



Herzing University
Bachelor of Science in Nursing

Application for the September Class of 2012

Financial Aid Deadline

June 15, 2012

Application Deadline

June 22, 2012

Notification of Acceptance

Postmarked No Later Than July 13, 2012

Class Start

September 3, 2012

*The University reserves the right to extend the deadline.

**Please read the entire application before proceeding. Application materials will not be returned.
Incomplete applications will not be considered.**

The goal of the nursing program is to prepare students with the knowledge and skills required to provide direct patient care to individuals across the lifespan.

The nursing core curriculum courses must be taken in succession at Herzing University, without a break in registration. A break in registration, whether initiated by the student or the university, will result in termination from the program. Terminated students must reapply to the program and resume coursework at the beginning of the core curriculum.

Courses may be scheduled starting as early as 7:00 a.m. and ending as late as 10:00 p.m. Clinical rotations may occur during days, evenings, nights, and weekends. The student may be required to travel for clinical rotations. Please note that clinical times are directed by the clinical site. Herzing University will comply with those times.

Upon successful completion of the program, students will receive a Bachelor of Science in Nursing or BSN degree. Herzing University graduates are eligible to take the National Council of State Boards of Nursing (NCLEX) licensure to become a Registered Nurse.

Herzing University accepts 32 students for each academic year. Admission is granted once per year. Meeting the minimum requirements for entry to the program does not guarantee admission. The Nursing Admissions Committee will review each application; most qualified applicants are selected based on weighted admission criteria. This process is described below.

- The formula for calculating the nursing applicants admissions score is as follows: $\text{GPA Score} + \text{TEAS Score} = \text{Nursing Admissions Score}$. The score can be anywhere from 0 to 200.
- **GPA Score.** The GPA score is calculated on the applicant's high school or college cumulative grade point average (meaning, the GPA of all schools attended, even schools in which credits may not transfer into the nursing program). If the applicant has completed less than 12 semester credit hours of college courses, the high school GPA is used in the calculation. If the applicant has completed 12 semester credit hours (SCH) or more of college courses, the cumulative college GPA is used in the calculation. If an applicant has a GED and less than 12 SCH of college credits, the default high school GPA of "C" (2.0) that the GED documents will be used.
- The following formula will be used in calculating the GPA score: $\text{GPA} * 25 = \text{GPA Score}$. For instance a student who achieved a GPA of 3.0 would be awarded 75 points.

- Example Score

<u>GPA</u>	<u>Score</u>
4.0	100 points
3.5	87.5 points
3.0	75.0 points
2.5	62.5 points
2.0	50.0 points
1.5	37.5 points
1.0	25.0 points

- **TEAS Percentile Score.** The TEAS Percentile score is calculated by awarding one (1) point for each percentile the student achieved on the TEAS test. For instance, a student who achieve a percentile score of 78% would be awarded 78 points.

- **Nursing Admissions Score.** The Nursing Admissions Score is the sum of the GPA score and the TEAS percentile score. For instance, an applicant with a college GPA of 3.0 and TEAS percentile score of 78% would have a Nursing Admissions score of 153 points (i.e., 75 points + 78 points).
- Required attachments to the application – completed and received by stated deadline.

Each individual who submits an application will receive written notification of acceptance status. **Acceptance information WILL NOT be disclosed over the telephone.** Applicants offered acceptance will have 10 business days to officially accept the invitation to join the program. This will reserve the applicant's place in the nursing program. For applicants who meet the admission criteria, but are not accepted into the program due to the program census being met, those applicants will be placed on an alternate list and will be considered for acceptance if positions become available. Students who are accepted, and who do not start for whatever reason will not be given preference in the next class and will need to submit a new application. Students in the core curriculum who do not achieve a C+ or better in each course will not be allowed to continue into the next semester and will be terminated from the program.

Applicants for the core curriculum must have achieved a C+ or better in each of the select general education courses that include the following: Anatomy & Physiology I, Anatomy & Physiology II, Microbiology, Chemistry, and College Algebra.

Applicants must have completed either high school biology or high school chemistry with a C or better (college level coursework in these areas will satisfy this requirement if a C grade or higher was earned). If applicants have taken a different science course in high school to meet the science requirements, they may appeal to the Academic Dean for considerations in regards to meeting the science criteria.

Although all of the requirements are necessary for admission to the program, please be advised that meeting all the requirements does not imply acceptance in the nursing program. Admission is granted without regard to race, creed, color, gender, national origin, disability.

CPR CERTIFICATION

Cardiopulmonary Resuscitation and Emergency Cardiac Care Healthcare Provider certification is required prior to providing care for patients in the clinical setting. This course will be offered, at no charge, to nursing students during the first semester of the core curriculum. Certification must be maintained throughout enrollment in the program.

BACKGROUND CHECK AND DRUG SCREENING

Students planning a program of study leading to employment in some disciplines (including, but not limited to, health care, nursing, law enforcement and public safety) may be required to undergo a background check and/or drug screen before working in that discipline. If this process results in an adverse finding, the student may not be able to complete the internship or clinical courses, complete the program, sit for certification examinations, or be employed in that discipline.

A student may be subject to drug and/or alcohol screening in conjunction with clinical classes and a positive result from a screening could result in dismissal from the clinical and from the program.

