### NORTHWOOD TECHNICAL COLLEGE ASSOCIATE DEGREE NURSING STUDENT POLICIES

# TRANSFER OF STUDENT ACADEMIC STANDING INFORMATION PERMISSION AND STATEMENT OF UNDERSTANDING

Failure to disclose ADN coursework attempts taken at other WTCS ADN programs constitutes academic dishonesty and will be considered as grounds for dismissal from the Northwood Tech ADN program.

(please print name)	grant permission to the Northwood Tech Nursing Program
Director to provide the information listed eligibility to the ADN Program at	below regarding my academic standing and program
	(please print name of WTCS ADN program)
A copy of this document will be sent to:	
	(email address of other WTCS ADN program contact)
Student Signature:	Date:
Northwood Tech Student ID:	
Please complete and return this form via	scanned/email attachment to:
Lorraine Sacino Murphy, EdD, MSN, RN (	CNE
Associate Dean of Nursing/ADN Program	n Director
Northwood Technical College	
1900 College Drive	
Rice Lake, WI 54868	
lorraine.sacinomurphy@northwoodtech.e	edu

LSM 05/24 **E-03** 

## NORTHWOOD TECHNICAL COLLEGE ASSOCIATE DEGREE NURSING STUDENT POLICIES

Student Name:		
Academic Standing:	Acceptable	
	Suspended	
Comments:		
Signature/title:	Lorraine Sacino Murphy	::
Signature/title:		o:

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#### NORTHWOOD TECHNICAL COLLEGE ASSOCIATE DEGREE NURSING STUDENT POLICIES

# STATEMENT OF UNDERSTANDING FOR ADN COURSEWORK TAKEN AT OTHER WTCS SCHOOLS OF NURSING

I am choosing to take an Associate Degree Nursing course at a Wisconsin Technical College System (WTCS) ADN program other than Northwood Tech. I understand that I must complete at least 25% of my nursing courses at Northwood Tech to be eligible to earn my nursing degree from Northwood Tech. I understand that all 4th semester nursing courses must be completed at Northwood Tech in order to receive a degree from Northwood Tech. I further understand that enrolling in a nursing course at a program other than Northwood Tech will be considered an attempt at a core nursing course and is subject to all policies regarding ADN coursework in the Northwood Tech ADN program. In the event that I withdraw from or fail the course at another institution, all Northwood Tech ADN program policies and protocols regarding withdrawals or failures will apply.

Name of other WTCS ADN program where I will enroll:						
COURSE NUMBER		Fall Term	Spring Term S	ummer Term		
COURSE TITLE _						
Student Print Name: _			Student ID #			
Email address			Phone Number			
Student Signature:			Date: _			

An official transcript from where the WTCS course was taken must be sent to Northwood Tech immediately upon course completion, including coursework from which the student withdraws or fails.

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