

**Academies of Loudoun  
MATA Practical Nursing Pathway**

**Winter 2020 Admissions  
Adult Application**



*EXPLORE • RESEARCH • COLLABORATE • INNOVATE*

**Academies of Loudoun  
42075 Loudoun Academy Drive  
Leesburg, VA 20175  
571-252-1980**

[AcademiesAdmissions@lcps.org](mailto:AcademiesAdmissions@lcps.org)



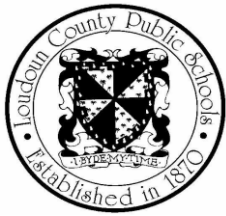
**Loudoun County Public Schools**  
**ACADEMIES OF LOUDOUN**  
42075 Loudoun Academy Drive, Leesburg, Virginia 20175  
Telephone: 571-252-1980



## General Information

**This pathway is open only to Loudoun County residents**

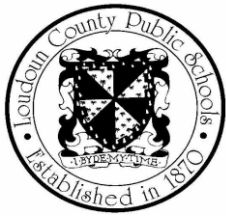
1. **Application completion deadline is 12pm (noon) February 19, 2020.** Admissions offers will be sent in March 2020.
2. The MATA Practical Nursing pathway is a two-year program, with a new cohort beginning each fall following the Loudoun County Public School calendar. **The Practical Nursing (PN I)** course consists of classroom instruction at the **Academies of Loudoun**, every other day (A day). Classes will meet every other day from 9:15am until 3:15pm. Upon successful completion of PN I, students are enrolled in PN II. The PN II course is a combination of classroom instruction at the Academies of Loudoun and clinical experiences at selected community healthcare facilities. PN II meets on both A and B days.
3. All PN students must provide their own transportation to and from **clinical rotations**.
4. All students are required to maintain a grade of 85% in each of the nursing units at the Academies of Loudoun (not an average of 85%). If the minimum academic standards are not maintained the student may be dismissed from the program. This nursing program has rigorous requirements and course work equal to an Advanced Placement course in HS. *Please take this into consideration when applying.*
5. Tuition for adults is \$1,955.00 per year, and textbooks are approximately \$575.00. Fees cover malpractice insurance, criminal background check, NCLEX review courses, lab fees, HOSA fees, first aid certification and other miscellaneous costs (total cost of the program averages \$3,800.00 for all expenses). A detailed fee summary will be provided at a later date. Payment must be made in full by the first day of school: **Thursday, August 27, 2020**. There are **no refunds** once classes have begun. Each student is also required to purchase their own uniform, shoes and personal equipment such as a stethoscope and watch. Uniform tops and pants will cost between \$30-\$50 each, shoes are generally \$40-\$65, and a stethoscope and watch will usually be between \$30-\$50 each. A CPR Healthcare Provider course is also required and will be offered once school has begun, which will cost \$68.50. Each student is **strongly** urged to carry health insurance due to the inherent risks involved with nursing. Health insurance is **not** provided by the school.
6. *After acceptance of admissions offers, a health form* will be mailed to your home. It is required that each student have a physical exam and a series of immunizations. The immunizations are standard for all healthcare workers and are detailed in the acceptance letter. You must **send copies of the immunizations record and completed physical form to the Academies of Loudoun by Friday, August 21, 2020**. Please note that the immunizations series may take a few months to complete. A flu vaccine is required for the student to be in a clinical facility each year. This vaccine is typically obtained in October of the school year.
7. *After acceptance of admissions offers,* the student must obtain a **CPR certification card** from the American Heart Association for **Healthcare Providers**. We will complete this course once school begins as part of classroom instruction.
8. *After acceptance of admissions offers,* the student will be required to pass a criminal background check before any clinical rotations; we schedule this the first month of school. The fee for the background check is included in cost of tuition.
9. *After acceptance of admissions offers,* the student will be required to complete a summer packet of math skills and medical terminology. This packet is due the first day of school: **Thursday, August 27, 2020**.



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10. Following completion of the 2-year course sequence, finishers must apply to the Board of Nursing to sit for the NCLEX-PN licensing examination. Fees for the NCLEX exam are paid directly to the Board and to the testing agency. Exams are given in many area locations throughout the year. Previous criminal convictions may require special investigation by the Board of Nursing for the applicant to be eligible to take the examination.



