I am applying to the
Adult Long-Term Nurse Aid (CNA)
Program for Spring 2019

General Information

(_There is a minimum of 10 students required to begin a class, any class not meeting this requirement will be canceled._)

Incomplete applications will not be considered

Adult Long-Term Care Nurse Aide (Nursing Assistant)

This 90 clock hour, 10 week course is designed to prepare the student to assist in providing care as a member of the of the health care team in a skilled nursing facility under the direction of health care providers through didactic instruction (42 clock hours), lab (28 hours) and clinical (20 clock hours). The components of this course include: Fundamentals of Long-Term Care Assisting; Long-Term Care Concepts and Skills; Human Needs; and Special Care Procedures. (Sch: 3 lecture, 2 lab, 1 clinical). For additional information call (662) 621-4687.

Application Deadline for the Adult Long Term Nurse Aid Certificate Program is November 16, 2018. The class will begin February 12, 2019.

Application Process for all Short-Term programs:
1. Fill out the attached packet
2. Return the following either by mail or in person to the Coahoma Community College Robert G. Mason Health Science Building, Nurse Aide Program, 901 Ohio Street, Clarksdale, MS 38614
   a. Enclosed CCC Health Science Application
   b. Enclosed Coahoma Community College Application
   c. Official High School Transcript/or GED certificate
   d. Signed and witnessed Background Check Policy and Consent
   e. Signed and witnessed Drug Abuse Policy and Consent
   f. Health Science Short-Term Performance Standards form
   g. If you have attended college, submit official college transcripts
   h. Official sealed High School Transcript/GED Certificate
   i. Submit Immunization Form 121
      a. Required immunizations include
         i. MMR
         ii. Hepatitis B series
         iii. Evidence of vaccine or proof of titer for Hepatitis B or declination of Hepatitis B

        iv. Varicella (chickenpox) immunization or positive serology titer for varicella

        v. 2 – step Tuberculosis (TB) Skin Test

    b. Immunizations may be completed after admission but are required before participation in the clinical portion of program begins.

j. No ACT is required

k. All applicants must take The Adult Basic Education Test (TABE) with a composite of 10 or better in Reading and Mathematics.

3. After receipt of the above forms, you will be scheduled for The Adult Basic Education (TABE) test.

4. You will be notified of your admission status no later than 10 working days after the close of the application deadline.

Post Acceptance Requirements

- ***A "unannounced" Drug Screen and background check will be scheduled after admission to the program and the costs will come out of fees.***
- You must submit the attached Health Science Physical Evaluation form signed by your physician or their representative.

COAHOMA COMMUNITY COLLEGE
HEALTH SCIENCE SHORT-TERM PROGRAMS

Mailing Address:	Physical Location:
3240 Friars Point Road	901 Ohio Street
Clarksdale, Mississippi 38614	Clarksdale, Mississippi 38614
Telephone:	Website Address:
(662)621-4687 (CNA)	
http://www.coahomacc.edu/healthsciences	

Type of Programs: Certificate

Length of Time:

Adult Long-Term Care Nurse Aide (Nursing Assistant)
Length of Time: Fall semester- 90 clock hours
    (Tuesdays, Wednesday and Thursdays 5:00 pm to 9:00 pm plus some weekend clinical rotations)

Upon Successful Completion:
- Certificate of Completion Nurse Aide/Nursing Assistant
- Eligible to take the National Nurse Aide Assessment

Estimated Costs/Fees: $545 Full Fee

COAHOMA COMMUNITY COLLEGE
HEALTH SCIENCE SHORT-TERM CERTIFICATE PROGRAMS
APPLICATION

Coahoma Community College complies with all applicable laws regarding affirmative action and equal opportunity in all its activities and programs and does not discriminate against anyone protected by law because of age, color, disability, national origin, race, religion, sex, handicap, or status as a veteran or disabled veteran.