HERZING UNIVERSITY POLICY ON BLOOD BORNE PATHOGENS

Due to the nature of the healthcare profession, students will participate in a learning environment that has the potential of exposure to blood borne pathogens. Accepted students are provided with written policies and instruction on infection control protocols to reduce the risk of disease transmission. The program complies with all institutional, local, state, and federal policies.

The following policy was adopted in an attempt to balance CDC and state guidelines regarding exposure control and to protect the privacy of an infected individual. These guidelines are based on the most current CDC and equivalent state recommendations.

1. Herzing University will not discriminate against any applicant for admission to the program, faculty, students, or patients who are known to have blood borne infectious diseases. As such, Herzing University has no requirement for mandatory testing of any of these individuals for HIV, HBV, or HCV. Tuberculosis testing (Mantoux) is required, as are all immunizations required by the state and participating clinical agencies, prior to admission.
2. It is recommended that all individuals who perform exposure-prone procedures should know their HIV and HBV status and/or their antibody status. It is a requirement that all faculty and students who may come in contact with potentially infectious body fluids receive the HBV vaccination. If an individual declines the vaccine, they must sign a waiver or produce a current titer that establishes immunity of vaccine preventable communicable disease.
3. Faculty and students who are infected with the HIV, HBV, or HCV should not perform exposure-prone invasive procedures unless advised by a physician and/or expert review panel. Certain documentation may be required before submission into the program and clinical sites.
4. Any circumstance involving occupational exposure will be addressed by the faculty and/or safety committee. Herzing University will cover the expense of having the exposed individual tested. Any results regarding the individual's infection status will be protected as confidential to the extent required by law.
5. The one exception to the policy is the patient with active tuberculosis. Those individuals will not be treated by the student until the medical doctor responsible for the management of TB has given clearance.
6. All individuals involved in exposure-prone procedures will adhere to standard precautions for infection control.
7. This policy is subject to change as revisions to current guidelines are made by the CDC and other state and federal agencies.



MINNESOTA DEPARTMENT OF HEALTH LICENSED FACILITIES
SUPPLEMENTAL NURSING SERVICES AGENCIES, EDUCATIONAL PROGRAMS, TEMPORARY
EMPLOYMENT AGENCIES, PROFESSIONAL SERVICES AGENCIES

BACKGROUND STUDY PRIVACY NOTICE

Because the Minnesota Department of Human Services is requesting that you provide private information about yourself, the Minnesota Government Data Practices Act requires that you be informed of the following:

1. Purpose and intended use of the information: Minnesota Statutes, section 144.057, requires the Minnesota Department of Human Services (DHS) to conduct background studies on individuals who have direct contact with patients and residents in hospitals, boarding care homes, outpatient surgical centers, nursing homes, home care agencies, residential care homes, board and lodging establishments registered to provide supportive or health supervision services, individuals employed by supplemental nursing services agencies, and controlling persons of a supplemental nursing services agency; and all other employees in nursing homes. The background studies are to be completed according to the requirements in Minnesota Statutes, chapter 245C. The information requested will be used to perform a background study of you that will include at least a review of criminal conviction records held by the Minnesota Bureau of Criminal Apprehension and records of substantiated maltreatment of vulnerable adults and children. DHS may also later require you to submit additional information and/or your fingerprints if necessary to complete your background study. For all individuals who are subject to background studies by DHS, the corrections system will report new criminal convictions for disqualifying crimes to DHS. County agencies and the Minnesota Department of Health report substantiated findings of maltreatment of minors and vulnerable adults to DHS.
2. Whether you may refuse or are legally required to provide the information: Minnesota Statutes, chapter 245C, states that the individual who is the subject of a study must provide sufficient information to ensure an accurate background study.
3. Known consequences that may arise from supplying the information: Individuals who have histories with the characteristics identified in Minnesota Statutes, chapter 245C, will be disqualified from positions allowing direct contact with (and, where applicable, access to) persons receiving services. Health-related licensing boards will make a determination whether to impose disciplinary or corrective action on individuals regulated by health-related licensing boards who have been determined to be responsible for substantiated maltreatment. Individuals who do not have disqualifying characteristics will not be disqualified.
4. Known consequences that will arise from refusing to supply the requested information: Only items identified as "optional" may be left blank. Refusal to provide the information necessary to ensure an accurate and complete background study will result in your disqualification and an order to the agency or facility to remove you from any position allowing direct contact with (and, where applicable, access to) persons receiving services.
5. Identification of other agencies or entities authorized to receive this information: The information you provide will be shared with the Minnesota Bureau of Criminal Apprehension. If DHS has reasonable cause to believe that other agencies may have information pertinent to a disqualification, the information may also be shared with attorneys, county sheriffs, courts, county agencies, local police, the Federal Bureau of Investigation, the Office of the Attorney General, agencies with criminal record information systems in other states, and juvenile courts. Background study results may be shared with the Minnesota Department of Health, the Minnesota Department of Corrections, the Office of the Attorney General, non-licensed personal care provider organizations, and health-related licensing boards. If you have a disqualifying characteristic, the facility will be told only that you are disqualified and will not be told what caused your disqualification, unless you were disqualified for refusing to cooperate with the background study or for serious and/or recurring maltreatment of a minor or vulnerable adult. The information about you received as part of a background study is classified as private data and, except for the agencies noted, cannot be shared without your consent.

