



ASSOCIATE OF APPLIED SCIENCE IN NURSING

300 Early Blvd, Suite 105, Early, Texas 76802

Phone: 325-203-5013

Email: nursing@rangercollege.edu

Web link: rangercollege.edu/nursing-programs

RN STUDENT NURSE APPLICATION

See Criteria for Application Submission on Page 6

I am applying for: ☐ RN Submission deadline: May 15th for Fall Admission
 ☐ LVN to RN Bridge Submission deadline: October 1 for Spring Admission

Last Name:	First Name:	Middle Name:
Street:	City/State:	Zip Code:
County:	Phone:	Gender:
SS:	Ranger Email:	
Date of Birth:	Personal Email:	
List Previous Last Names for Transcript Management: (ie. maiden name)		
Ethnicity: *This information is required by the Board of Nursing.	Ethnicity: ☐ African American ☐ Asian ☐ Caucasian ☐ Hispanic ☐ Native American ☐ Other	

Eligibility Requirements for Licensure as a Registered Nurse

Criminal Background Evaluation: Upon tentative acceptance to the program you will be required to undergo a criminal history record check. The record check process includes: (1) the school submitting your name to the Texas Board of Nursing; (2) you completing the form provided by the school necessary to schedule a fingerprint appointment with an authorized service center; (3) electronic submission of your scanned fingerprints from the service center to the TX DPS/FBI.

*The Board will send you a result (blue) card that identifies either that your record is clear, or you will receive a letter indicating a Declaratory Order. You are required to submit this card to the nursing office to receive final program acceptance. If a Declaratory Order is needed you will not receive final acceptance until we receive a copy of the order determining eligibility of nursing licensure from the Board.

NOTE: An LVN who completes the Board's criminal history record check with fingerprints process prior to initial licensure will not need to complete the process again.

Eligibility for Licensure: The Texas Board of Nursing has identified certain circumstances that may render a potential candidate ineligible for licensure as a registered Nurse in the State of Texas. Eligibility for licensure upon graduation is one of the admission requirements for Ranger Nursing Program. If you can answer "YES" to any of the following questions or your background record check from the Board

does not show a clear criminal history record check, you must submit a copy of your Declaratory Order, or other appropriate ruling, from the Texas Board of Nursing to the nursing office before you can be considered for admission. Non-disclosure of relevant information raises questions related to truthfulness and character.

If you can answer **YES** to any of the questions listed in this section, you must contact the **Ranger College Nursing Program Office** before submitting your application. The Nursing Program will review your responses and provide guidance regarding any documentation or additional steps that may be required related to eligibility for nursing licensure.

These questions **MUST** be answered truthfully **EACH TIME** an application is submitted, even if you have previously disclosed information and undergone a previous eligibility review in Texas or another state.

Licensure Eligibility

The Board of Nursing reviews certain responses relating to criminal conduct, discipline, substance use, health, and other regulatory history when determining eligibility for licensure or renewal.

Eligibility Review Questions

1. Have you ever had any disciplinary action on a nursing license or a privilege to practice in any state, country, or province?
2. Do you have an investigation or complaint pending on a nursing license or a privilege to practice in any state, country, or province?
3. Have you, in the last five years, been addicted to and/or treated for the use of alcohol or any other drug?
4. For any criminal offense, including those pending appeal, have you:
 - been arrested and have a pending criminal charge?
 - been convicted of a misdemeanor?
 - been convicted of a felony?
 - pled nolo contendere, no contest, or guilty?
 - received deferred adjudication?
 - been placed on community supervision or court-ordered probation, whether or not adjudicated guilty?
 - been sentenced to serve jail, prison time, or court-ordered confinement?
 - been granted pre-trial diversion?
 - been cited or charged with any violation of the law?
 - been the subject of a court-martial, an Article 15 violation, or any form of military judgment, punishment, or action?
5. Have you ever had any licensing or regulatory authority, other than a nursing license, in any state, jurisdiction, country, or province revoke, annul, cancel, accept surrender of, suspend, place on probation, refuse to renew, or otherwise discipline another professional or occupational license, certificate, nurse aide registration, or multistate privilege to practice that you held?

