La Roche College
FORENSIC NURSE CERTIFICATE PROGRAM GUIDE
Certificate: Forensic Nurse
Department: Nurse

Student Name______________________________________
I.D. Number__________________________

First Year Student  Transfer
Change of Major  Readmit

Unofficial Eval Completed by/date:_________________________

This is the unofficial evaluation of your credits to date including transfer credits (if applicable) in your chosen major. This evaluation is official when all official transcripts for all previous college work are received and reviewed for transferability by the Registrar's Office AND the Registrar's signature is included on the bottom of the page.

PURPOSE: The Forensic Nursing program is offered in conjunction with the Criminal Justice program.

REQUIREMENTS: To successfully complete the Forensic Nurse certification, the following coursework is required:
- 10 credits of Required Courses
- A minimum number of 10 credits is required for certification, all courses must be taken at La Roche College

-----------------------------------------------------------------------------------------------------------------------------

REQUIRED COURSES: 10 CREDITS

| CRIM101 | Intro to the Criminal Justice System | 3 |
| CRIM340 | Crime Scene and Forensics & Laboratory | 3 |
| NSG410  | Foundations of Forensic Nursing     | 4 |

*The courses for this program must be taken in sequence. CRIM340 and NSG410 may be taken concurrently.

-----------------------------------------------------------------------------------------------------------------------------

FOR REGISTRAR USE ONLY:

<table>
<thead>
<tr>
<th>Required Courses</th>
<th>TOTAL</th>
<th>Completed</th>
<th>Need</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>La Roche College Credit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>10</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Registrar Signature__________________________________________Date________________

Advisor Signature__________________________________________Date________________

(When signed by Advisor, all required coursework/credits have been completed for graduation.)