CERTIFIED NURSING ASSISTANT (CNA)

TRAIN TO BE A CERTIFIED NURSING ASSISTANT

With a growing elderly population on Long Island, the long-term care industry is expanding and the demand for Certified Nursing Assistants (CNAs) is increasing. This course will provide students with the technical skills to offer necessary care to patients as well as the critical thinking and communication skills to deliver individualized assistance to those in need of care. This course also provides an excellent entry point for students interested in entering and eventually advancing in the health care profession. CNAs can work in a variety of settings including hospitals, nursing homes, adult day care and assisted living facilities.

COURSE INFORMATION

Nassau Community College, in partnership with the VEEB School of Nursing, is offering an 11-week Certified Nursing Assistant (CNA) program. Students will learn patient care techniques such as grooming, feeding, transporting and administering treatments as well as how to document patients’ vital signs and symptoms. Course topics include: anatomy, physiology, nutrition, infection control, and legal and ethical policies. This course prepares students to provide nursing care to the elderly, those with cognitive and mental disabilities and others in need of nursing services.

Textbook, background check, materials and certifying exam are additional costs. Students will need to purchase light blue scrubs and a stethoscope.

CE1 243 B1 Meets: Monday and Wednesday, 6:00pm-9:00pm and Saturdays on campus from 8:00am-2:30pm (on 3/2, 3/9, 3/16 and 3/23) and on Saturdays at nursing home from 8:00am-1:00pm (on 3/30, 4/6, 4/13, 4/27, 5/4 and 5/11)

February 25 - May 15, 2019
Registration deadline is February 18, 2019.
Background check and health screening deadline is March 1, 2019.

Fee: $1,700

CERTIFICATIONS

Basic Life Support for Health Care Providers can be earned during the course. Clinical rotations will be conducted at a local nursing home. Students must arrange their own transportation to the nursing home on the Saturday sessions scheduled for clinical rotations.

Students must fulfill the following requirements in order to participate in the course:
• 18 years of age
• Submit High School Diploma or equivalent
• Complete background check*
• Meet health screening requirements

Students must complete the full 120 hours of training (90 classroom/lab hours and 30 clinical rotation hours) to sit for the New York State certifying exam.

*Applicants will be responsible to complete a background check. Once registered, a student will be provided information on completing the background check. Students are required to pay the cost of the background check. If you have been convicted of a felony, you should contact the Center for Workforce Development prior to registering for this program. A felony conviction may prevent you from participating in a clinical rotation/externship portion of the program. All cases will be reviewed on an individual basis. If it is determined that a student is not eligible to go into a clinical setting, the student may be allowed to continue with only the classroom portion of the program and may not meet requirements to sit for a certifying exam. The refund policy will be adhered to regardless of a student’s eligibility for the clinical rotation/externship of any program.

For further information, please visit ncc.edu/workforcedevelopment

CENTER FOR WORKFORCE DEVELOPMENT
Phone: 516.572.7487
Email: cwd@ncc.edu
REGISTRATION FORM

Please answer all questions on this form and send it together with your check, money order, or credit card information to:

OFFICE OF WORKFORCE DEVELOPMENT & LIFELONG LEARNING
Nassau Community College
One Education Drive
Garden City, New York 11530-6793

Make check payable to: Nassau Community College
OR fax the form with credit card information to:
516.828.3507

Last Name ____________________________________________

Complete First Name ____________________________________

Address ______________________________________________

City _____________________________ Zip _________________

Home Phone: ( ) ________________________________

Cell Phone: ( ) ________________________________

Work Phone: ( ) ________________________________

*Birthdate: mm/dd/yyyy __ __/ __ __/ __ __ __

Have you ever taken any courses at NCC?  ❑ Yes  ❑ No

*required*

How did you hear about our courses?

❑ Flyer ❑ Social Media

❑ Website ❑ Friend

❑ Brochure ❑ Other

e-mail: ___________________________________________

NCC ID #: ________________________________

COURSE SELECTION

<table>
<thead>
<tr>
<th>CED #</th>
<th>SECTION</th>
<th>COURSE TITLE</th>
<th>DAY</th>
<th>FEE</th>
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</thead>
<tbody>
<tr>
<td>1243</td>
<td>B1</td>
<td>Certified Nursing Assistant</td>
<td>M/W/Sat</td>
<td>$1,700</td>
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</tbody>
</table>

Total Amount: $1,700

Non-Credit Refund Policy: Tuition is refundable when a course is canceled by the College. Tuition is refundable to the student whose written request for withdrawal has been received by the Office of Workforce Development & Lifelong Learning prior to the beginning of the class. A 50% refund of tuition may be made to the student who has applied in writing to the Office of Workforce Development & Lifelong Learning prior to the second session of the class. NO REFUNDS WILL BE MADE AFTER THE SECOND CLASS MEETING OF ANY CLASS. Please be advised that if a refund is due it will take approximately 2-3 weeks to be processed.

CREDIT CARD PAYMENT INSTRUCTIONS:

I authorize the use of my credit card for full payment of the amount of my course registration as indicated on this non-credit registration application.

Students with overdue tuition and fees may be referred to a collection agency and will incur additional liabilities of up to 33% to cover all associated collection cost processes.

Step 1: Print Cardholder’s name
(as it appears on the credit card).

Step 2: Provide Cardholder’s signature:

Step 3: Please read: I certify that there is sufficient credit amount on the card listed below to cover the fee charges shown on the accompanying Registration Form. Otherwise, I understand the lack of approval by my credit card company will result in cancellation of this registration for non-payment.

Step 4: Card Information:

PLEASE Check ONE: ❑ VISA ❑ Mastercard ❑ Discover ❑ American Express

Card Number: __________________________________________ Date of Expiration: __ __/ __ __ __ __