Vocational Nursing Program Application Packet – This is for guide only. You must be prepared to upload documents at one time. You cannot save the application. Application Packet must be submitted online @ https://www.tstc.edu/program-requirements/nursing/  

The Vocational Nursing (VN) Program is a sixteen (16) month certificate program that prepares the graduate to perform patient care under the direct supervision of a Registered Nurse or Physician. The first semester is prerequisites. Upon successful completion of the program, the graduate vocational nurse qualifies to take the National Council of Licensure Examination for Practical Nurses (NCLEX-PN®) and upon passing the exam, will be issued a Texas license to practice as a Licensed Vocational Nurse. Applications are accepted once a year.

The Vocational Nursing Program was established in 1973 and has full approval from the Texas Board of Nursing (BON). Additionally, Texas State Technical College (TSTC) is accredited by the Texas Higher Education Coordinating Board (THECB) and the Southern Association of Colleges and Schools Council of Colleges (SACSCOC).

**Deadline dates for selection of class starting January 2023 at the Breckenridge and Sweetwater campuses:**

<table>
<thead>
<tr>
<th>Event</th>
<th>Date(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completed Application Packet DUE</td>
<td>November 1, 2022 @ 5:00 pm</td>
</tr>
<tr>
<td>ATI TEAS® version 7 (at least 1 attempt) TSI requirements</td>
<td>See page 4 for details</td>
</tr>
<tr>
<td>Texas Board of Nursing Criminal Background Check results (Blue Card or Petition for Declaratory Order)</td>
<td>By January 6, 2023</td>
</tr>
<tr>
<td>Attend Mandatory Meeting</td>
<td>Announced at a later date</td>
</tr>
<tr>
<td>Selected applicants notified via email</td>
<td>November 2022</td>
</tr>
<tr>
<td>Acceptance of enrollment required by</td>
<td>TBD, 1 week after letter of invitation</td>
</tr>
<tr>
<td>SOLO class if new student</td>
<td>Must be completed before registration</td>
</tr>
<tr>
<td>HPRS 1206, BIOL 2301, 2101, 2302, 2102 prerequisites to be completed before core nursing courses begin.</td>
<td>Must be completed by first class day of cohort start.</td>
</tr>
<tr>
<td>First day of class</td>
<td>January 9, 2023</td>
</tr>
</tbody>
</table>

Applicants **must** keep a copy of the completed VN application packet for their personal records.

**VOCATIONAL NURSING PROGRAM ADMISSION CRITERIA**

A.   Meet and complete all college and program requirements.

B.   Complete the entire VN application packet and **make a copy for your personal records**.
C. Submit, by the posted deadline, the entire VN application packet must be submitted online by November 1, 2022. You will not be able to submit incomplete packets. A check list is provided on page 23.

Incomplete application packets will not be accepted.

**COLLEGE AND PROGRAM REQUIREMENTS**

Prior to submitting an application packet to the Vocational Nursing program, the following criteria must be met:

**COLLEGE APPLICATION**

A. Complete a Texas State Technical College (TSTC) application. This must be completed on the TSTC website utilizing the online application system. Please visit [www.tstc.edu](http://www.tstc.edu) and click on the “Apply” button.

B. Make sure to select Vocational Nursing. **DO NOT** select the ADN.AAS bridge program.

C. After completion of all required TSTC admission paperwork, you will be assigned an Enrollment Coach on the campus you are applying to. You may apply to only one location, Breckenridge campus or Sweetwater campus.

D. From each college previously attended, you must request official transcripts to be sent to the Admissions and Records office on the campus to which you have applied. Transcripts must be received in Admissions office before your packet will be considered for admission to Vocational Nursing Program.

**Breckenridge Address:**
TSTC
Attn: Admission & Records
307 N. Breckenridge Ave.
Breckenridge, TX 76424

**Sweetwater Address:**
TSTC
Attn: Admission & Records
300 Homer K. Taylor Dr.
Sweetwater, TX 79556

**APPLY FOR FINANCIAL AID**

Start the application process to apply for financial aid as soon as possible.

4 Steps to Applying for Financial Aid at TSTC

1. Register for your FSA ID @ [https://studentaid.gov/](https://studentaid.gov/)

2. Complete your FAFSA (Free Application for Federal Student Aid)
   This will show as Waco, but is correct.
3. Be prepared to provide verification documents to the Financial Aid office

4. Keep in contact with your enrollment coach.

If you have completed all of the steps listed above and haven’t received ANY correspondence (email) regarding your financial aid within 3 weeks of doing so, contact your Enrollment Coach via email, in person, phone or mail and inquire about the status of your file. The enrollment coach for VN is:

Lisa Langford 254-559-7731 lisa.langford@tstc.edu

**TEXAS SUCCESS INITIATIVE (TSIA2) ASSESSMENT 2.0**

Before enrolling in classes at TSTC, applicants are required to submit one of the following:

- Scores from at least one Texas Success Initiative (TSIA/TSIA2) assessment.
- Evidence of TSIA/TSIA2 completion from another Texas college or university.
- Proof of exemption from the TSIA/TSIA2.

