The University of Oklahoma Health Sciences Center Fran & Earl Ziegler College of Nursing Accelerated BSN Program – Tulsa Campus Enrollment Form

Student ID:	Name:
Phone:	Email:

I understand that I will be enrolled in the below classes while an active student in the accelerated BSN program at the OUHSC College of Nursing. I understand that my enrollment will be processed as shown below unless I am on a leave of absence or alternate completion plan. I understand each semester's enrollment will create a bill with the Bursar's Office and that I am responsible for all charges associated with my enrollment.

Signature:_____ Date:____

Signature		ite	
Summer 1		August Intersession	
NURS-3023-210 Clinical Nursing I	3hrs	NURS-3162-210 Human Experience of Disability	2hrs
NURS-3033-210 Human Exp —Health & Common Illn. NURS-3043-210 Health Assessment	3hrs 3hrs		
NURS-3073-210 Introduction to Professional Nursing	3hrs		
Fall		December Intersession	
NURS-3083-210 Pharmacology in Nursing	3hrs	NURS-4163-210 Contemporary Professional Issues	3hrs
NURS-3134-210 Human Exp -Acute & Chronic Illness	4 hrs		
NURS-3114-210 Clinical Nursing II	4 hrs		
NURS-3054-210 Psychosocial Nursing	4 hrs		
Spring		May Intersession	
NURS-4144-210 Family Focused Nursing	4 hrs	NURS-4063-210 Nursing Research	3 hrs
NURS-4034-210 Hum Exp—Acute & Chronic Illness II	4 hrs		
NURS-4143-210 Community Focused Nursing	3 hrs		
NURS-4054-210 Clinical Nursing III	4 hrs		
Summer 2			
NURS-4124-210 Clinical Nursing IV	4 hrs		
NURS-4123-210 Leadership in Nursing Practice	3 hrs		
NURS-4213-210 Hum Exp—Acute & Chronic Illness III	3 hrs		