COMPLETING THE APPLICATION

All applicants must **first** pass the university entrance examination at /or above the minimum score established by the university for the nursing program. **THE EXAMINATION MUST BE SUCCESSFULLY COMPLETED BEFORE MOVING FORWARD WITH THE APPLICATION.**

TESTING TIMES ARE AVAILABLE BY APPOINTMENT ONLY. THE EXAMINATION TAKES APPROXIMATELY 3 HOURS AND CAN ONLY BE TAKEN TWICE. PLEASE CALL 763-535-3000 TO RESERVE A SPACE. A \$25.00 NON-REFUNDABLE FEE IS CHARGED FOR EACH SPACE THAT IS RESERVED.

Applicants will be notified immediately upon completion of the examination whether or not they can proceed with the application process.

Upon successful completion of the entrance examination an applicant may begin to complete the remainder of the application.

ALL MATERIALS MUST BE SUBMITTED TOGETHER ALONG WITH THIS APPLICATION FORM. HERZING UNIVERSITY WILL NOT ACCEPT AND IS NOT RESPONSIBLE FOR TRACKING NURSING APPLICATION MATERIALS THAT ARRIVE AT THE UNIVERSITY SEPARATE FROM THE APPLICATION.

SEALED COLLEGE TRANSCRIPTS MUST BE MAILED DIRECTLY TO HERZING UNIVERSITY. (NOTE: STUDENT MUST ALSO HAVE THEIR OFFICIAL COLLEGE TRANSCRIPTS MAILED DIRECTLY TO THE UNIVERSITY FOR CONSIDERATION OF POSSIBLE TRANSFER CREDIT).

The following requirements must be completed and included in the application:

1. Copy of most recent TEAS test scores (If you take the exam at Herzing University, you can get a print-out upon completion of the exam).
2. Sealed college transcript(s) of all previous post-secondary education (if applicable). If you are currently attending classes please submit a transcript to reflect these classes. (PLEASE NOTE: ALL POST-SECONDARY TRANSCRIPTS MUST BE SUBMITTED OR ELSE THE APPLICATION IS CONSIDERED INCOMPLETE. **POST-SECONDARY EDUCATION INCLUDES ANY TRAINING FOR CREDIT AFTER THE HIGH SCHOOL LEVEL. TRANSCRIPTS MUST BE SUBMITTED REGARDLESS OF TRANSFERABILITY OF CREDITS.**)
3. A non-refundable \$125 application fee.
4. Completed (signed and dated by provider) Immunization Record. **Copies of records will not be accepted.**
5. Completed Financial Commitment Agreement.
6. Official copy of your high school transcript or GED certificate.
7. Non-citizens must supply original (INS) documentation to be copied by our staff. Examples of documents are Permanent Resident card, Resident Alien card, I-94 card, and a photo ID.
8. Documentation of previous medical experience. This does not necessarily mean that the applicant has to be certified as a medical or nursing assistant. We are looking for proof of patient interaction in the last one year. Documentation should include either a certificate of completion of formal training or a formal letter from an individual who is familiar with your medical experience. Documentation of the intent to complete a formal training class is adequate **AS LONG AS A RECEIPT OF PAYMENT FOR A SPECIFIC PROGRAM IS ATTACHED.**

HERZING UNIVERSITY
Application for Bachelor of Science Nursing
PLEASE PRINT

Full Legal Name _____
Last First Middle Former name, if applicable

Birth Date _____ Social Security Number _____ Male ___ Female ___

MN Drivers License or ID Number _____

Current Mailing Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Phone _____
Home Cell Work

Current Email Address _____

Race: Asian _____ Hispanic/Latino _____
 Pacific Islander _____ Two or more races _____
 African American _____ Unknown/Other _____
 White _____

If you have attended or been admitted to another program of nursing at a hospital, college or university, please indicate the name and address of the program and your reason for leaving:

Education: Begin with high school and list **ALL** colleges attended or training received. (Use additional sheet if needed.)

Are you currently enrolled in college? Yes No

Name of Institutions	Degree/diploma	Year

Have you ever attended Herzing University or Lakeland Academy? Yes No

Last name when you attended Herzing University or Lakeland Academy? _____

Herzing University Nursing Student Immunization Record

**This form MUST be filled out completely by provider
(each immunization signed and dated by MD, DO, RNC, PA, NP or RN).**

