



CAROLINAS COLLEGE OF HEALTH SCIENCES

Spring 2007 Registration Bulletin

Full Term: January 8 - May 4

Spring I: January 8– February 28

Spring II: March 12 – May 4

*****Exciting Courses for Spring 2007*****

See the Attached Course Schedule

HUM 101 Music Appreciation

HUM 201 Critical Thinking

Flexible Independent Study Medical Terminology

IDS 202 Leadership Development

IDS 107 Complementary Therapies

Registration Form

Name (Last)		(First)	(Middle)
Street Address			
Phone	E-mail		Social Security Number
Student Status (check one) <input type="checkbox"/> New <input type="checkbox"/> Continuing <input type="checkbox"/> Returning (after a period of non-attendance)	Major (check one) <input type="checkbox"/> Nursing CCHS (see next block) <input type="checkbox"/> Nursing, Mercy School of Nursing <input type="checkbox"/> Surgical Technology <input type="checkbox"/> Radiologic Technology <input type="checkbox"/> Pre-Nursing <input type="checkbox"/> General Education (If you are not enrolled in a health care program or Pre-Nursing at CCHS, select this.)		CCHS Nursing Level <input type="checkbox"/> First Semester <input type="checkbox"/> Intermediate <input type="checkbox"/> Final Semester

Course Number	Section/Lab Number	Course Title	Advisor Signature

Student Signature: _____ Date: _____

Information

- All registration forms must be signed by your advisor *with the exception of General Education and Mercy School of Nursing students*. If your registration form is not signed by an advisor, it will not be processed. If you do not have an advisor, please call Student Services at 704-355-5043 (*new students will be assigned an advisor at orientation*).
- List all courses and sections for which you wish to register. This includes both lecture sections and lab sections.
- You may mail, or deliver your registration form to:

Rhoda Rillorta Gallo, Registrar
Carolinas College of Health Sciences
PO Box 32861
Charlotte, NC 28232

For Office Use Only:	
Number	Initial & Date Received
_____	_____

Program Curriculum Requirements

NURSING	RADIOLOGIC TECHNOLOGY	SURGICAL TECHNOLOGY	PRE-NURSING
<u>1st Semester</u> NUR 100 (IDS 102) NUR 101 BIO 101 MAT 101	<u>1st Semester</u> RAD 110 BIO 100 IDS 102 ENG 101	<u>1st Semester</u> SUR 101 IDS 102	<u>1st Semester</u> BIO 101+ IDS 102+ PSY 101 ENG 101
<u>2nd Semester</u> Intermediate NUR BIO 102 PSY 102	<u>2nd Semester</u> RAD 111 RAD 112 HUM 201	<u>2nd Semester</u> SUR 102 BIO 100	<u>2nd Semester</u> BIO 102+ MAT 101+ PSY 102 SOC 101
<u>3rd Semester</u> Intermediate NUR BIO 103 PSY 101	<u>3rd Semester</u> RAD 113 RAD 114 SOC 101	<u>3rd Semester</u> SUR 103 BIO 103	
<u>4th Semester</u> Intermediate NUR SOC 101 ENG 101	<u>4th Semester</u> RAD 210 RAD 212 IDS 103		
<u>5th Semester</u> NUR 202 ENG 201 ELECTIVE	<u>5th Semester</u> RAD 203 RAD 213 PSY 101		

+Must be taken at CCHS for guaranteed admission to Nursing.

Note: Students may choose to take any general education course meeting the Nursing curriculum requirements.

Registration Schedules and Procedure	Dates to Remember
Course Schedule Published	10/30/2006
Early Registration	11/13-17/2006
Early Registration Invoices Mailed	12/08/2006
New Student Advising & Registration	11/1/2006
Gen Ed Registration Opens	11/27/2006
Gen Ed Registration Closes	1/12/2007
Early & New Student Registration Payment Due	12/29/2006
Late Registration/Drop-Add Opens	01/12/2007
Gen Ed Tuition Payment Due	01/05/2007
Late Registration/Drop-Add Closes	01/12/2007

Orientation Schedule for	Date of Orientation
Nursing Orientation (All day)	January 2 – 3, 2007
Medical Technology Orientation (All day)	January 2-4, 2007
Pre-Nursing Orientation (All day)	January 3
*General Education (2:00p – 3:00p) OR *General Education (11:00a -12:00p)	January 5 or January 8

* Mandatory for new student

Sample Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
7:00-7:50						
8:00-8:50						
9:00-9:50						
10:00-10:50						
11:00-11:50						
12:00-12:50						
1:00-1:50						
2:00-2:50						
3:00-3:50						
4:00-4:50						
5:00-5:50						
6:00-6:50						
7:00-7:50						

TIP: When creating your schedule, take into consideration everything you do (eat, sleep, work, study)

Estimated Tuition and Fees

1. Total Credit Hours x \$175.00 = Base Tuition	2. Total Estimated Fees (based on published rates)
_____ x \$175.00 = _____	_____
	2. Base Tuition + Est. Fees = Total Cost*
	_____ + _____ = _____
*estimated cost does not include books and other applicable fees.	

Registration Procedures

1. Review the curriculum requirements on the previous page. Questions regarding transfer credit may be directed to Student Services at 704-355-5043.
2. Select the classes that match your curriculum requirements and schedule needs. Use the Sample Schedule grid above to lay out your schedule.
3. Indicate course selections and sections on the Registration Form. For biology courses, select both a lecture and a lab section.
4. Use the Estimated Tuition & Fees section to calculate your estimated costs.
5. All courses are filled on a first-come, first-served basis with preference given to health care program students. CCHS reserves the right to cancel classes or to change schedules as necessary.