I am applying to the Adult Long-Term Nurse Aid Program

Date of Birth_____ Social Security Number_____

Student's
Name_____
          (Last)   (First)   (Middle)   (Maiden)

Address_____
        (Street)   (City)   (State)   (Zip)   (County)

Mailing
Address_____

Telephone Number(s) _____
          (Home)   (Work)   (Cell)
E-mail Address _____ U. S. Citizen? Yes____ No_____

Have you ever been admitted to CCC? Yes_____ No_____
When_____

If yes, under what name? _____

PRIOR EDUCATION:

High School graduation date_____ High School GPA_____ GED _____

College Degrees
earned_____

Last college
attended_____

Are you currently enrolled in college courses? _____ Expected completion date _____

ACT score (composite) if Available _____ Courses presently enrolled in_____

_____

Have you ever been convicted of, plead no contest to, or are charges pending against you for a
      felony or misdemeanor in any state?   (Includes moving vehicle violations) YES
    ____ NO ____

If yes, please explain _____

_____

Have you ever been convicted of a felony, or plead guilty to, or plead no contest to a felony of
possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, sex
offense listed in Section 45-33-23 (f), child abuse, arson, grand larceny, burglary, gratification of
lust or aggravated assault, or felonious abuse and/or battery of a vulnerable adult?

YES ___   NO ____

If yes, please explain _____

_____

All applicants should be advised of the following:
1. Any statement made on this application which is false and known to be false by the
   applicant at the time of making such statement, shall be deemed fraudulent and
   subject the applicant to disciplinary proceedings.
2. Admission to the Nurse Aide Program may be denied based on the results of the
   criminal background check.

I certify that the information on this application is true and accurate.

_____   _____
Applicant's Signature   Date

> ***You must complete the CCC application on the next page or you can complete the CCC online Application by clicking here or at http://www.coahomacc.edu/admissions-financial-aid/admissions/index.***

COAHOMA COMMUNITY COLLEGE

OFFICE OF ADMISSIONS & RECRUITMENT
3240 FRIARS POINT ROAD
CLARKSDALE, MS 38614

APPLICATION FOR ADMISSION

WEBSITE: www.coahomacc.edu
TELEPHONE: 1-866-470-1CCC

Admission Type (check one): ____ New (First-time student) ____ Re-Admit (Returning student) ____ Transfer (Attended other college (s) ____ Dual Enrollment (Attending high school & CCC)

Plan to attend CCC: 20____ ____ Fall ____ Spring ____ Summer I ____ Summer II

Social Security Number: _____ - _____ - _____ Proposed Major _____

Legal Name: _____
Last   First   Middle   Maiden

Mailing Address: _____
Street/P. O. Box   City   State   Zip   County

Physical Address: _____
Street   City   State   Zip   County

Date of Birth: ____/____/____ Place of Birth (city, state): _____ Email: _____

Telephone: ( ) _____   ( ) _____   ( ) _____
Home   Cell   In Case of Emergency

U. S. Citizen? ___Yes ___No   Ethnicity: Are you Hispanic/Latino? ___Yes ___No
What's your Race? ___Black/African American ___White ___Asian ___American Indian/Alaska Native
___Native Hawaiian/Other Pacific Islander ___two or more races   Gender: ___Male ___Female

Parent/Guardian Information: *(If under the age of 21)* *(If guardian must provide legal guardianship documents)*

Check one: ___Parent ___Guardian ___Spouse (if applicable) Name: _____
Last   First

Mailing Address: _____
Street or P. O. Box   City   State   Zip

Student Information:
High School Attended: _____ Address: _____
Name of high school   City   State   Zip

Graduate: ___Yes ___No   Special Certificate: ___Yes ___No   GED: ___Yes ___No Date: _____
Date: _____   Date: _____   Test Location (city, state): _____

Have you taken the ACT? ___Yes ___No Date Taken: ____/____/____ Receiving Veterans benefits? ___Yes ___No

College Information: *Please list any college you have attended, including CCC. An official transcript must be requested and sent to the admissions office for EACH college attended. Failure to list complete and accurate information could result in the cancellation of your enrollment.*