Applicant Signature: _____ Date: _____

RANGER_COLLEGE_AASN_APPLICATION_10/2026

6. Are you currently suffering from any condition for which you are not being appropriately treated that impairs your judgment or would otherwise adversely affect your ability to practice nursing in a competent, ethical, and professional manner?
7. Are you currently the target or subject of a grand jury or governmental agency investigation?
8. Are you currently a participant in an alternative to discipline, diversion, or peer assistance program, including confidential programs?
9. Have you ever been granted the authority to practice nursing in any country, state, province, or territory?

This does not apply to nursing licenses issued by another U.S. state or territory, excluding Puerto Rico. If you were licensed in Puerto Rico, answer yes.

Important Notes

Class C traffic offenses: You may exclude Class C misdemeanor traffic violations and offenses previously disclosed to the Texas Board of Nursing on an initial or renewal application.

Expunged and sealed offenses: While expunged or sealed offenses, arrests, tickets, or citations need not be disclosed, it is your responsibility to ensure the record 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 with your application. Non-disclosure of relevant offenses raises questions related to truthfulness and character. See 22 TAC Section 213.27.

Orders of non-disclosure: Pursuant to Texas Government Code Section 552.142(b), if you have criminal matters that are the subject of an order of non-disclosure, you are not required to reveal those criminal matters. However, those matters may still become character and fitness issues, and the Texas Board of Nursing may access that criminal history information under Government Code Chapter 411.

Confidentiality: Any positive response remains confidential and is not subject to public disclosure unless required by law.

Statutory confidentiality: Pursuant to Texas Occupations Code Section 301.207, information regarding diagnosis and treatment, use of drugs or alcohol, chemical dependency, and criminal history is confidential to the same extent as information collected during an investigation under Texas Occupations Code Section 301.466.

Applicant Signature: _____ Date: _____

Narrative HANDWRITTEN Summary

Your responses must be handwritten and numbered. You are limited to 2 pages. Content and quality will be evaluated as well as spelling, punctuation, legibility of handwriting, grammar, and congruent of written dialogue.

Rating scale: 4=Outstanding; 3=Good; 2=Fair; 1=Poor; 0=No Evidence

1. Describe your reason for choosing nursing as a career.

2. Describe your reason for choosing the Ranger College Nursing Program.

3. Describe your goals and the way in which you think the Ranger Nursing Program will prepare you to attain these goals.

4. What will be the greatest challenge to successful completion of the Ranger College Nursing Program?

Education History - Official Transcripts are required in the Nursing Program student files in addition to the official transcripts provided to the Ranger College Registrar.

History	Transcript Sent	School Name	City/State
HS			
GED			
College			
College			
College			

Applicant Signature: _____ Date: _____

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#1 Work History (Last 5 year/List any unemployment time) Please use additional paper if necessary.

Business Name	
Address, City, State, Zip	
Phone	
Supervisor/Title	
Job Description/Duties	

#2 Work History (Last 5 yrs/List unemployment times) Please use additional paper if necessary.

Business Name	
Address, City, State, Zip	
Phone	
Supervisor/Title	
Job Description/Duties	

Applicant Signature: _____ Date: _____

Application 10/2026

#3 Work History (Last 5 year/List any unemployment time) Please use additional paper if necessary.

Business Name	
Address, City, State, Zip	
Phone	
Supervisor/Title	
Job Description/Duties	

Previous or current Healthcare Experience (CNA, MA, EMT)

Certification	Yes	No	How Long?	Certification or License Number
Certified Nurse Aide				
Certified Medication Aide				
Certified Medical Assistant				
E. M. T.				
Military Medic				
Other: LVN, PT Aide, etc.				

