

Medical Laboratory Scientist Direct Admit  
Completion Checklist  
Spring 2024

**\*\*IMPORTANT\*\***  
Form MUST be the semester and year  
for which you are applying.

**YOU MUST FILL IN ALL BLANKS**

Student name (print): \_\_\_\_\_ NSHE #: \_\_\_\_\_  
The semester for which I am applying is: \_\_\_\_\_ Phone: \_\_\_\_\_  
The application deadline is: \_\_\_\_\_ Today's date: \_\_\_\_\_

**1. Check if applicable:**

\_\_\_\_\_ I am transferring or have transferred credits (attach a copy of MyCSN Transfer Credit Report).

**Note:** Grades of "P & TP," and "S or TS" received prior to spring 2020, will be considered a "C" unless you attach an **official** transcript showing a different grade – see LE Policy for additional information on "S & TS" grades. A grade of "TR" will not be accepted unless you attach an **official** transcript showing actual grade; and "LELC" courses will be accepted only with proof of approved substitution waiver/request.

**PLEASE NOTE: PROOF OF APPROVED SUBSTITUTION WAIVER/REQUEST MUST BE ATTACHED IF APPLICABLE**

**2. Circle either TRUE or FALSE to ALL the following.**

**TRUE FALSE** I understand that GPA for prerequisite courses must be 2.50 or higher.

**TRUE FALSE** I am not currently enrolled in a Limited Entry Program.

**TRUE FALSE** I have met with a Health Programs Advisor. Date of meeting: \_\_\_\_\_

**TRUE FALSE** I have completed the Limited Entry Workshop. Date of workshop: \_\_\_\_\_  
(Quiz result must be attached).

**TRUE FALSE** I have paid the \$20.00 non-refundable Limited Entry Application Fee (receipt/proof of payment is attached).

**TRUE FALSE** A copy of my High School Diploma (or transcript), GED transcript, or advanced degree is attached (associate or higher). Note: International (non-US) transcripts must be evaluated through a NACES member organization (<https://www.naces.org/members>).

**TRUE FALSE** I have completed the following courses with a "C" or higher. ("C-" is not accepted).

\_\_\_\_\_ BIOL 190, 196, 223 (grade \_\_\_\_\_) \_\_\_\_\_ MATH 126, 126E or higher (grade \_\_\_\_\_)

\_\_\_\_\_ CHEM 121 (grade \_\_\_\_\_) \_\_\_\_\_ ECON 261, PSY 210,

\_\_\_\_\_ ENG 100, 101, 110 or 113 (grade \_\_\_\_\_) \_\_\_\_\_ SOC 210, or STAT 152 (grade \_\_\_\_\_)

**IF YOU ANSWERED "FALSE" OR LEFT ANY OF THE ABOVE ITEMS "BLANK", YOU CANNOT SUBMIT YOUR APPLICATION PACKET WITHOUT SELECTION SPECIFIC EXCEPTION WAIVER OR MEMORANDUM**

**3. Read and initial the following.**

\_\_\_\_\_ I have read, understand, and agree to comply with the Limited Entry Academic Programs Policy and Procedures.

\_\_\_\_\_ I understand that my final grades, including transfer credits, must be posted in MyCSN by the deadline date.

\_\_\_\_\_ I understand that I must notify the Limited Entry office of any name, address, or phone change in writing.

\_\_\_\_\_ I understand that if I repeat a course, the highest of the first three attempts, including W, WT or AU, will be used.

\_\_\_\_\_ I understand that the official transcript evaluation of applicable transfer credits must be complete by the deadline date.

\_\_\_\_\_ I understand that no additional documentation can be added to my application after the deadline date.

\_\_\_\_\_ I understand that I must reproduce all documentation if I reapply in the future. The Limited Entry Office doesn't provide documents.

\_\_\_\_\_ I understand that I must submit everything at one time with this checklist even if submitted to another department.

\_\_\_\_\_ I understand that once I accept a position in a Limited Entry program, I cannot apply to another Limited Entry program until I complete or exit the program I originally accepted.

\_\_\_\_\_ I understand that I may receive a point deduction if I reapply to a program that I was previously enrolled in.

**4. Circle either YES or NO for each item below that you are submitting for points.**

**YES NO** Proof of a Higher Education Degree of an Associate Degree or higher from an accredited college or university

**YES NO** Proof of successful completion of the MLT/MLS Phlebotomy track (CLS 151, CLS 152, and CLS 153); the National Healthcare Association track (CLS 155) and CLS 153; or a NAACLS Approved Phlebotomy Program (must get approval from Program Director; submit proof with exception waiver)

**YES NO** Proof of National Phlebotomy Credential (ASCP, AMT, or NCCT) or a current Nevada State Laboratory Assistant License

**YES NO** Paid Medical Laboratory/Phlebotomy Experience (must be on approved form)

**YES NO** Proof of Completion of Biomedical CTE program

**YES NO** Completion of Health Living and Aging Courses: HHP 150, 190, 201 and 213 with "C" or higher

**5. Check all that apply. Fill in ALL blanks.**

I have completed the following general education courses with a grade of "C" or higher.

\_\_\_\_\_ ENG 102, 114, or COM 101 (grade \_\_\_\_\_)

\_\_\_\_\_ CHEM 122 (grade \_\_\_\_\_)

\_\_\_\_\_ Human Relations (course taken \_\_\_\_\_ / grade \_\_\_\_\_)

\_\_\_\_\_ Fine Arts/Humanities/Social Science (course taken \_\_\_\_\_ / grade \_\_\_\_\_) (PHIL 102 preferred)

\_\_\_\_\_ PSC 101 or HIST 100 (grade \_\_\_\_\_) **OR** \_\_\_\_\_ HIST 101 (grade \_\_\_\_\_) **and** HIST 102/217 (grade \_\_\_\_\_)

\_\_\_\_\_ BIOL 191, 197, 224 (grade \_\_\_\_\_)

**6. Check all that apply. Fill in ALL blanks.**

I have completed the following unrestricted or preferred program courses with a grade of "C" or higher for points.

\_\_\_\_\_ BIOL 325 (grade \_\_\_\_\_) \_\_\_\_\_ CHEM 220 (grade \_\_\_\_\_) \_\_\_\_\_ PHIL 102 (grade \_\_\_\_\_)

**SUBMIT YOUR COMPLETE APPLICATION PACKET TO THE LIMITED ENTRY OFFICE  
WEST CHARLESTON, ROOM K-216, (702) 651-5633**

Student Signature: \_\_\_\_\_