_____/_____
_____/_____

WARNING: ANY PERSON KNOWINGLY MAKES A FALSE STATEMENT OF MISREPRESENTATION ON THIS FORM IS SUBJECT TO PENALTIES WHICH MAY INCLUDE DISMISSAL FROM THE INSTITUTION. FINES OR IMPRISONMENT UNDER THE U. S. CRIMINAL CODE AND 20 U.S.C.1097

Applicant's signature: _____ Date: _____

COAHOMA COMMUNITY COLLEGE
HEALTH SCIENCE SHORT-TERM CERTIFICATE PROGRAMS

DRUG ABUSE POLICY

It is the goal of Coahoma Community College to maintain an environment that is free from the effects of intoxicants or other behavior affecting substances. It is the college's belief that a drug free environment is to the benefit of students and employees of Coahoma Community College as well as the surrounding community.

Once admitted to the Nursing Aide Program, unannounced and/or random drug screens will be done. In addition, if a student exhibits any sensory symptoms or behavior indicative of being under the influence of mind altering substances, a drug screen will be required immediately. Refusal to be tested will result in program dismissal.

All students must have evidence of a negative drug screen when tested.

I, _____, have read and understand the substance use policy of Coahoma Community College. I grant permission for drug and alcohol testing of myself and acknowledge consent by this signature affixed hereto. I grant permission for the laboratory facility to release lab results to Coahoma Community College.

I understand that I am responsible for providing written documentation from my physician regarding controlled substances that I am taking that could be positively identified in a drug profile.

_____
Student Signature   Date

_____
Witness   Date

*Return this completed form with your application information.

COAHOMA COMMUNITY COLLEGE
HEALTH SCIENCES SHORT-TERM CERTIFICATE PROGRAMS

Performance Standards for Admission and Progression

The following performance standards provide descriptions of basic cognitive, sensory, affective, and psychomotor requirements for successful Nurse Aide Program completion. Applicants and students who cannot meet one or more of the standards will be considered on an individual basis in terms of whether reasonable modification/accommodation can be made. Reasonable accommodations will be examined in accordance with the Americans with Disabilities Act (ADA) as well as the Performance Standards for Admission and Progression.

In order to successfully complete the Nurse Aide Program, an applicant/student must be able to do the following:

1. **Demonstrate critical thinking skills**.
    Examples
    - make decisions using logic, creativity and reasoning to make sound clinical judgments based on standards of Nurse Aide
    - demonstrate arithmetic ability to use measuring tools and able to tell time

2. **Display interpersonal skills sufficient to interact with individuals, families, and groups in a variety of settings in the community.**
    Examples
    - respect differences among clients and exhibit an attitude accepting of clients as individuals
    - establish rapport in order to communicate effectively with clients, families, significant others, and health team members
    - work effectively in small groups as a team member

3. **Demonstrate appropriate verbal and written communication skills.**
    Examples
    - speak English coherently to clients, families, and other staff members
    - clearly explains to the patient the nurse aide care given
    - provide clear, understandable and write based upon proper use of the English language

4. **Exhibit physical ability sufficient to perform and/or assist clients to meet health care needs in a variety of settings, including moving from room-to-room, to maneuver in small spaces, and to negotiate stairwells when necessary.**
    Examples
    - physical mobility and strength sufficient to propel wheelchairs, stretchers, etc. through doorways and close fitting areas alone or with assistance
    - stand, walk up to 75% of 6 to 12 hour shifts
    - stoop, bend, squat, reach overhead as required to reach equipment
    - lift a minimum of 20 pounds of weight

- transfer/position up to 300 pounds with assistance while lifting, positioning, and transferring clients
- provide for activities of daily living (bed bath, oral hygiene, dressing, etc.)
- perform CPR satisfactorily and respond quickly in an emergency situation

5. **Demonstrate gross and fine motor abilities sufficient to provide safe and effective**
   Examples
   - demonstrate physical dexterity and coordination in delivery of care
   - pick up, grasp, and effectively manipulate small objects such as dials, switches
   - calibrate and use equipment