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Dear Applicant:

Thank you for your interest in applying to the MATA Practical Nursing pathway at the Academies of Loudoun. The Academies of Loudoun is part of Loudoun County Public Schools, and the MATA Practical Nursing pathway is designed to serve both high school students and adult residents of Loudoun County. The necessary forms for application to the practical nursing program are enclosed.

The entire application must be completed and received no later than **12pm (noon) on February 19, 2020**.  
**Follow the directions below:**

1. Complete the entire application packet and return it to:  
Academies of Loudoun  
Attn: Admissions Office  
42075 Loudoun Academy Drive  
Leesburg, VA 20175
2. **Select 3 people (teachers, employers and co-workers, etc), not relatives or friends, as confidential references;** these people should know you and be able to provide specific information about your suitability for this program. Each completed confidential reference form must be **signed and emailed** directly to [AcademiesAdmissions@lcps.org](mailto:AcademiesAdmissions@lcps.org), by the person completing the reference. Reference forms submitted by the applicant will not be accepted.
3. **Have your official high school transcripts, GED scores or any college transcripts sent to:**  
Academies of Loudoun  
Attn: Admissions Office  
42075 Loudoun Academy Drive  
Leesburg, VA 20175
4. **Plan to take the MATA Practical Nursing Admissions Test of Essential Academic Skills (TEAS) at 8:30am on Saturday, February 22, 2020, at the Academies of Loudoun.** There is a cost of \$50.00 for the test payable with a **money order or cashier's check only; payment required with admissions packet.** You will be emailed your testing ticket, which must be printed and brought to the test location. Plan to spend 5 hours for the test; you will be given a copy of your test results immediately.

You will be notified of admissions offers **by mail in March/April 2020**. Acceptance of admissions offers is provisional and not final until the school receives the completed physical examination form along with required immunizations.

Please email [AcademiesAdmissions@lcps.org](mailto:AcademiesAdmissions@lcps.org) if further information is required.



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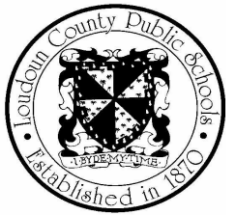


## Application Checklist

1. \_\_\_\_\_ Give confidential reference forms to three individuals (such as teachers, employers, doctors, nurses)
  
2. \_\_\_\_\_ Request high school or college *official* transcript, and include with packet
  
3. \_\_\_\_\_ Print testing ticket for TEAS Assessment on Saturday, 2/22/20.
  
4. \_\_\_\_\_ Complete application, and include payment of \$50 in money order or cashier's check (payable to Academies of Loudoun)

Complete the entire application packet and return it to:

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## MATA PRACTICAL NURSING APPLICATION

### Applicant General Information

Name: \_\_\_\_\_  
Last First Middle Maiden

Date of Birth: \_\_\_\_\_ Last four digits of Social Security Number: \_\_\_\_\_

Student Visa Number: \_\_\_\_\_

Present Address: \_\_\_\_\_  
Number and Street City State Zip Code

Permanent Address: \_\_\_\_\_  
Number and Street City State Zip Code

Phone Number: \_\_\_\_\_

*If the applicant does not have a social security number, in accordance with code 54.1-116(B) of the Code of Virginia, foreign nationals who are otherwise qualified as an applicant for a license, certificate or registration may be issued a temporary license or authorization to practice, effective for not longer than 90 days.*

### Education Information

Do you have a high school diploma? \_\_\_\_\_ Yes \_\_\_\_\_ No Year of Graduation \_\_\_\_\_  
(must provide an official copy of transcript)

Name of High School: \_\_\_\_\_

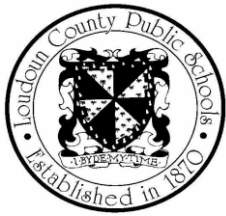
Do you have a GED certificate? \_\_\_\_\_ Yes \_\_\_\_\_ No Year of Completion \_\_\_\_\_  
(must provide an official copy of transcript)

Post-High-School: list educational institutions with years attended **(must provide an official copy of transcript):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have other education, training or certificates? Please list specific dates and certifications.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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### Employment History

Employment History – List most recent first		
Position	Employer and Address	Dates of Employment

What characteristics do you possess that will make you successful as a licensed practical nurse?

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List below the names and addresses of 3 persons who will be providing a reference for you. A reference form is provided at the back of this packet; you will need to make copies for your references.