Applicants failing to achieve minimum passing scores on any or all of the TSI Assessment 2.0 (TSIA2) sections may be eligible to enroll in a remediation course or courses. Successful completion of course(s) fulfills the TSI requirement. *If you are not TSI met by the first class day, you will be enrolled in a developmental course to complete TSI requirements.*

A Pre-Assessment Activity (PAA) must be completed prior to taking the initial TSIA2
The activity can be found and completed online at: [https://www.tsipreview.com/welcome/tstc-west-texas](https://www.tsipreview.com/welcome/tstc-west-texas).

Once you have completed the Pre-Assessment Activity, you are ready to schedule an appointment to take the TSIA2. For on campus testing, please select a location near you. For virtual or online testing, please register at tstc.edu/Testing-Waco.

<table>
<thead>
<tr>
<th>Location</th>
<th>Contact</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abilene</td>
<td>Francis Gross</td>
<td>325-734-3641</td>
</tr>
<tr>
<td>Breckenridge</td>
<td>Lisa Langford</td>
<td>254-559-7731</td>
</tr>
<tr>
<td>Brownwood</td>
<td>Kimberly Carroll</td>
<td>325-641-5955</td>
</tr>
<tr>
<td>Sweetwater</td>
<td>Patricia Carpio</td>
<td>325-235-7411</td>
</tr>
</tbody>
</table>

The fee for the TSIA2 is $24 for both sections (Math & ELAR) or $12 per section. Please note that for virtual or online testing there is an additional proctoring fee of $25 paid to Examity.

**VN PROGRAM ADMISSION TEST**
ATI TEAS Exam (On Campus)
The ATI TEAS measures basic skills in the academic areas of reading, mathematics, science and English and language usage. The time limit for the exam is approximately four hours.

The ATI TEAS exam is used as part of the admission process by the LVN programs. There are only two attempts allowed per application period. The last date for on campus testing is September 29th. Test dates are subject to change.

Steps before scheduling your exam
● Sign in at one of our campuses. (New users will be assessed an annual one-time non-refundable $5 scheduling fee.)
  ● Abilene: tstc.edu/Testing-Abi
  ● Breckenridge: tstc.edu/Testing-Breck
  ● Brownwood: tstc.edu/Testing-Bro
  ● Sweetwater: tstc.edu/Testing-Swtr
● Choose a group: ATI TEAS (On Campus)
● Choose an exam: ATI TEAS Exam OR ATI TEAS Retake
● Choose a date and time
● Complete the required information
● Click add to cart Complete the credit card fields and click Purchase Exams
● Click Complete Registration (a confirmation email will be sent)

Testing Fees & Requirements
● Bring a current (non-expired) government-issued photo ID
● Bring a credit/debit card to pay the test fee online ($65) (This is in addition to the $25 proctoring fee paid online through our scheduling system.)
● Create a profile with ATI before your test date at atitesting.com. Bring your ATI student login credentials.

Study Resources
For additional information, please contact a Testing Center in West Texas. For contact information, please visit tstc.edu/testing. To request testing accommodations, please contact the Access and Learning Accommodations Office at (254) 867-3600 or adarequest@tstc.edu.

ATI TEAS Exam (Virtual)
The ATI TEAS measures basic skills in the academic areas of reading, mathematics, science and English and language usage. The ATI TEAS exam is used as part of the admission process by the LVN programs. There are only two attempts allowed per application period.
The time limit for the exam is approximately four hours. Below are the WTX virtual test dates. Max is 50 per test session. Call for testing dates in West Texas.

Steps before scheduling your exam
- Sign in at tstc.edu/Testing-Swtr (New users will be assessed an annual one-time non-refundable $5 scheduling fee.)
- Choose a group: ATI TEAS (Virtual)
- Choose an exam: ATI TEAS Exam (Virtual) OR ATI TEAS Retake (Virtual)
- Choose a date and time
- Complete the required information
- Click add to cart Complete the credit card fields and click Purchase Exams
- Click Complete Registration (a confirmation email will be sent)
- You will receive an email 24 hours prior to your appointment. Email will provide payment instructions.

Testing Fees & Requirements
- Bring a current (non-expired) government-issued photo ID
● A credit/debit card to pay the test fee online ($65) and Proctorio fee of $5 plus tax
● Laptop/desktop, internet connection, webcam, microphone, install Google Chrome. [Student Orientation Video]

**Study Resources**

- [http://atitesting.com/teas](http://atitesting.com/teas)
- [http://tstc.libguides.com/teas](http://tstc.libguides.com/teas)

For additional information, please contact Patricia Carpio at prcarpio@tstc.edu or (325) 235-7441.

To request testing accommodations, please contact the Access and Learning Accommodations Office at (254) 867-3600 or adarequest@tstc.edu.

**Benchmarks for ATI TEAS ® version 7 sections:**

- Reading 50
- Math 50
- Science 40
- English Language 50.0

**APPLICANT CPR TRAINING**

All applicants will be required to show proof of a current American Heart Association (AHA) Basic Life Support (BLS) Cardio Pulmonary Resuscitation (CPR) card that is valid for 2 years. *

No other CPR card will be accepted.