Last Name, First Name, MI		Birth Date (Month/Day/Year)		Student ID#	
Address					
Required Immunization	Dates Immunizations Received OR			Antibody Titre	Provider Signature and Date Must be MD, DO, RNC, PA, NP, or RN (May NOT be student or parent)
Hepatitis B (Hep B) Report 3 doses or titre results	Dose 1 Date	Dose 2 Date	Dose 3 Date		/ / MM/DD/YYYY
Varicella (Chicken Pox) Report 2 doses or self reported disease history or titre results	Dose 1 Date	Dose 2 Date	Self report of disease Y/N		/ / MM/DD/YYYY
Measles (Rubeola) Report 2 doses after age 12 months or titre results	Dose 1 Date	Dose 2 Date			/ / MM/DD/YYYY
Mumps Report 1-2 doses after age 12 months or titre results(only one dose required)	Dose 1 Date	Dose 2 Date			/ / MM/DD/YYYY
Rubella (German Measles) Report 1-2 doses after age 12 months or titre results (only one dose required)	Dose 1 Date	Dose 2 Date			/ / MM/DD/YYYY
Tetanus/Diphtheria (Td) Report most current dose (within 10 years)	Dose Date				/ / MM/DD/YYYY
Required Tuberculin Skin Tests (TST) (PPD)Screening (2-step Mantoux)	Date	Induration	Date	Induration	Provider Signature and Date
Report TWO TST's applied 1-3 weeks apart (within one year)	Step 1 Date	mm	Step 2 Date	mm	/ / MM/DD/YYYY
For any POSITIVE PPD test please complete "Positive Tuberculin Skin Test" Form provided by Herzing University					
Medical Exemptions. Provider must document medical conditions that preclude that administration of a required vaccine or test.					
Explanation of Exemption:					
					/ / MM/DD/YYYY

Herzing University
Student Positive Tuberculin Skin Test Form

Student Name _____

Date of Positive TST _____

1. Chest X-Ray

a. Date Completed _____

b. Results _____

2. Medical Examination

a. Location of Examination:

b. Name and Contact Information of Provider Completing the Exam:

c. Student cleared

i. Yes _____

ii. No _____

Comments:

Provider Printed Name

Provider Signature

Date

HERZING UNIVERSITY
NURSING ACKNOWLEDGEMENT STATEMENT

Please initial each of the following:

_____ I acknowledge that acceptance into the BSN program requires a background check and drug screen.

_____ I acknowledge that I cannot have a conviction that does not meet the requirements of Minnesota State Statutes #245C.14 and #245C.15 (see enclosed) and participate in clinical rotations or be employable in a medical setting.

_____ I acknowledge that I must meet all of the entry requirements to be eligible for acceptance into the nursing program.

_____ I acknowledge that meeting the minimum requirements for the nursing program at Herzing University does not guarantee acceptance into the program.

_____ I acknowledge that I may be in contact with latex during my skills classes, clinical rotations, and in any health care facility (*latex allergies can be accommodated*).

_____ I acknowledge that I must maintain a current Healthcare Provider CPR Certification while in this program.

_____ I acknowledge that I must satisfactorily complete both the theory and clinical components of a course in order to pass the course.

_____ I acknowledge that in order to be a full-time student I may need to attend courses anywhere from 7:00 a.m. – 10:00 p.m. Monday – Friday. Clinical rotations may occur during day, evening, night, or weekend shifts. The student may be required to travel for clinical rotations. Clinical times are directed by the clinical sites. Herzing University will comply with those times.

_____ I acknowledge that I have read and disclosed all the required materials for this application, and I have completed all processes requested in this application with forthrightness. I acknowledge that any exclusion of information will make my application incomplete and/or fraudulent; in which case, my application will not be considered for the nursing program.

Applicant's Name (printed)

Date

Applicant's Signature

Date

ACCREDITATION DISCLOSURE FORM – Minneapolis Campus

1. **Regional Accreditation:** Herzing University is accredited by the Higher Learning Commission and is a member of the North Central Association. The Higher Learning Commission can be contacted at 800-621-7440 or at www.ncahigherlearningcommission.org. That means that educational programs we offer are being offered at an accredited institution. Although regionally accredited institutions tend to recognize one another's credits for transfer purposes to the same course at their institution, Herzing University is not representing that any college will accept your credits in that such decisions are entirely up to the receiving college.

Initial _____

2. **State Approval:** All programs at this Herzing University campus are approved by the state of Minnesota.

Initial _____

3. **Nursing Board Approval:** Herzing University's Bachelor of Science in Nursing program at the Minneapolis campus is approved by the state nursing board. Consequently, graduates are eligible to sit for the National Council of State Boards of Nursing (NCLEX) licensing exam upon successful completion of the program. The passing of this exam allows graduates to work as an R.N. A specialized accreditation is available for the Bachelor of Science in Nursing program. This campus is currently in "applicant" status of this specialized accreditation for this program at this time.

Initial _____

4. **Medical Assisting Programs:** Herzing University's Medical Assisting diploma program at the Minneapolis campus is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) upon the recommendation of the Medical Assisting Education Review Board (MAERB). CAAHEP can be contacted at (727) 210-2350 or www.caahep.org.

Initial _____

5. **Dental Hygiene and Dental Assisting programs:** Herzing University's Dental Hygiene and Dental Assisting programs at the Minneapolis campus are accredited by the Commission on Dental Accreditation of the American Dental Association (ADA). ADA can be contacted at (312) 440-2500 or www.ada.org.

Initial _____

6. **Medical Billing and Insurance Coding program:** Herzing University's Medical Billing and Insurance Coding program at the Minneapolis campus is approved by the American Health Information Management Association (AHIMA). AHIMA can be contacted at (312) 233-1100 or www.ahima.org.

