



Training Application and Registration Instructions

Name: _____ Preferred Name: _____

Address (No P.O. Box): _____

City: _____ Zip _____

SS# _____ DOB: (DD/MM/YYYY) _____

Telephone (Mobile): _____ Alt# (Home): _____

Email _____

Emergency Contact _____ Emergency Contact # _____

Relation to Student _____

Class/Classes Registering For: **CNA PCT EKG (Only) Phlebotomy (Only)**

Preferred Class Date: _____(mm/dd/yy) Class Location (Circle): **Carrollton OR Newnan**

Preferred Class Time (Circle): **8:00a.m. – 12:00p.m. OR 6:00p.m. – 10:00p.m.** (Carrollton Only)

*** Class times are subject to change based on enrollment***

Payment Type (Circle): **WIA** or **Private Pay**

Are you a U.S. Citizen? Y / N; if no do you have a work permit? Y / N

Have you been convicted of a felony? Y / N

Have you ever mistreated or abused anyone? Y / N

Do you have a high school diploma or equivalent? Y / N

Do you have any physical limitations that would keep you from providing care to another person?

Y / N. If yes, explain

Do you have reliable transportation? Y / N

What size uniform do you need? S M L XL XXL Other _____

One uniform is included with tuition. Additional uniform are available for additional cost.



**Village Samaritan Training Institute
770-830-5683 OR 770-304-3306
Certified Nurse Aide Course**

Course Requirement

C.N.A

- Must be a U.S. Citizen or legal alien resident
- Must consent to a background check
- Background check must not contain any Felonies at all. No misdemeanors with Domestic violence, battery, assault, misappropriation of funds, abuse/neglect of an elderly person or child.
- Must provide proof of identity (U.S. Issued photo I.D. and Signed Social Security card)
- Must have a Tuberculosis skin test (or if positive TB skin test a Chest X-ray)

PCT

- ALL of the above
- Must have completed the C.N.A. Course (and complete testing within one month of being in the PCT course and pass C.N.A. Test successfully)
- Must have high school diploma or GED

EKG/Phlebotomy

- ALL OF THE ABOVE
- Must be certified for CPR for Healthcare Providers (two weeks before testing) in order to take EKG certification test

Refund Policy

If participant cancels class more than two weeks the participant will receive a refund minus \$25.00 cancellation, \$55.00 Registration fee, plus cost of the background check.

If participant cancels class one week prior to class start date the participant will receive a refund minus a \$95.00 cancellation fee, \$55.00 Registration fee, plus the cost of the background check.

If participant cancels less than one week prior to class start date the participant will not receive a refund.

By signing below the applicant understands completely the Refund Policy of Village Samaritan Training Institute.

Applicant Signature

Date

Classes are state mandated 85 hours which includes 24 hours of clinical on-site care facility.

Cost of class includes: One uniform, use of a stethoscope, class instruction, CNA textbook.

Payment plans are available: Ask for more information **770-830-5683/770-304-3306**

Payment methods: Cash, Money orders, or certified Checks. **No personal Checks accepted.**

*****Upon completion of course, all eligible students will be sent to NACES and student may test as early as 12 days after completion of class. NNAAP test for certification is \$112.00 (NOT INCLUDED IN TUITION and FEES)*****

How did you hear about Village Samaritan: Internet Newspaper WIA

Referred by _____