

Spring 2010 Registration

Fall 2008 Cohort

Total credit hours: 13

NURS 3548	Lecture & Lab	Care of Children/Newborn (Pedi)
NURS 4670	Lecture & Lab	Nurse as Coordinator of Care (Leadership)
NURS 4250	Lecture	Professional Nursing Issues

Spring 2009 Cohort – Accelerated

Total credit hours: 15

NURS 4318	Lecture	Nurse as Research Consumer
NURS 4628	Lecture & Lab	Care of Adults II (Med Surg II)
NURS 4670	Lecture & Lab	Nurse as Coordinator of Care (Leadership)

Summer 2009 Cohort – Accelerated

Total credit hours: 19*

*Students MUST complete enclosed *Course Overload Form*

NURS 3550	Lecture & Lab	Care of Parents/Newborn (OB)
NURS 4628	Lecture & Lab	Care of Adults II (Med Surg II)
NURS 4564	Lecture & Lab	Care of Psyc. Clients
NURS 4318	Lecture	Nurse as Research Consumer

Fall 2009 Cohort

Total credit hours: 14

NURS 3628	Lecture & Lab	Care of Adults I (Med Surg I)
NURS 3550	Lecture & Lab	Care of Parents/Newborn (OB)
NURS 3342	Lecture	Pharmacologic Principles

Spring 2010 Cohort

Total credit hours: 13

NURS 3614	Lecture & Lab	Fundamentals
NURS 3435	Lecture & Lab	Health Assessment
NURS 3318	Lecture	Therapeutic Communication

To register for courses, please login to SAIL at <http://sail.tamucc.edu/>.
Registration begins on November 16 and you will register based on your classification.
November 17-Senior/Post Baccalaureate
November 18-Junior
November 19-Sophomore

TEXAS A&M UNIVERSITY-CORPUS CHRISTI
College of Nursing and Health Sciences

COURSE OVERLOAD
Summer 2009 Cohort

Name: _____ Date: _____

Student ID: _____ Phone: _____

Major: NURS [] NURA [X] HLSC [] GPA: _____

Freshman [] Sophomore [] Junior [] Post Baccalaureate [] Senior []

Reason for Overload:
Program requirement – 19 hours

Semester: **Spring 2010**

Call No.	Course/Section	Credits	Call No.	Course/Section	Credits
_____	NURS 3550_____	5	_____	NURS 3550_____	<u>0</u>
_____	NURS 4628_____	6	_____	NURS 4628_____	<u>0</u>
_____	NURS 4564_____	5	_____	NURS 4564_____	<u>0</u>
_____	NURS 4318_____	<u>3</u>			

Are you working? If yes, type of job and hours per week: _____

I understand this will be a challenging schedule (Please sign below)

(Student's Signature)

Office Use:

Dean's Notes: Transcript Attached [] Student file Attached []

Approved [] Dissapproved []

Dean/Associate Dean's Signature

Date