**LETTERS OF RECOMMENDATION**

Submit three (3) letters of recommendation from non-family members. Each letter **must** include contact information and signature of the writer.

**SELECTION CRITERIA**

- Applicant selection involves consideration of packet information, a point system, and attendance at the mandatory meeting.
Failure to attend the mandatory meeting will result in being removed from class selection.

- The TSI status and ATI TEAS® version 7 scores are also included in the selection process.
- Returning students are not guaranteed readmission to the program.
- TSTC does not discriminate on the basis of race, color, national origin, gender, disability, age, religion, veteran status, or any other legally protected status in educational programs, activities, admission, or employment practices.

**DRUG SCREENS AND CRIMINAL BACKGROUND CHECKS**

**Drug Screens**

Applicants accepted into the Vocational Nursing program at TSTC will be required to complete a random drug screen by a specified date to be announced at a later time. **You will receive information on the location and approximate cost of the drug screen on the first class day.**

The date the drug screen must be completed by will be provided within 48 hours of the deadline. Results are stored in an online database. Students will have access to their own drug screen results. The TSTC VN faculty will also have access to all students’ results to serve as evidence for Texas Board of Nursing (BON) and clinical affiliate compliance. Applicants will be responsible for any and all charges incurred for the drug screen including travel expenses to the testing site. Failure to complete the drug screen within the time frame given will result in dismissal from the VN program.

*Note: Drug screen results may be released to an official representative of a clinical agency, under contract with TSTC, if formally requested. If an applicant has concerns regarding this practice, please contact the VN Program Director or academic advisor.*

**Criminal Background Checks**

TSTC Vocational Nursing program requires evidence of a clear criminal background investigation due to the BON requirement of a clear criminal background prior to authorizing graduates to take the NCLEX-PN. The Texas Board of Nursing conducts a criminal background check (CBC) with the Texas Department of Public Safety (TDPS) and the Federal Bureau of Investigation (FBI). Identogo is the online provider of this service. Applicants are required to submit fingerprints through Identogo. The applicant is responsible for the cost of the background investigation.

After the application deadline, the Program Director will submit a roster of all applicants to the BON. The roster includes date of birth, social security number and email address. A correct email address on the enclosed
application is critical to receive correspondence from the BON and Identogo. Do NOT provide an email address assigned by your high school (this will have isd in the email address). Information and instructions on completing the CBC process will be provided via email from Identogo to all applicants that submit a complete application packet. This process may take 4 - 6 weeks after the application deadline before applicants receive the information from Identogo.

**Criminal Background Checks for Applicants with a Criminal History**

Applicants with a criminal history are encouraged to access the Texas Board of Nursing web site for information on filing a *Petition for Declaratory Order* (DO). The Texas Board of Nursing website is [www.bon.state.tx.gov](http://www.bon.state.tx.gov). Click on “Applications and Forms” on the right side of the screen; scroll down and click on “Initial Licensure & Recognition Forms”; scroll down and click on “Petition for Declaratory Order”. Any costs associated with a DO are the sole responsibility of the applicant.

A partial list of offenses and situations that require a DO is noted on the *Statement of Student Responsibility*, page 15 and 16 of this application packet. A complete list is available on the BON web site. This process can be started before submitting an application packet. Follow the instructions carefully as you prepare for the background check. If needed, the TSTC VN program code is: **US27103000**.

One or more of the clinical sites utilized by the TSTC Nursing Department may require an additional drug screening and/or criminal background check. These are in addition to the application requirements. A separate processing fee at the expense of the student is required. FYI: Any clinical facility may reject a student due to a criminal issue whether it is cleared or not.

**STUDENT INSURANCES**

Per the TSTC Student Handbook, the following applies to students accepted into the Nursing Program:

If accepted into the nursing program, the student will be required to purchase TSTC Student Accident insurance if they do not own and provide a copy of a personal policy for accidents. A Needle Stick Rider and Malpractice Insurance are automatically included with the student’s tuition and fees each semester.
## Immunizations and Tests
### Required by State Law and Clinical Facilities

**Name:** ___________________________ **TSTC ID#:** ________________

**Program:** ___________________________ **Date of Birth:** __________

*Include this form and signed immunization records in the application packet*

Vaccines administered after September 2, 1991 shall include the MM/DD/YY each vaccine was given.

### Measles (Rubeola), Mumps, Rubella: ALL students must show proof of either:

| A. Two doses of MMR vaccine on or after their first birthday and at least 30 days apart | Date #1 (mm/dd/yy) |
| OR | Date #2 (mm/dd/yy) |
| Copy of signed records required |

| B. Serologic test positive for measles, mumps, and rubella antibodies | Date: (mm/dd/yy) |
| Copy of signed test results required |

### Hepatitis B: ALL students must show proof of either:

| A. Three doses of vaccine | Date #1 (mm/dd/yy) |
| OR | Date #2 (mm/dd/yy) |
| Documentation of series in progress with 3rd injection due by end of fall semester* | Date #3 (mm/dd/yy) 30 days after #1 |
| OR | Date #3 (mm/dd/yy) 6 months after #1 |
| Copy of signed records required |

| B. Serologic test positive for Hepatitis B antibody | Date: (mm/dd/yy) |
| Copy of signed test results required |
| Result: ___________________________ |

### Hepatitis A (optional)

| A. Two doses of vaccine (administered 6 months apart) | Date #1 (mm/dd/yy) |
| OR | Date #2 (mm/dd/yy) |
| Copy of signed records required |

| B. Serologic test positive for Hepatitis A antibody | Date: (mm/dd/yy) |
| Copy of signed test results required |
| Result: ___________________________ |

### Varicella: ALL students must show proof of either:

| A. Two doses of Varicella vaccine administered 4 weeks apart | Date #1 (mm/dd/yy) |
*Only one dose of Varicella vaccine is needed if the student received first dose before the age of thirteen (13).

