

# **Admission Application**

			Date:		
Last:	First:		Middle:		
	Race (for OSBI):				
Address:					
City:	State:	_ Zip:	Phone:		
Date of birth:			SSN:		
Email: Driver's license #:					
Emergency contact (name/phone):					
Level of education (please check):					
□High school/grade □ GED □Vocational training (where):					
College/University (degree/certificate):					
How did you hear about us: □friend (name): □internet □school □work □flyer/brochure □other:					
Have you been convicted of a misdemeanor or felony? □yes □no					
If yes, briefly explain:					
Are you over 18 years of age? $\Box$ y	es ⊡no				
Applicant under 18 years old require written permission from a legal parent or legal guardian to enroll.					
Applicant signature:			Date:		
Legal guardian/Parent signature:			Date:		

#### Enrollment Agreement

Last:	First:		
Address:	City:	_State:	_ Zip:
Phone:	Email:		

The school and student enter a legal agreement under which the students will pay tuition and fees as indicated below and will adhere to the school's rules and regulations as set forth in the school catalog.

### **Tuition and Fees**

- Total cost for this course is \$650
- Tuition \$400 (76 contact hours training of class/lab and clinical)
- Fees \$225 (training certificate and use of disposable materials and equipment)
- OSBI check \$25 (mandatory pre-enrollment)

**NOTE:** State Nurse Aide Certification testing fee/cost will be paid separately by student after completion of course and after all requirements are met by student. The representative from a test site will collect the fees and provide more information about state certification and examination.

### **Method of Payment**

- Initial down payment of \$400.00 is due upon day of enrollment.
- Payment can be made by money order or cashier's check (no personal checks).
- Any remaining balance due is required prior to attending clinical.

# **Tuition Refund Policy**

All refunds are issued within thirty (30) days from the effective date. The effective date is the date on which OCH receives notice of the student's intent to withdraw from college or the date the student fails to return from an approved leave of absence, whichever is earlier.

#### Refunds WILL be issued under the following circumstances:

- A full refund will be issued if student is not accepted by OCH.
- A refund, minus a \$80 administrative fee, will be deducted if student withdraws or fails to pass OSBI background check.

# Refunds WILL NOT be issued under the following circumstances:

- Student has attended a class.
- Student has received study materials from OCH.
- Student violates Academic Honesty Policy.

\*\*\*In the event of an emergency which prevents the student from attending class, the student will be eligible to enroll in the next available class within a sixty (60) day period. After sixty days, the student will be required to re-enroll and pay the full amount of tuition.

Refunds are calculated from the last date of recorded attendance.

# **Student Qualifications and Curriculum Expectations**

- Student must meet the following criteria to enroll at OCH.
- Must be at least 18 years of age (students under 18-years-old require parental consent).
- Must be legally allowed to work in U.S. (proof required for permanent resident or working visa).
- Must be able to read and write in English.
- Must be in good physical condition and able to lift at least 60 lbs. without any restrictions.
- Must have good eye sight and hearing to attend class (provide own corrective devices).
- Must pass background check and TB test.
- For expectant/pregnant student must be cleared by her own physician to attend class/clinical without any restrictions (proof required).

# **Background Check and TB Test**

<u>An Oklahoma State Bureau of Investigation background check will be conducted on each student</u>. If a student is found to have a criminal history, which would exempt them from employment, they will not be eligible to attend courses at OCH. A list of felonies is available upon request. If student does not pass criminal background check, they will be automatically withdrawn from class with an \$80 administrative fee deducted from tuition.

<u>Student must show proof of TB skin test (or chest X-ray to rule out TB if indicated) prior to attending</u> <u>clinical rotation</u>. TB test can be obtained from the Tulsa Health Department. Students with a positive TB test or inability to provide proof will be withdrawn from the course and no refund will be issued.

TB testing for all age groups is conducted at the Central Regional Health Center, James O. Goodwin Health Center, and the North Regional Health and Wellness Center. TB skin testing at these sites is available Monday - Wednesday 8:00 - 4:00 p.m. and Friday 8:00 - 3:00 p.m. (TB skin testing not available on Thursdays). A Spanish-speaking interpreter is available.

TB skin testing is offered at the Collinsville Health Center and Sand Springs Health Center on Mondays and Wednesdays from 8:00 a.m. - 11 a.m. and 1:00 p.m. - 4:00 p.m.

There is no charge for TB testing if you have been exposed to an active case, are considered at increased risk, or have symptoms. There is a charge for some TB testing. For more information, please call 918-595-4109.

# **Class/Clinical Attendance**

- 1. Students are required to attend and complete all 76 contact hours (class/lab and clinical) for completion of Certified Nursing Assistant course. Students will provide their own means of transportation to class and clinical site.
- 2. Student will be expected to attend class/clinical at a punctual time. If student is tardy more than 15 minutes, the student will be sent home and required to arrange a makeup date with instructor/supervisor of OCH.
- 3. Dress code during clinical rotation will be clean and pressed scrub (light blue). No jewelry (except wedding band) or artificial nails during clinical rotations.

- 4. If student misses a class/clinical, they must notify the college and arrange makeup date with instructor.
- 5. All students MUST have satisfactory completion of required clinical skills prior to clinical rotation. During clinical rotation, students will only be allowed to perform tasks that that have been taught during class and checked off during lab session. Violators of this policy will be automatically dismissed from OCH with no refund.
- 6. Students are not allowed to use cell phone during class/lab or clinical rotation.
- 7. No weapons of any kind are allowed on the school premises or clinical site. Violation of this policy will result in automatic dismissal from OCH and possible involvement of law enforcement.
- 8. No alcohol or illicit drugs allowed on school premises or at clinical site. Students suspected of alcohol or illicit drugs use will be automatically dismissed from OCH with no refund.
- 9. No children or visitors are allowed at class/clinical site. No food or drinks allowed during lab session.

#### Successful Completion of Program

Students must pass both the written/oral examination and the skills examination to complete the competency examination successfully.

Students must score at least 70% on the written or examination and demonstrate at least 80% accuracy for skills examination. Upon successful completion of the competency examination, the Oklahoma State Department of Health will add student to the nurse aide registry within thirty (30) days of the date the individual is found to be competent. The testing site issues proof of completion to the OSDH.

After successful completion of the course, the student will be qualified to sit for the Oklahoma Certification Examination for Long Term Care and Home Health Nurse Aides. It is the student's responsibility to schedule testing appointment upon completion of the course.

#### Academic Honesty Policy

Academic dishonesty is willful and intentional fraud and deception to improve a grade.

Cheating is obtaining or attempting to obtain, or aiding another in obtaining or attempting to obtain any improvement in evaluation of performance, by any dishonest or deceptive means.

Violation of this policy will result in immediate withdrawal from OSH without refund.

Oklahoma College of Healthcare will not make changes to tuition and fees or curriculum content as outlined in this application once student has signed.

By my signature, I agree to the condition of this agreement. I also verify that, I have read and received the copy of the agreement.

Student signature:	Date:
Legal guardian/Parent signature:	Date:
OCH Staff:	Date: