The University of Oklahoma Health Sciences Center Fran & Earl Ziegler College of Nursing Traditional Program – Duncan Campus Enrollment Form

Student ID:	Name:	
Phone:	Email:	
	ed in the below classes while an active student in th UHSC College of Nursing. I understand that my enro	

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:

Junior Year—Fall		Junior Year—Spring	
NURS-3023-400/401 Clinical Nursing I & Lab	3 hrs	NURS-3114-400/401 Clinical Nursing II & Lab	4 hrs
NURS-3033-400 Human Experience—Health	3 hrs	NURS-3134-400 Human Exp -Acute & Chronic Illness I	4 hrs
NURS-3043-400/401 Health Assessment	3 hrs	NURS-3054-400 Psychosocial Nursing	4 hrs
NURS-3073-400 Intro to Professional Nur Pract 3 hrs		NURS-3162-400 Human Experience in Disability	2 hrs
NURS-3083-400 Pharmacology in Nursing	3 hrs		
Senior Year—Fall		Senior Year—Spring	
Senior Year—Fall NURS-4054-400/401 Clinical Nursing III & Lab	4 hrs		4 hrs
		NURS-4124-400/401 Clinical Nursing IV	4 hrs 3 hrs
NURS-4054-400/401 Clinical Nursing III & Lab		NURS-4124-400/401 Clinical Nursing IV	3 hrs
NURS-4054-400/401 Clinical Nursing III & Lab NURS-4034-400 Hum Exp—Acute & Chronic Illness	ıı 4 hrs	NURS-4124-400/401 Clinical Nursing IV NURS-4123-400 The Practice of Leadership	3 hrs
NURS-4054-400/401 Clinical Nursing III & Lab NURS-4034-400 Hum Exp—Acute & Chronic Illness NURS-4144-400 Family Focus Nursing	ıı 4 hrs 4 hrs	NURS-4124-400/401 Clinical Nursing IV NURS-4123-400 The Practice of Leadership NURS-4213-400 Hum Exp—Acute & Chronic Illness III	3 hrs 3 hrs