OR

Copy of signed record(s) required

Date #2___________________________ (mm/dd/yy)

B. Serological test positive for Varicella antibody

OR

Copy of signed test results required

Date:______________________________ (mm/dd/yy)

Result:____________________________

C. Physician documented history or diagnosis of Varicella

Official form attached

Date Disease Occurred________________________ (mm/dd/yy)

Tetanus, Diphtheria and Acellular Pertussis (Tdap):

One dose Tdap

Copy of signed record required

Date:______________________________ (mm/dd/yy)

Tetanus (Td)

One dose within the past 10 years at the time of application

Copy of signed record required

Date:______________________________ (mm/dd/yy)

Meningococcal vaccine

One dose MCV4

*For ages 22 and under as of the first class day

Copy of signed record required

Date:______________________________ (mm/dd/yy)

According to the Texas Department of State Health Services and Texas Administrative Code (TAC) 97.62 immunization exclusions are allowable on an individual basis for medical contraindications, active duty with the armed forces of the United States, and reasons of conscience, including religious belief.

Additional information and compliance instructions can be found at https://www.dshs.texas.gov/immunize/ under School Requirements

All vaccinations must be current by Dec. 9th, 2022. CMS Omnibus COVID-19 Health Care Staff Vaccination Rule- The Centers for Medicare & Medicaid Services (CMS), HHS have revised the requirements that establish COVID-19 vaccination requirements for staff and caregivers at the included Medicare- and Medicaid- certified providers and suppliers. This mandate, which has been upheld by the Supreme Court of the United States will impact the majority of our Clinical Sites available to our students for experiential learning.
Therefore, our students will be directly impacted by the rule and will be required by those clinical partners certified to receive Medicare and/or Medicaid reimbursements to be vaccinated as all of their staff will also be required to meet this expectation. Each entity will apply allowed exemptions to this requirement as they see fit. Additionally, sites not receiving Medicare and Medicaid may also choose to mandate vaccinations in an effort to maintain continuity in Health Care and protect patients and caregivers.

Exemptions will not be determined by TSTC, each clinical site will establish their policy and expectation as it relates to exemptions and approval or denial of waivers. TSTC will ensure the process is followed and documented in the students record.
This form summarizes the “Exceptions to Immunization Requirement (Verification of Immunity/History of Illness)” incorporated in Title 25 Health Services §97.65 of the Texas Administrative Code (TAC).

Section §97.65 of the TAC states, “A written statement from a parent (or legal guardian or managing conservator), school nurse, or physician attesting to a child's/student's positive history of varicella disease (chickenpox), or of varicella immunity, is acceptable in lieu of a vaccine record for that disease (see form at http://www.dshs.state.tx.us/immunize/docs/c-9.pdf).” School nurses may also write a statement to record cases of chickenpox that they see. The school will make and keep copies of any reports proving chickenpox illness or the results of any serologic tests given as proof of immunity. The original should be given back to the parent or guardian. If a parent or guardian cannot give the history of disease, or if serologic proof is not available, the varicella vaccine requirement must be met.

**Proof of having had chickenpox disease can be proved by:**

1. Serologic blood confirmation of varicella immunity.
2. A written report from a doctor.

This is to prove that ________________________________________ had chickenpox on or

(Name of Student)

about __________________________ and does not need a Varicella vaccine.

(month / day / year)

(Signature)

Title

(Date)

Visit our website at: www.immunizetexas.com
Texas Department of State Health Services Immunization Unit
Stock No. C-9 Revised 11/2016
Documentación del historial de enfermedad: Varicela

*(Chickenpox)*

*Este formulario resume las “Excepciones al Requisito de Inmunización (Verificación de inmunidad/Historial de la enfermedad)” incorporadas en el Título 25, Servicios de Salud, Sección §97.65 del Código Administrativo de Texas (TAC).*

La Sección §97.65 del TAC estipula: “Una declaración firmada de uno de los padres (o tutor legal, o padre con la custodia principal), o la enfermera de la escuela o un médico, la cual dé fe de que el niño o estudiante tiene un historial positivo de enfermedad de la varicela *(chickenpox)*, o tiene inmunidad a la varicela, es aceptable en lugar de un registro de la vacuna contra esta enfermedad (vea el formulario en http://www.dshs.state.tx.us/immunize/docs/c-9.pdf).” Las enfermeras de la escuela también pueden hacer una declaración por escrito para registrar los casos de varicela que vean. La escuela hará y guardará copias de cualquier informe que demuestre que se ha tenido la enfermedad de la varicela o de los resultados de cualquier análisis serológico que se hayan entregado como prueba de inmunidad. El original debe regresarse al padre o tutor. Si el padre o tutor no pueden proporcionar el historial de enfermedad, o no cuentan con evidencia serológica disponible, el requisito de vacunación contra la varicela debe cumplirse.

Se puede probar que se ha tenido la enfermedad de la varicela mediante:

1. Confirmación serológica sanguínea de inmunidad a la varicela.
2. Un informe por escrito de un médico.

Por este medio demostramos que__________________________tuvo varicela en esta ________________________________(Nombre del estudiante)

Fecha o en una fecha aproximada__________________________y no necesita la__________________________ (mes / día / año) vacuna contra la varicela.”

__________________________
(Firma)

__________________________
(Tituló)

__________________________
(Fecha)

Visite nuestro sitio web en: www.immunizetexas.com
Texas Department of State Health Services Immunization Unit
Stock No. C-9 Revised 11/2016
Non-Progression Policy:

The Vocational Nursing program is a progressive learning program with each class built on knowledge from previous classes; therefore, it is necessary for the student to pass each class before moving on to the next level. In order to progress in the vocational nursing program, a student must make an average of 79.5 percent or higher in each nursing course with the exception of A&P I and II where a grade of 70 or higher is acceptable. HPRS 1206 requires a grade of B or higher. To be accepted into the Vocational Nursing program, you must attain a B or higher in HPRS 1206 and a C or higher in A&P I and II. These three courses must have been taken within 5 years of the start of the program.

At the end of semesters two, three, and four, students are required to take an NCLEX-PN simulation exam created in the LWW online resource. Students must meet a minimum mastery level in semesters two and three in order to progress to the next semester. Only one attempt will be administered in semester two and three. Mastery levels for each semester are progressive with the goal of every student achieving a minimum proficiency level of 8 before graduation. This level reflects a high probability of success on the NCLEX-PN. Students failing to achieve the minimum mastery level in semesters two and three will be dismissed from the program and will have to reapply for the next cohort. Students not achieving a mastery level of 8 at the end of semester four will not receive an Affidavit of Graduation until they have reached a Level 8. The benchmark for Level II is a minimum mastery level 2. Level III minimum mastery level is 5, and Level IV minimum mastery level is 8. Assignments in each course during Levels II, III, and IV are designed to give students the tools and experience to confidently meet the mastery levels and pass the NCLEX-PN on their first attempt.

Should a student fail a course (es), they will be required to repeat the program in full. Repeat of A&P courses passed with at least 70% or (C) is at the discretion of the director of General Education Courses and Career Success and the A&P instructor. Students will coordinate reapplication with the Program Director. The student will be required to purchase the current textbook(s) and resources needed to repeat the program if new textbooks and resources have been adopted.

If a student fails any semester the second time, they will be dismissed from the program. Readmission to the TSTC VN program will be allowed one time after a two year wait period. Students will not be readmitted after three attempts in the program.

This signed and dated document, Non-Progression Policy, must be included in the application packet.

Student Printed Name

Signature of Applicant

Date
EXPECTATIONS OF STUDENTS

Following is an abbreviated list of the expectations of vocational nursing students throughout the program; please read, sign and include in the application packet.

Classroom Behavior:

- Nursing students are adults and are expected to display mature behavior that is focused on learning during class or lab time.
- Students are expected to exhibit honesty in all areas.
- Students are expected to display respect for the college, faculty, staff, and peers at all times.
- Students will prepare for class/lab appropriately and submit assignments in the manner and time frame indicated by the faculty.
  - Students will **not**:
    - Sleep in class
    - Surf the internet in class
    - Use social media during class
    - Read and/or answer emails or instant messaging during class
    - Shop online during class
    - Play internet games during class
    - Use profanity or sexually oriented language during class
    - Display rude or disturbing facial or hand gestures during class (I.E., eye rolling, sighing, giggling, head-slapping, etc.) that can be interpreted as insulting or disturbing to peers or faculty
    - Work on course assignments, especially for another course, during class

Attendance Policies:

- Students are expected to attend all scheduled on campus class and lab time and clinical rotations.
  - Students missing more than three (3) days in a semester will meet with the VN Program Director and may be dismissed from the program.
- Students are expected to complete all online assignments. Time spent in each assignment is recorded by the faculty.
  - Failing to complete assignments or not logging adequate time when completing online assignments will meet with the VN Program Director may be dismissed from the program.

Substance Abuse (Drugs or Alcohol)

- Students are expected to refrain from using drugs or alcohol at any time while in the vocational nursing program.
  - Random drug testing at the student’s expense can be initiated by the faculty if the student is suspected to be using during the sixteen (16) months of vocational nursing school.
EXPECTATIONS OF STUDENTS (Continued)

Social Media

- Students are expected to use common sense and discretion when using social media during their time in vocational nursing school.
  - Display respect for TSTC, clinical facilities, faculty, staff, peers
  - Do not post using foul, obscene, lewd, racist, abusive, threatening, hateful, unlawful material in language or images.
  - Do not disclose proprietary or confidential information about TSTC, faculty, staff, or other students.
  - Do not take pictures of any type while in a clinical facility.