Initial _____

STUDENT NAME (*please print*): _____

STUDENT SIGNATURE: _____ DATE: _____



FINANCIAL COMMITMENT AGREEMENT

Name:	
Program of Interest:	
Desired Start Date:	

As part of the application process into your desired program of study, the school is asking that you complete this Financial Commitment Agreement. A student’s financial commitment is a key factor that will be reviewed and considered when completing the selection process. It is imperative that you understand that you will be evaluated on your financial commitment and ability to pay. If you are selected as an accepted student in this program, it is preferred that you commit to and pay the suggested deposit and monthly payment amount from the chart below. The amounts outlined below are based on Expected Family Contribution (EFC) amounts, which is a number calculated by the US Department of Education based on the data entered into the Free Application for Federal Student Aid (FAFSA). You may be required to contribute more than you indicate below based on the amount of money needed to cover your tuition and fees and you are strongly encouraged to contribute more than the suggested amounts as any efforts you make to reduce your borrowing will be beneficial to you in the long run.

EFC	Suggested Deposit	Suggested Monthly Payment
0-5500	\$50.00	\$50.00
5501-10000	\$150.00	\$150.00
10000-15000	\$200.00	\$200.00
15001-20000	\$300.00	\$300.00
20001-25000	\$400.00	\$400.00
25001 +	\$500.00	\$500.00

Deposit Commitment:	
Monthly Payment Commitment:	

As a school we strongly encourage students to borrow only what is needed to fund their education less any cash payments. The following factors will also be considered as part of the selection process. Please acknowledge your understanding by initialing the applicable points below.

<input type="checkbox"/>	I understand the importance of responsible borrowing and agree to only borrow what is needed to cover my tuition and fee expenses less any cash payment that I have committed to contributing.
<input type="checkbox"/>	I understand that I am applying for acceptance into a selective program of study and financial commitment and ability to pay are used as factors when making the selection process.

I agree to pay the school the amounts indicated above and understand that my acceptance into this program is dependent upon my financial commitment to fund my education.

Applicant Signature

Date

Herzing Official Signature

Date

CERTIFICATION FORM

Return with application form.

YOU MUST INITIAL AND SIGN THE FOLLOWING CERTIFICATIONS FOR YOUR APPLICATION TO BE PROCESSED.

PLEASE INITIAL

1. I have read the nursing program application.	
2. I understand that I am solely responsible for enclosing the list of required attachments with this application.	
3. I understand that if I am offered a place in the program, I will have ten (10) business days to contact the Director of Admissions and accept my place.	
4. I understand my application must be signed and dated. Misrepresentation of application information is sufficient grounds for canceling admission and enrollment.	
5. I understand that the information I have provided on this application and all other application attachments are complete, accurate, and true to the best of my knowledge.	
6. I have been informed of the hours required in nursing program.	
7. I understand that I must provide documentation of High School science requirement or equivalent being fulfilled.	
8. I understand that my 2010- 2011 FAFSA (Free Application for Federal Student Aid) must be completed and receipt of my financial aid information received by the Herzing University Educational Funding Department by the date stated on the front of the application , unless I have made arrangements with the University to not use financial aid.	

Applicant's Signature

Date

APPLICATION ATTACHMENT CHECKLIST

Entrance examination scores	
Sealed copy of your college transcript(s) if applicable	
A \$125 application fee	
Completed immunization form.	
Copy of official high school transcript, or GED certificate	
Copy of post secondary diploma or degree if applicable	
Proof of medical experience within one year	
Original (INS) documentation if applicable	
Completed and signed certification form	
Completed Financial Commitment Agreement	
Completed and signed acknowledgement statement form	
Signed Accreditation Disclosure Form	
Financial Aid on-line application submitted Date Submitted [/ /]	

By signing below, I acknowledge that I have read and disclosed all the required materials for this application and I have completed all processes requested in this application with forthrightness. I acknowledge that any exclusion of information will make my application incomplete and/or fraudulent; in which case, my application will not be considered for the nursing program.

Applicant's Signature

Date

Send applications to:

Herzing University
Nursing Program Admissions Committee
5700 West Broadway
Crystal, Minnesota 55428

Minnesota Statutes

Regarding Criminal Background and Patient Care Providers 245C.14 & 245C.15

245C.14 DISQUALIFICATION.

Subdivision 1. **Disqualification from direct contact.** (a) The commissioner shall disqualify an individual who is the subject of a background study from any position allowing direct contact with persons receiving services from the license holder or entity identified in section 245C.03, upon receipt of information showing, or when a background study completed under this chapter shows any of the following:

- (1) a conviction of, admission to, or Alford plea to one or more crimes listed in section 245C.15, regardless of whether the conviction or admission is a felony, gross misdemeanor, or misdemeanor level crime;
- (2) a preponderance of the evidence indicates the individual has committed an act or acts that meet the definition of any of the crimes listed in section 245C.15, regardless of whether the preponderance of the evidence is for a felony, gross misdemeanor, or misdemeanor level crime; or
- (3) an investigation results in an administrative determination listed under section 245C.15, subdivision 4, paragraph (b).

(b) No individual who is disqualified following a background study under section 245C.03, subdivisions 1 and 2, may be retained in a position involving direct contact with persons served by a program or entity identified in section 245C.03, unless the commissioner has provided written notice under section 245C.17 stating that:

- (1) the individual may remain in direct contact during the period in which the individual may request reconsideration as provided in section 245C.21, subdivision 2;
- (2) the commissioner has set aside the individual's disqualification for that program or entity identified in section 245C.03, as provided in section 245C.22, subdivision 4; or
- (3) the license holder has been granted a variance for the disqualified individual under section 245C.30.