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

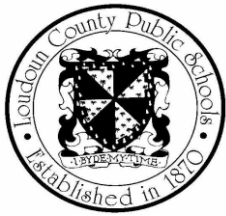
Relationship to Applicant/Position/Title: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Relationship to Applicant/Position/Title: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Relationship to Applicant/Position/Title: \_\_\_\_\_



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## Eligibility of the Applicant

- I am a resident of Loudoun County, Virginia and I am a U.S. citizen  
 I am a resident of Loudoun County, Virginia and I am an eligible non-citizen (must provide original resident alien documentation)  
 I am a resident of Loudoun County, and I am **not** a U.S. citizen or an eligible non-citizen

- Are you able to provide identification to obtain a background check for clinical sites?  Yes  No  
 Have you even been discharged or refused contract renewal?  Yes  No  
 Have you ever been requested to resign from a former position?  Yes  No  
 Have you ever been convicted of a felony, a crime or moral turpitude, or any other offense involving the sexual molestation, physical or sexual abuse or rape of a child?  Yes  No  
 Have you ever entered a plea of guilty or nolo contendere to the charge of a felony, a misdemeanor involving moral turpitude, the physical or sexual abuse or neglect of a child, sexual assault, use or possession of drugs, or obscenity and related offenses?  Yes  No  
 Has a Social Services Department, Child Protective Service Unit or any other governmental agency ever investigated charges of child abuse or neglect against you and determined such charges to be "founded," "probably founded," "reason to suspect," or similar findings?  Yes  No

I hereby authorize the Loudoun County Public Schools to conduct work history, personal reference, child abuse, and police record inquiries to determine my acceptability for entrance into any program at the Academies of Loudoun. Additionally, I hereby authorize and direct any and all federal, state, or local law agencies and any other agencies or offices that may possess the aforesaid information to cooperate and assist the Loudoun County Public Schools and its representatives in its investigation.

I certify that, to the best of my knowledge, the information provided by me in this application is true, and that any misrepresentation or omission of facts is reason for denial of admission.

\_\_\_\_\_  
 Applicant's Signature \_\_\_\_\_  
 Date

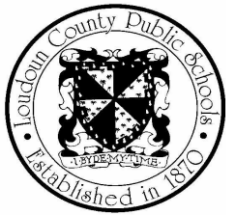
Please return completed application packets by mail or deliver in person to:

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 Attn: Admissions Office  
 42075 Loudoun Academy Drive  
 Leesburg, VA 20175

If you have admissions inquiries, email: [AcademiesAdmissions@lcps.org](mailto:AcademiesAdmissions@lcps.org)

*As required by federal laws and regulations, the Loudoun County School Board does not discriminate on the basis of sex, color, race, religion, handicapping conditions, or national origin in employment or in educational programs and activities.*





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## MATA Practical Nursing - Applicant's Personal Reference

*Please make copies of blank form for references. All information will be kept confidential*

\_\_\_\_\_ has applied for admission to Academies of Loudoun MATA Practical Nursing pathway and has given your name as a reference. Will you please give us your candid opinions and observations of the applicant's suitability for this program?

**High school applicants must have at least one teacher as a reference.**

The applicant is...	Strongly Agree	Agree	Disagree	Strongly Disagree	No opinion or N/A
organized					
on time and prepared					
able to think critically					
able to verbally communicate effectively					
able to communicate effectively in written form					
a team player and works well with others					
able to accept constructive criticism					
able to succeed in a rigorous academic course or program					

What do you consider the applicant's strongest characteristic(s)?

\_\_\_\_\_

\_\_\_\_\_

What do you consider the applicant's weakest characteristic(s)?

\_\_\_\_\_

\_\_\_\_\_

Please tell us anything else that would be helpful to us in our decision process:

\_\_\_\_\_

\_\_\_\_\_

Would you recommend this applicant for the practical nursing program? Circle or highlight your answer.

**Highly Recommend      Recommend      Recommend with Reservations      Do not Recommend**

How long have you known the applicant and in what relationship? \_\_\_\_\_

Name printed with title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: \_\_\_\_\_ Address: \_\_\_\_\_

Email: \_\_\_\_\_

**DO NOT RETURN THIS FORM TO THE APPLICANT \* DO NOT FAX THIS FORM**

Completed reference forms must be emailed to [AcademiesAdmissions@lcps.org](mailto:AcademiesAdmissions@lcps.org) by **12pm (noon) on February 19, 2020**