Offenses of this nature will result in meeting with the VN Program Director and may result in dismissal from the program.

By my signature below, I attest to the fact that I have read and understand the basic expectations of the TSTC Vocational Nursing Program.

This signed and dated document, Expectations of Students, must be included in the application packet.

_________________________________________
Student Printed Name

_________________________________________
Signature of Applicant

_________________________________________
Date
Statement of Student Responsibility
(Carefully read and initial all items as applicable and sign below)

1. I acknowledge that the information in this packet contains policies, regulations and procedures in existence at the time this publication went to press. I also acknowledge that Texas State Technical College (TSTC) reserves the right to make changes at any time to reflect current Texas Board of Nursing (BON) policies, administrative regulations and procedures, and applicable state and federal regulation.

2. I understand that this packet is for information purposes only and does not constitute a contract, expressed or implied, between any applicant, student or faculty member and TSTC.

3. By submitting an application for the TSTC Vocational Nursing program, I agree to abide by the admission requirements of the nursing program.

4. I accept full responsibility for submitting a complete application packet prior to or by the designated application filing deadline and I understand that I cannot be accepted into the program until I have completed all of the admission requirements.

5. I understand and agree to complete a criminal background check and mandatory drug screening prior to established deadlines. Failure to do so, or a positive find on my criminal background check or drug screen, will result in forfeiture of acceptance, admission and/or continuance in the Vocational Nursing program.


8. I acknowledge that I have read and understand the provisions of TSI and ATITEAS® version 6 testing.

9. I am responsible for notifying the appropriate department/personnel of changes in my current contact information.

10. I understand that I am required to bring a laptop with Genuine Microsoft Office software, a power cord and computer mouse on the first class day, if selected.

11. I have retained a copy of this entire application packet for my personal records.

Partial listing per the Texas Board of Nursing Petition for a Declaratory Order:

Any criminal offense, including those pending appeal, listed below require a Petition for Declaratory Order be filed with the Texas Board of Nursing. Have you ever . . . . . . .

[ ] No [ ] Yes  Been convicted of a misdemeanor? (You may exclude Class C misdemeanor traffic violations)

[ ] No [ ] Yes  Been convicted of a felony?
[ ] No [ ] Yes  Pled nolo contender, no contest, or guilty?
[ ] No [ ] Yes  Received deferred adjudication?
[ ] No [ ] Yes  Been placed on community supervision or court order probation, whether or not adjudicated guilty?
[ ] No [ ] Yes  Been sentenced to serve jail or prison time? Court ordered confinement?
[ ] No [ ] Yes  Been granted pretrial diversion?
[ ] No [ ] Yes  Been arrested or have any pending criminal charges?
[ ] No [ ] Yes  Been cited or charged with any violation of the law?
[ ] No [ ] Yes  Been subject of a court martial; article 15 violation; or received any form of military judgment/punishment/action?
NOTE: Expunged and Sealed Offenses: While expunged or sealed offenses, arrests, tickets, or citations need not be disclosed, it is your responsibility to insure the offense, arrest, ticket, or citation has, in fact, been expunged or sealed. It is recommended that you submit a copy of the Court Order expunging or sealing the record in question to our office (TBON) with your application. Failure to reveal an offense, arrest, ticket, or citation that has not in fact been expunged or sealed may subject your license to a disciplinary or fine. Nondisclosure of relevant offenses raises questions related to truthfulness or character. (See 22 TAC §213.27)

NOTE: Orders of nondisclosure: Pursuant to Tex. Gov’t code §552.142(B), if you have criminal matters that are the subject of an order of nondisclosure you are not required to reveal those criminal matters on this form. However, a criminal matter that is the subject of an order of nondisclosure may become a character and fitness issue. Pursuant to Gov’t Code chapter 411, the Texas Nursing Board is entitled to access criminal history, record information that is the subject of an order of nondisclosure. If the Board discovers a criminal matter that is the subject of an order of nondisclosure, even if you properly did not reveal that matter, the Board may require you to provide information about any conduct that raises issues with character and fitness.

12. [ ] No [ ] Yes - Are you currently the target or subject of a grand jury or governmental agency investigation?

13. [ ] No [ ] Yes - Has any licensing authority ever refused to issue you a license or ever revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a professional license, certificate or multi-state privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?

14. [ ] No [ ] Yes - Within the last 5 years have you been diagnosed with, treated or hospitalized for

[ ] No [ ] Yes Schizophrenia and/or psychotic disorders,
[ ] No [ ] Yes Bipolar disorder,
[ ] No [ ] Yes Paranoid personality disorder
[ ] No [ ] Yes Antisocial personality disorder,
[ ] No [ ] Yes Borderline personality disorder

15. [ ] No [ ] Yes - Within the last 5 years, have you been addicted to and/or treated for the use of alcohol or any other drug?

