# TROY UNIVERSITY
## NURSING INFORMATICS CERTIFICATE
Certificate Plan and Progress Record
**17 Semester-Hour NIS Post-Master's Certificate Program**

Name: [                    ]  Student ID#: [            ]  Campus: [            ]

Address: [                        ]  Email: [                    ]

Copy of transcript must be attached.  May not use "Student Academic Credits" or "Academic Evaluation" report.

**CERTIFICATE REQUIREMENTS:**

1. Official transcript of all academic work
2. Unconditional Admission
3. 17 (NIS-Certificate) Semester hours of credit minimum
4. Meet residency requirements
5. No more than 6 semester hours below "B"
6. Overall GPA of 3.0
7. All credit earned within 5 years of graduation
8. Intent to Graduate filed

**REQUIRED CORE COURSES:**  (17 Semester Hours)

| | | | | | |
|---|---|---|---|---|---|
| NSG 6631 | Concepts of Health Care Informatics | 3 | | | |
| NSG 6632 | Theoretical Foundations of Nursing Informatics | 2 | | | |
| NSG 6633 | Health Care Information Systems | 3 | | | |
| NSG 6634 | Role of the Nursing Informatics Specialist | 2 | | | |
| NSG 6635 | Informatics Applications | 3 | | | |
| NSG 6636 | Nursing Informatics Internship (200 clinical hours) | 4 | | | |

**ITEMS TO BE DISCUSSED:**

- [ ] 1. One term limit to have transcript(s) and test scores on file
- [ ] 2. Temporary, Conditional, Unconditional Admission
- [ ] 3. Availability of faculty for academic advising
- [ ] 4. Petition for transfer credit once unconditionally admitted
- [ ] 5. Class attendance
- [ ] 6. Drop and Withdrawal procedures; deadlines & consequences
- [ ] 7. Petition for Incomplete grade
- [ ] 8. Student participation in course and program evaluation
- [ ] 9. Other [                    ]

| Admission Status: | Date | Initials |
|---|---|---|
| Conditional | | |
| Unconditional | | |
| Residency | | |
| Test Scores | | |
| Comps | | |