6. **Display auditory, visual, and tactile ability sufficient to safely care for clients.**
   Examples
   - hear monitors, alarms, emergency signals, cries for help, telephone, intercom interactions, and public address systems (codes)
   - perceive and receive verbal communications from clients, families, and health team members
   - read written words and information on paper, small print, gauges, measuring cups, and other equipment
   - discriminate colors; changes in color, size and continuity of body parts
   - discriminate changes in normal body activities such as breathing patterns
   - observe hazards in environment (water spills, safety rails, restraints) and harmful situations
   - palpate pulses, feel for heat or cold, tap body surfaces

PLEASE CHECK:

_____ I do not require special accommodations to meet the performance standards.

_____ I will need the following accommodations to meet performance standards.

Please list

_____

_____

I understand the requirements and feel that I can achieve the performance standards described for the Nurse Aide Program.

Signature _____ Date _____

*Return this completed form with your application information.

COAHOMA COMMUNITY COLLEGE
HEALTH SCIENCE SHORT-TERM CERTIFICATE PROGRAMS

BACKGROUND INFORMATION SIGNATURE FORM

All students who will be providing direct patient care in health care institutions regulated by the MS Department of Health should be aware that Mississippi law requires background checks for individuals seeking employment in a health care facility.

According to the Mississippi State Law, an individual may not be eligible for employment if the criminal history record check discloses a felony conviction, guilty plea or plea of nolo contendere to:

- felony of possession or sale of drugs
- murder, manslaughter
- armed robbery
- rape, sexual battery, sex offense listed in Section 45-33-23 (f) of the Mississippi code
- child abuse
- arson

- grand larceny, burglary
- gratification of lust
- aggravated assault
- felonious abuse and/or battery of a vulnerable adult that has not been reversed on appeal or for which a pardon has not been granted.

Each student must submit to a criminal background check. The Nurse Aide program will arrange for a background check to be completed. It is the responsibility of the student to comply with such arrangements. Failure to comply will result in the student's dismissal from the program.

If the background check reveals no results, the student will only receive a letter stating that there were no limitations/ violations and the student will be allowed to continue to clinical. If background results are received, the student is required to submit their NCIC printout or 'rap sheet' to the Health Sciences office so that copies of this report may be made for further review by a compliance committee.

I, _____ have read and understand the above information regarding the Mississippi State Law requiring background checks for individuals providing direct patient care in health care institutions regulated by the MS Department of Health.

_____
Signature of Student

_____
Signature of Witness

_____
Date of Signature

*Return this completed form with your application information.

Coahoma Community College
Information Sheet for the TABE (Test of Adult Basic Education)

What is the TABE? The TABE is a pre-entrance test required for all applicants to the Coahoma Community College (CCC) Phlebotomy Program, Nursing Assistant Program and Emergency Medical Technician Program (EMT). The TABE is used to evaluate applicants for admission to the EKG/Phlebotomy program. The TABE is only one of several criteria used in the selection process. The TABE evaluates 2 different academic areas-reading and applied mathematics.

How do I prepare for the TABE? The TABE Study Guide is available for sale in the CCC Bookstore or online at http://www.studyguidezone.com/tabetest.htm.

How do I register to take the TABE?
For Nurse Aide Call 662-621-4687
For EKG Technician and Phlebotomy Call 662-621-4210
EMT Call 662-621-4159

Where do I take the TABE? The TABE is a paper and pencil test given at the CCC Workforce Center at 510 Sunbelt Drive, Clarksdale, MS (located on Highway 49 South), phone number (662) 627-9139. Parking is available in the front of the building.
- Bring a picture ID on the day of the test. Applicants will not be allowed to test without it.
- Calculators are not allowed.

What do I need to make on the TABE to pass? The minimum acceptable TABE score is 10. This means you can read and do math on a 10th grade level.

Check List for Completion of Application

_____1. Submit the completed application by mail or in person to:

                    Nursing Assistant Program
                    Coahoma Community College
                    Robert G. Mason Health Science Building
                    901 Ohio Street
                    Clarksdale, MS, 38614

==Make sure to include the following:==
==_____ Official high school transcript or GED==
==_____ Signed/witnessed program performance standards==
==_____ Signed/witnessed criminal background check information form==
==_____ Signed/witnessed drug policy understanding==