1000E or 2 or 2H or 3:Reading & Comp.	_____	_____	_____	_____	_____	F W S Su _____

STUDENT STATEMENT: I certify that the statements I have made on this application are true and complete. I understand that any misrepresentation or omission of data may result in denial of enrollment and/or dismissal from the program.

SIGNATURE: _____ DATE: ___ / ___ / ___

RETURN COMPLETED APPLICATION TO:

Butte College Glenn Center – IPG-Office-109
 1366 Cortina Drive
 Orland, CA 95963

QUESTIONS REGARDING APPLICATION, CONTACT:

Kristle Hunderman
 Phone: 530-879-6224
 Email: lvn@butte.edu