Subd. 2. **Disqualification from access.** (a) If an individual who is studied under section 245C.03, subdivision 1, clauses (2), (5), and (6), is disqualified from direct contact under subdivision 1, the commissioner shall also disqualify the individual from access to a person receiving services from the license holder.

MINNESOTA STATUTES 2008 245C.14

(b) No individual who is disqualified following a background study under section 245C.03, subdivision 1, clauses (2), (5), and (6), or as provided elsewhere in statute who is disqualified as a result of this section, may be allowed access to persons served by the program unless the commissioner has provided written notice under section 245C.17 stating that:

(1) the individual may remain in direct contact during the period in which the individual may request reconsideration as provided in section 245C.21, subdivision 2;

(2) the commissioner has set aside the individual's disqualification for that licensed program or entity identified in section 245C.03 as provided in section 245C.22, subdivision 4; or

(3) the license holder has been granted a variance for the disqualified individual under section 245C.30.

History: 2003 c 15 art 1 s 14; 2004 c 288 art 1 s 50; 2007 c 112 s 33

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245C.15 DISQUALIFYING CRIMES OR CONDUCT.

Subdivision 1. **Permanent disqualification.** (a) An individual is disqualified under section 245C.14 if: (1) regardless of how much time has passed since the discharge of the sentence imposed, if any, for the offense; and (2) unless otherwise specified, regardless of the level of the offense, the individual has committed any of the following offenses: sections 243.166 (violation of predatory offender registration law); 609.185 (murder in the first degree); 609.19 (murder in the second degree); 609.195 (murder in the third degree); 609.20 (manslaughter in the first degree); 609.205 (manslaughter in the second degree); a felony offense under 609.221 or 609.222 (assault in the first or second degree); a felony offense under sections 609.2242 and 609.2243 (domestic assault), spousal abuse, child abuse or neglect, or a crime against children; 609.2247 (domestic assault by strangulation); 609.228 (great bodily harm caused by distribution of drugs); 609.245 (aggravated robbery); 609.25 (kidnapping); 609.2661 (murder of an unborn child in the first degree); 609.2662 (murder of an unborn child in the second degree); 609.2663 (murder of an unborn child in the third degree); 609.322 (solicitation, inducement, and promotion of prostitution); 609.324, subdivision 1 (other prohibited acts); 609.342 (criminal sexual conduct in the first degree); 609.343 (criminal sexual conduct in the second degree); 609.344 (criminal sexual conduct in the third degree); 609.345 (criminal sexual conduct in the fourth degree); 609.3451 (criminal sexual conduct in the fifth degree); 609.3453 (criminal sexual predatory conduct); 609.352 (solicitation of children to engage in sexual conduct); 609.365 (incest); a felony offense under 609.377 (malicious punishment of a child); a felony offense under 609.378 (neglect or endangerment of a child); 609.561 (arson in the first degree); 609.66, subdivision 1e (drive-by shooting); 609.749, subdivision 3, 4, or 5 (felony-level harassment; stalking); 609.855, subdivision 5 (shooting at or in a public transit vehicle or facility); 617.23, subdivision 2, clause (1), or subdivision 3, clause (1) (indecent exposure involving a minor); 617.246 (use of minors in sexual performance prohibited); or 617.247 (possession of pictorial representations of minors). An individual also is disqualified under section 245C.14 regardless of how much time has passed since the involuntary termination of the individual's parental rights under section 260C.301.

(b) An individual's aiding and abetting, attempt, or conspiracy to commit any of the offenses listed in paragraph (a), as each of these offenses is defined in Minnesota Statutes, permanently disqualifies the individual under section 245C.14.

(c) An individual's offense in any other state or country, where the elements of the offense are substantially similar to any of the offenses listed in paragraph (a), permanently disqualifies the individual under section 245C.14.

(d) When a disqualification is based on a judicial determination other than a conviction, the disqualification period begins from the date of the court order. When a disqualification is

based on an admission, the disqualification period begins from the date of an admission in court. When a disqualification is based on a preponderance of evidence of a disqualifying act, the disqualification date begins from the date of the dismissal, the date of discharge of the sentence imposed for a conviction for a disqualifying crime of similar elements, or the date of the incident, whichever occurs last.

(e) If the individual studied commits one of the offenses listed in paragraph (a) that is specified as a felony-level only offense, but the sentence or level of offense is a gross misdemeanor or misdemeanor, the individual is disqualified, but the disqualification look-back period for the offense is the period applicable to gross misdemeanor or misdemeanor offenses.

