

College Of Nursing

Additional Required Program Fees & Equipment RN-BS Program

Accepted Applicants into the RN-BS Program are required to fulfill the following requirements by the date indicated.

| * Fee/Document/Equipment | Due Date | |
|---|---|--|
| Student Liability/Malpractice Insurance (Annual Requirement) | December 10, 2025 | |
| Go to http://www.nso.com for purchase information. Approximate cost [~ \$43]. | Note: Students will be required to submit a copy of your Student Liability/Malpractice Insurance | |
| CPR Certification (American Heart Association's "BLS for Healthcare Providers"). For a list of sites offering BLS by the American Heart Association, go to http://www.americanheart.org and select "CPR & ECC". [~ \$50 - \$100] *Red Cross CPR is not acceptable. | Note: Students will be required to provide a photocopy of a signed "BLS for Healthcare Providers" card. | |
| Typhon Group Clinical Tracking System Database to track required documents for clinical clearances (~ \$100) | December 10, 2025 Fee is paid directly to Typhon Group. More info will be provided during orientation. | |
| Background Check and Drug Screening https://portal.castlebranch.com/UK74/package-selection Click - "Please Select" Select Drug screen code: Select Downstate- Select YG72dt - Drug Test [~ \$47.99] Background code: Select Health Prof/Nursing/Pub Health [~ \$141.99] Select: SU41bg - Background check | December 10, 2025 | |
| Course Text Books and Course Point Resources (~ \$200-500) | At the start of each semester, required text and learning resources should be purchased as directed by course faculty. | |
| ATI technology annual cost [~ \$250] ←Subject to Change Students will <u>not</u> need to purchase textbooks for some courses but will use ATI resources instead. Create your account and pay directly to ATI at https://www.atitesting.com | September 12, 2025, EST. To avoid a late fee of \$35, payments must be made before midnight on If you have questions, please contact ATI at https://www.atitesting.com | |

*Please note: Fees/costs are estimates and subject to change.

I have read and understand and accept the **Additional Required Program Fees & Equipment for the RN-BS Program.** Please return the signed and dated Required Program Fees & Equipment Form with your acceptance letter. Thank you.

| Print Name | _Signature | Date |
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