Pursuant to the Texas Occupations Code §301.207, information, including diagnoses and treatment, regarding an individual’s physical or mental condition, intemperate use of drugs or alcohol, or chemical dependency and information regarding an individual’s criminal history is confidential to the same extent that information collected as part of an investigation is confidential under Texas Occupations Code §301.466

IF YOU ANSWER “YES” TO ANY OF THE ABOVE, YOU WILL NEED TO GO TO THE TEXAS BOARD OF NURSING WEBSITE FOR MORE INFORMATION ON FILING A PETITION FOR A DECLARATORY ORDER. Please sign and include in your application packet.

This signed and dated document, Statement of Student Responsibility, must be included in the application packet.

____________________________________________
Student Printed Name

____________________________________________
Signature of Applicant

____________________________________________
Date
**POINT SYSTEM FOR SELECTION**

Point system for selection into the Vocational Nursing program is based upon the following criteria (Total possible points = 25)

<table>
<thead>
<tr>
<th>Points awarded for early packet submission</th>
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<tr>
<td>four or more weeks prior to deadline date (10/04/22 @ 5:00 pm)</td>
<td>4</td>
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<tr>
<td>three weeks prior to deadline (10/11/22 @ 5:00 pm)</td>
<td>3</td>
</tr>
<tr>
<td>two weeks prior to deadline (10/18/22 @ 5:00 pm)</td>
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<tr>
<td>one week prior to deadline (10/25/22 @ 5:00 pm)</td>
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</tr>
<tr>
<td>Prior TSTC Certificate or Associates Degree graduate</td>
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<tr>
<td>Current employment in healthcare. <strong>Must provide a letter from employer on company/institution letterhead</strong></td>
<td>1</td>
</tr>
<tr>
<td>Completed packet submitted</td>
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</tr>
<tr>
<td>United States Military Service</td>
<td>1</td>
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<tr>
<td>Prior United States Military medical training</td>
<td>3</td>
</tr>
<tr>
<td>TSI Complete</td>
<td>2</td>
</tr>
<tr>
<td>TEAS taken and passed</td>
<td>2</td>
</tr>
<tr>
<td>Current registered Certified Nurse Assistant</td>
<td>2</td>
</tr>
<tr>
<td>GPA 2.5 or higher</td>
<td>2</td>
</tr>
<tr>
<td>Official Transcripts included or on file</td>
<td>2</td>
</tr>
<tr>
<td>Fall 2017 semester or later</td>
<td></td>
</tr>
<tr>
<td>Completion of 4 credit hours of A&amp;P I with a grade of “C” or better</td>
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</tr>
<tr>
<td>Completion of 4 credit hours of A&amp;P II with a grade of “C” or better</td>
<td>1</td>
</tr>
<tr>
<td>Completion of 2 hours of Medical Terminology with a grade of “B” or better</td>
<td>1</td>
</tr>
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In the event of a tie, applicants’ highest overall ATI TEAS® version 7 test score will receive preference.
Complete in **black ink only**.
Write legibly. TSTC VN Program not responsible for misinformation submitted to the Texas Board of Nursing due to illegible handwriting.

**Check the campus of which application is being made:**

[ ] Sweetwater Campus  [ ] Breckenridge Campus

*See TSTC website, www.tstc.edu for the degree plan of the Vocational Nursing program.

Name: ____________________________________________

First Middle Last Maiden

**Mailing Address:**
Number & Street or PO Box City State Zip

**Physical Address (if different from above):**

Texas County of Residence: __________________________ Country of Citizenship: __________________________

Social Security #: __________________________ Date of Birth: __________________________

Home Phone: __________________________ Cell Phone: __________________________ Text: □ Y □ N

E-mail Address: *(Must be current)*

*(Do not use a high school (isd) email address)*

In case of emergency notify:
Name __________________________________________
Relationship ______________________________________

Address: __________________________________________
Phone: __________________________________________
Number & Street City State Zip

**Education**
Did you graduate from high school or have a GED: ________ High School ________ GED

Name of high school: ___________________________ Year graduated or received GED: ________________

Have you previously attended a technical school, college, or university: ______ Yes ______ No

Have you ever attended a nursing program? ______ Yes ______ No

If you answered “Yes” to the above question(s), list all schools of higher learning that you have attended:

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>City</th>
<th>Dates To/From</th>
<th>Degree</th>
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Professional Licenses or Certifications

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<th>Issued By</th>
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Work Experience

Begin with most recent:

1. Name of Company: ____________________________________________________

Complete Address: ____________________________________________________

Telephone #: __________________ Dates Employed: From __________ To ______

Supervisor’s Name: ________________________________________________

Nature of Job Duties: ______________________________________________
Reason for leaving: __________________________________________________________

2. Name of Company: ______________________________________________________

Complete Address: __________________________________________________________

Telephone #: __________________________ Dates Employed: From ___________ To __________

Supervisor’s Name: __________________________________________________________

Nature of Job Duties: _________________________________________________________

Reason for leaving: _________________________________________________________

3. Name of Company: ______________________________________________________

Complete Address: __________________________________________________________

Telephone #: __________________________ Dates Employed: From ___________ To __________

Supervisor’s Name: __________________________________________________________

Nature of Job Duties: _________________________________________________________

Reason for leaving: _________________________________________________________

Follow Up Information

It is important that we do a follow-up study of our students. Please provide the following information about two (2) people who will always know where to locate you.