Subd. 2. 15-year disqualification. (a) An individual is disqualified under section 245C.14 if: (1) less than 15 years have passed since the discharge of the sentence imposed, if any, for the offense; and (2) the individual has committed a felony-level violation of any of the following offenses: sections 256.98 (wrongfully obtaining assistance); 268.182 (false representation; concealment of facts); 393.07, subdivision 10, paragraph (c) (federal Food Stamp Program fraud); 609.165 (felon ineligible to possess firearm); 609.21 (criminal vehicular homicide and injury); 609.215 (suicide); 609.223 or 609.2231 (assault in the third or fourth degree); repeat offenses under 609.224 (assault in the fifth degree); 609.229 (crimes committed for benefit of a gang); 609.2325 (criminal abuse of a vulnerable adult); 609.2335 (financial exploitation of a vulnerable adult); 609.235 (use of drugs to injure or facilitate crime); 609.24 (simple robbery); 609.255 (false imprisonment); 609.2664 (manslaughter of an unborn child in the first degree); 609.2665 (manslaughter of an unborn child in the second degree); 609.267 (assault of an unborn child in the first degree); 609.2671 (assault of an unborn child in the second degree); 609.268 (injury or death of an unborn child in the commission of a crime); 609.27 (coercion); 609.275 (attempt to coerce); 609.466 (medical assistance fraud); 609.498, subdivision 1 or 1b (aggravated first-degree or first-degree tampering with a witness); 609.52 (theft); 609.521 (possession of shoplifting gear); 609.525 (bringing stolen goods into Minnesota); 609.527 (identity theft); 609.53 (receiving stolen property); 609.535 (issuance of dishonored checks); 609.562 (arson in the second degree); 609.563 (arson in the third degree); 609.582 (burglary); 609.59 (possession of burglary tools); 609.611 (insurance fraud); 609.625 (aggravated forgery); 609.63 (forgery); 609.631 (check forgery; offering a forged check); 609.635 (obtaining signature by false pretense); 609.66 (dangerous weapons); 609.67 (machine guns and short-barreled shotguns); 609.687 (adulteration); 609.71 (riot); 609.713 (terroristic threats); 609.82 (fraud in obtaining credit); 609.821 (financial transaction card fraud); 617.23 (indecent exposure), not involving a minor; repeat offenses under 617.241 (obscene materials and performances; distribution and exhibition prohibited; penalty);

624.713 (certain persons not to possess firearms); chapter 152 (drugs; controlled substance); or a felony-level conviction involving alcohol or drug use.

(b) An individual is disqualified under section 245C.14 if less than 15 years has passed since the individual's aiding and abetting, attempt, or conspiracy to commit any of the offenses listed in paragraph (a), as each of these offenses is defined in Minnesota Statutes.

(c) For foster care and family child care an individual is disqualified under section 245C.14 if less than 15 years has passed since the individual's voluntary termination of the individual's parental rights under section 260C.301, subdivision 1, paragraph (b), or 260C.301, subdivision 3.

(d) An individual is disqualified under section 245C.14 if less than 15 years has passed since the discharge of the sentence imposed for an offense in any other state or country, the elements of which are substantially similar to the elements of the offenses listed in paragraph (a).

(e) If the individual studied commits one of the offenses listed in paragraph (a), but the sentence or level of offense is a gross misdemeanor or misdemeanor, the individual is disqualified but the disqualification look-back period for the offense is the period applicable to the gross misdemeanor or misdemeanor disposition.

(f) When a disqualification is based on a judicial determination other than a conviction, the disqualification period begins from the date of the court order. When a disqualification is based on an admission, the disqualification period begins from the date of an admission in court. When a disqualification is based on a preponderance of evidence of a disqualifying act, the disqualification date begins from the date of the dismissal, the date of discharge of the sentence imposed for a conviction for a disqualifying crime of similar elements, or the date of the incident, whichever occurs last.

Subd. 3. Ten-year disqualification. (a) An individual is disqualified under section 245C.14 if: (1) less than ten years have passed since the discharge of the sentence imposed, if any, for the offense; and (2) the individual has committed a gross misdemeanor-level violation of any of the following offenses: sections 256.98 (wrongfully obtaining assistance); 268.182 (false representation; concealment of facts); 393.07, subdivision 10, paragraph (c) (federal Food Stamp Program fraud); 609.21 (criminal vehicular homicide and injury); 609.221 or 609.222 (assault in the first or second degree); 609.223 or 609.2231 (assault in the third or fourth degree); 609.224 (assault in the fifth degree); 609.224, subdivision 2, paragraph (c) (assault in the fifth degree by a caregiver against a vulnerable adult); 609.2242 and 609.2243 (domestic assault);

609.23 (mistreatment of persons confined); 609.231 (mistreatment of residents or patients); 609.2325 (criminal abuse of a vulnerable adult); 609.233 (criminal neglect of a vulnerable adult); 609.2335 (financial exploitation of a vulnerable adult); 609.234 (failure to report maltreatment of a vulnerable adult); 609.265 (abduction); 609.275 (attempt to coerce); 609.324, subdivision 1a (other prohibited acts; minor engaged in prostitution); 609.33 (disorderly house); 609.377 (malicious punishment of a child); 609.378 (neglect or endangerment of a child); 609.466 (medical assistance fraud); 609.52 (theft); 609.525 (bringing stolen goods into Minnesota); 609.527 (identity theft); 609.53 (receiving stolen property); 609.535 (issuance of dishonored checks); 609.582 (burglary); 609.59 (possession of burglary tools); 609.611 (insurance fraud); 609.631 (check forgery; offering a forged check); 609.66 (dangerous weapons); 609.71 (riot); 609.72, subdivision 3 (disorderly conduct against a vulnerable adult); repeat offenses under 609.746 (interference with privacy); 609.749, subdivision 2 (harassment; stalking); 609.82 (fraud in obtaining credit); 609.821 (financial transaction card fraud); 617.23 (indecent exposure), not involving a minor; 617.241 (obscene materials and performances); 617.243 (indecent literature, distribution); 617.293 (harmful materials; dissemination and display to minors prohibited); or violation of an order for protection under section 518B.01, subdivision 14.