Applicant Signature: _____ Date: _____

Emergency Contact

Name	
Address, City, State, Zip	
Phone	
Email	
Relationship	

Name	
Address, City, State, Zip	
Phone	
Email	
Relationship	

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Name	
Address, City, State, Zip	
Phone	
Email	
Relationship	

I authorize Ranger College to contact the above-named individuals in the event of an emergency

Initial: _____

Agreement & Consent

I understand that acceptance to Ranger College does not guarantee acceptance to the Ranger College Nursing Program.

[] No [] Yes

I understand that admission to the Ranger College Nursing Program is **selective and not guaranteed**. I acknowledge that meeting the minimum admission requirements does not guarantee admission to the program and that admission is based on the established selection criteria and the number of available spaces.

[] No [] Yes

I understand that I am required to complete the ATI TEAS examination and achieve a cumulative score of "Proficient" and 40.7% or higher in each content section: Reading, Math, Science, and English & Language usage, before the application deadline.

[] No [] Yes

Applicant Signature: _____ Date: _____

RANGER_COLLEGE_AASN_APPLICATION_10/2026

I understand that I must be **TSI complete prior to admission** into the Nursing Program. I understand that documentation demonstrating completion of all applicable Texas Success Initiative (TSI) requirements must be on file with Ranger College by the required deadline.

☐ No ☐ Yes

I understand that my application must be complete and turned in before the required deadline, including all required information and documentation, before my application can be considered for admission to the Nursing Program.

☐ No ☐ Yes

If accepted in the program, I hereby consent to the following and authorize Ranger College Nursing Program access to:

Health Record ☐ No ☐ Yes

Criminal Background Check ☐ No ☐ Yes

Drug Screening, initially and upon request ☐ No ☐ Yes

Certification of Facts and Signature

I, certify the facts set forth in this application for admission to the nursing program are true and complete to the best of my knowledge. I also certify that I completed the application. I understand that the information provided is subject to investigation and falsification of an application is cause for rejection or dismissal. I understand that if I am accepted as a student, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Applicant Initials: _____ Date: _____

Applicant Signature: _____ Date: _____

CHECKLIST FOR APPLICANT

Application must be COMPLETE and submitted by the required deadline to be eligible for admission.

PLEASE NOTE: Space is limited and admission is competitive and selective.

_____ RN Submission deadline: May 15th for Fall Admission

_____ LVN to RN Bridge Submission deadline: October 1st for Spring Admission

Complete Application must include the following:

_____ Application

_____ Narrative HANDWRITTEN Summary (see page 3 of Application)

_____ ATI TEAS Test with scores of cumulative Proficient and science score of 40.7%

(The testing fee charged by ATI is at the students own expense)

_____ Physical Exam (Separate attachment provided with Application)

_____ Current American Heart Association CPR – BLS Healthcare Provider Certification ONLY

_____ Current Immunizations/Vaccines/Other:

- 2 Measles, Mumps, Rubella (MMR), 2 Varicella, 3 Hepatitis B series (or titers)
- Tetanus, Diphtheria and Pertussis (Tdap) (date within 10 yr)
- One (1) QuantiFERON®-TB Gold blood test or T-spot
- Meningitis (for applicants under 21 years of age)

_____ Driver's License and Social Security Card

REQUIRED CRITERIA to complete Applicant File:

_____ Official Transcripts in Nursing Program Office from every College and/or University attended regardless of the number of credits earned regardless if the courses are part of the required coursework for the nursing degree.

Ranger College Brown County, RN Program
300 Early Blvd, Suite 105
Early, Texas 76802

_____ Official Transcripts in Ranger College Registrar Office from every College and/or University attended regardless of the number of credits earned regardless if the courses are part of the required coursework for the nursing degree.

Ranger College

_____ ATI TEAS Examination Requirement - Applicants are required to complete the ATI TEAS examination and achieve a minimum cumulative score of Proficient. Applicants must also achieve a minimum score of 40.7% in each section of the ATI TEAS examination.

_____ Applicants must be TSI complete prior to admission into the Nursing Program. Documentation demonstrating completion of all applicable Texas Success Initiative (TSI) requirements must be on file with Ranger College by the required deadline.

Applicant Signature: _____ Date: _____