<table>
<thead>
<tr>
<th>Name</th>
<th>Complete Mailing Address</th>
<th>Telephone #</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please Read and Sign the Following Information

Have you ever been convicted or received deferred adjudication for a felony/misdemeanor?

________yes / ________no

(Any person convicted of a misdemeanor or a felony must report charges and disposition to certification or licensing agency in order to determine eligibility for certification or licensure.)
I hereby certify that the information contained in this application is true and complete to the best of my knowledge. I understand that any misrepresentation or falsification of information is cause for **denial of admission or dismissal from the program**. Please sign and include in the application packet.

Signature of Applicant _______________________________ Date _______________________________

Texas State Technical College (TSTC) is an affirmative action/equal opportunity employer. Applicants are considered on the basis of qualifications without regard to gender, age, race, color, creed, religion, national or ethnic origin, veteran status or the presence of a non-job-related disability or any other legally protected status.
This checklist is provided to assist you in ensuring your packet is complete prior to submission. Please include a copy in your packet.

### BEFORE COMPLETING THE VN APPLICATION PACKET

<table>
<thead>
<tr>
<th>Task</th>
<th>Done</th>
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</thead>
<tbody>
<tr>
<td>1. Complete online application to TSTC (select VN program) at <a href="http://www.tstc.edu">www.tstc.edu</a></td>
<td></td>
</tr>
<tr>
<td>2. Apply for Financial Aid as outlined in this application packet. (Page 2)</td>
<td></td>
</tr>
<tr>
<td>3. Request official transcripts from each high school and/or college previously attended (Page 2)</td>
<td></td>
</tr>
<tr>
<td>4. Discuss Texas Success Initiative (TSI) status with an Enrollment Coach (Page 3)</td>
<td></td>
</tr>
<tr>
<td>5. Complete all required Prerequisites: A&amp;P I BIOL 2301, 2102 &amp; II BIOL 2302 &amp; 2101 Lecture and Lab, HPRS 1206 Medical Terminology before first class day of new cohort start.</td>
<td></td>
</tr>
<tr>
<td>6. Schedule the ATI TEAS® version 7 test with the testing department (Page 3-6)</td>
<td></td>
</tr>
</tbody>
</table>

### ASSEMBLING A COMPLETE ONLINE APPLICATION PACKET

The following documents are **required** in a complete Online Vocational Nursing Program Application packet

<table>
<thead>
<tr>
<th>DOCUMENT</th>
<th>Done</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Copy of passing scores on all 4 sections on at least one (1) attempt of the ATI TEAS® version 6 (scores only good for a year from when the ATI was taken) or ATI TEAS Version 7 to online application.</td>
<td></td>
</tr>
<tr>
<td>2. Signed Complete ONLINE Vocational Nursing Program Application</td>
<td></td>
</tr>
<tr>
<td>3. Completed Immunizations and Tests form uploaded to online application</td>
<td></td>
</tr>
<tr>
<td>4. Signed immunization records for Immunizations and Test or copy of immunization records uploaded to online application</td>
<td></td>
</tr>
<tr>
<td>5. Signed Expectations of Students to online application.</td>
<td></td>
</tr>
<tr>
<td>6. Initialed and signed Statement of Student Responsibility to online application</td>
<td></td>
</tr>
<tr>
<td>7. Signed Statement of Understanding to online application</td>
<td></td>
</tr>
<tr>
<td>8. Signed letters of recommendation with contact information from three (3) non-family members uploaded to online application</td>
<td></td>
</tr>
<tr>
<td>9. Copy of Texas driver’s license or Texas issued identification card (proof of residency) uploaded</td>
<td></td>
</tr>
<tr>
<td>10. Copy of social security card uploaded to online application</td>
<td></td>
</tr>
<tr>
<td>11. Copy of all previous college transcripts uploaded to online application. Transcript for ongoing prerequisites must be received by first class day of new cohort start day.</td>
<td></td>
</tr>
</tbody>
</table>

### OPTIONAL DOCUMENTS

1. Signed healthcare employer statement on official facility letterhead
2. Copy of current certifications and/or licenses if applicant is a healthcare provider

### DOCUMENTS REQUIRED AFTER DEADLINE AND BEFORE FIRST CLASS DAY

1. Copy of compliance with the Texas Success Initiative (TSI met)
2. Copy of front and back of American Heart Association Basic Life Support (BLS) CPR card
3. Copy of results of the Criminal Background Check from the Texas Board of Nursing
4. All documents pending from Orientation #1.

Please keep a copy of the application packet and all documents submitted to the Nursing Department.

Phone: 325.734.3644 for further information
## LVN Degree Plan 2021

<table>
<thead>
<tr>
<th>Rubric</th>
<th>Num</th>
<th>Course Title</th>
<th>CIP</th>
<th>Lec</th>
<th>Lab</th>
<th>Ext</th>
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<th>SCH</th>
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<td>Anatomy &amp; Physiology I (lecture + lab)</td>
<td>26.0707</td>
<td>3</td>
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**Semester Totals**

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**Semester Totals**

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**Semester Totals**

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**Program Totals**

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Capstone Course(s): VNSG 2463 Clinical