(b) An individual is disqualified under section 245C.14 if less than ten years has passed since the individual's aiding and abetting, attempt, or conspiracy to commit any of the offenses listed in paragraph (a), as each of these offenses is defined in Minnesota Statutes.

(c) An individual is disqualified under section 245C.14 if less than ten years has passed since the discharge of the sentence imposed for an offense in any other state or country, the elements of which are substantially similar to the elements of any of the offenses listed in paragraph (a).

(d) If the individual studied commits one of the offenses listed in paragraph (a), but the sentence or level of offense is a misdemeanor disposition, the individual is disqualified but the disqualification lookback period for the offense is the period applicable to misdemeanors.

(e) When a disqualification is based on a judicial determination other than a conviction, the disqualification period begins from the date of the court order. When a disqualification is based on an admission, the disqualification period begins from the date of an admission in court. When a disqualification is based on a preponderance of evidence of a disqualifying act, the disqualification date begins from the date of the dismissal, the date of discharge of the sentence imposed for a conviction for a disqualifying crime of similar elements, or the date of the incident, whichever occurs last.

Subd. 4. **Seven-year disqualification.** (a) An individual is disqualified under section 245C.14 if: (1) less than seven years has passed since the discharge of the sentence imposed, if any, for the offense; and (2) the individual has committed a misdemeanor-level violation of any of the following offenses: sections 256.98 (wrongfully obtaining assistance); 268.182 (false representation; concealment of facts); 393.07, subdivision 10, paragraph (c) (federal Food Stamp Program fraud); 609.21 (criminal vehicular homicide and injury); 609.221 (assault in the first degree); 609.222 (assault in the second degree); 609.223 (assault in the third degree); 609.2231 (assault in the fourth degree); 609.224 (assault in the fifth degree); 609.2242 (domestic assault); 609.2335 (financial exploitation of a vulnerable adult); 609.234 (failure to report maltreatment of a vulnerable adult); 609.2672 (assault of an unborn child in the third degree); 609.27 (coercion); violation of an order for protection under 609.3232 (protective order authorized; procedures; penalties); 609.466 (medical assistance fraud); 609.52 (theft); 609.525 (bringing stolen goods into Minnesota); 609.527 (identity theft); 609.53 (receiving stolen property); 609.535 (issuance of dishonored checks); 609.611 (insurance fraud); 609.66 (dangerous weapons); 609.665 (spring guns); 609.746 (interference with privacy); 609.79 (obscene or harassing telephone calls); 609.795 (letter, telegram, or package; opening; harassment); 609.82 (fraud in obtaining credit); 609.821 (financial transaction card fraud); 617.23 (indecent exposure), not involving a minor; 617.293 (harmful materials; dissemination and display to minors prohibited); or violation of an order for protection under section 518B.01 (Domestic Abuse Act).

(b) An individual is disqualified under section 245C.14 if less than seven years has passed since a determination or disposition of the individual's:

(1) failure to make required reports under section 626.556, subdivision 3, or 626.557, subdivision 3, for incidents in which: (i) the final disposition under section 626.556 or 626.557 was substantiated maltreatment, and (ii) the maltreatment was recurring or serious; or

(2) substantiated serious or recurring maltreatment of a minor under section 626.556, a vulnerable adult under section 626.557, or serious or recurring maltreatment in any other state, the elements of which are substantially similar to the elements of maltreatment under section 626.556 or 626.557 for which: (i) there is a preponderance of evidence that the maltreatment occurred, and (ii) the subject was responsible for the maltreatment.

(c) An individual is disqualified under section 245C.14 if less than seven years has passed since the individual's aiding and abetting, attempt, or conspiracy to commit any of the offenses listed in paragraphs (a) and (b), as each of these offenses is defined in Minnesota Statutes.

(d) An individual is disqualified under section 245C.14 if less than seven years has passed since the discharge of the sentence imposed for an offense in any other state or country, the elements of which are substantially similar to the elements of any of the offenses listed in paragraphs (a) and (b).

(e) When a disqualification is based on a judicial determination other than a conviction, the disqualification period begins from the date of the court order. When a disqualification is based on an admission, the disqualification period begins from the date of an admission in court.

When a disqualification is based on a preponderance of evidence of a disqualifying act, the disqualification date begins from the date of the dismissal, the date of discharge of the sentence imposed for a conviction for a disqualifying crime of similar elements, or the date of the incident, whichever occurs last.

(f) An individual is disqualified under section 245C.14 if less than seven years has passed since the individual was disqualified under section 256.98, subdivision 8.

Subd. 5. **Mental illness.** The commissioner may not disqualify an individual subject to a background study under this chapter because that individual has, or has had, a mental illness as defined in section 245.462, subdivision 20.

History: 2003 c 15 art 1 s 15; 1Sp2003 c 14 art 6 s 7; 2004 c 288 art 1 s 51-53; 2005 c 136 art 6 s 2; 1Sp2005 c 4 art 1 s 30-33; 2006 c 212 art 3 s 17; 2007 c 112 s 34-37