

PRESTIGE NURSE AIDE TRAINING ACADEMY
841 EAST 162ND STREET
SOUTH HOLLAND, IL 60473
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PATIENT CARE TECHNICIAN ENROLLMENT AGREEMENT

STUDENT INFORMATION:

Name: _____ **Date of Admission** _____

Address: _____

City _____ **State** _____ **Zip** _____

Date of Birth: _____ **Social Security Number:** _____

Phone (Include Area Code) _____ **Emergency Number:** _____

Emergency Contact: _____ **Relationship:** _____

E-MAIL _____

Program Start Date (mm/dd/yyyy) _____ **Program End Date (mm/dd/yyyy)** _____ **Day Course or Evening**

Total Tuition Cost; includes Registration, Lab Fee, Textbook Rentals, CPR Certification. Please note that the background checks are \$38.00 this fee is *not* covered in the tuition cost. Students will also be responsible for the certification fees of \$65.00 for CNA and \$90.00 per NCCT exam taken at the successful completion of the program. Students must purchase a school uniform and attendance badge for each module in the program of study for \$35-\$55, depending on uniform size. To participate at clinical, it is the students responsibility to have a physical and TB test performed. Students have the option to take 4 Certification Exams with this Program: CNA, NCET, NCPT, and NCPCT

Registration 75.00 Lab 00 .00 TextBook Rentals 150.00 Tuition 2200.00 Total: 2425.00

The textbook fee *is refundable* when the student turns in all books. TextBooks may be purchased for \$80 each if student desires.

Tuition is payable by Cash, Check, Visa/MC/Discover, or money order.

Program clock hours: 276

Days of Week (circle)

190 hours Theory **Monday Tuesday Wednesday Thursday Friday Saturday**
 42 hours Clinical
 40 hours Lab
 *3 hours of study at home
 per day is strongly advised

COURSE DESCRIPTION:

The Patient Care Technician Program is a 23 week combo course that combines **CNA**, **Phlebotomy** and **EKG**. This course prepares students to gain employment in a hospital, clinic or other healthcare setting, working under the direct supervision of a Registered Nurse or Physician. The curriculum prepares students to perform Basic Nursing Skills, perform proper blood collection techniques, take and record vital signs, and 12 lead EKG recording with rhythm recognition. The students will also study Medical Terminology, Anatomy & Physiology, and Infection Control protocols. The students will also earn their CPR Certification for Healthcare Providers. The program is 276 hours broken into 190 hours of Theory and 40 hours of Lab and 42 hrs of Clinical.

❖ *Students may choose to take up to four certifications: CNA, NCET, NCPT, NCPCT*

PROGRAM ADMISSION PEREQUISTES: Applicants must be at least 17 yrs of age at time of enrollment, possess a high school diploma or GED equivalent. Have a valid state ID and Social Security Card. Authorization to have a fee app background check.

Classes are held three days a week Monday, Wednesday, and Friday day or evening. Day classes are held from 9:00am until 1:00pm or evening classes from 6:00pm until 10:00pm. Students should call the academy to discuss start dates. Dates are subject to change.

REQUIRED TEXT:

The Only EKG Book You'll Ever Need; 7^t Edition: *Malcolm S. Thaler*
ISBN-978-1-4511-1905-3

Sorrentino, Sheila. (2012) . Mosby's Textbook for Nursing Assistants. (8th Ed). St. Louis, MO.
ISBN: 978-0-323-08067-5

Phlebotomy Essentials 5th Edition: *Ruth E. McCall and Cathee M. Tankersley* ISBN-978-1-60547-637-7

INSURANCE POLICY:

We recommend that students participating in this course have healthcare insurance in the event of accidental needle punctures. Students that do not have healthcare insurance will be charged according to the hospital billing policy. Students will be sent to the nearest ER for blood work and follow up.

ATTENDANCE POLICY:

Due to the extensive content of the program, regular attendance is required in order to grasp the information and retain it. There are **two** make up days built into the program. Students that miss a class day will be held accountable for missed content. Students are also **not** permitted to miss any class days of the Phlebotomy Content that will be taught, otherwise students will be disenrolled and issued a prorated refund if less than 60% of class has been taken.

ACADEMIC CALENDAR:

Prestige Nurse Aide Training Academy will be closed on the following recognized federal holidays; **New Years Day, Martin L. King Holiday, Presidents Day, Memorial Day, Labor Day, Independence Day, Veterans Day, Thanksgiving, and Christmas.** The day following Thanksgivings, Christmas, and New Years will also be observed. Lecture and clinical schedules will be made accordingly to accommodate the holidays.

**PRESTIGE NURSE AIDE TRAINING ACADEMY
TUITION PAYMENT PLAN OPTION
AND REFUND POLICY**

Prestige Nurse Aide Training Academy is dedicated to maintaining academic success and progression. Tuition payments can place a burden on some and have potential of delaying one's career advancement. Our program has implemented a payment plan option to those that choose to take advantage of it. Individuals enrolled in the Payment Plan Option, must have an active checking account at time of registration. A down payment of \$550 is due one week prior the start of class and three post dated checks of \$550 for the remainder of the balance must be filled out and endorsed to Prestige Nurse Aide Academy. An endorsed Check will be deposited every 3 weeks until the balance is paid in full. One week prior the deposit a courtesy reminder notice will be issued to you in writing that your next payment is coming up and will state your unpaid balance as of date. The \$75 registration fee *MUST* be paid at registration along with book fees. **THIS IS A \$400 DISCOUNT. THE CLASS TUITION IS REGULAR \$2600.00**

There is *no* charge for setting up a payment plan agreement; however there will be a \$50.00 charge added to your tuition for any returned checks or insufficient funds notices plus any late fee accruing at \$50.00 per week.

Program Cost; includes Registration, Supplies, Lab fees, Tuition, and Textbook Rentals.

Registration 75.00 Lab 00.00 Tuition 2200.00 TextBooks 150.00 Total 2425.00

The textbook fee is refundable when the student turns in all books. Textbooks may be purchased for \$80 each

Tuition is payable in Cash, Check, Visa/MC/Discover, or M.O

BUYERS RIGHT TO CANCEL

- The student has the right to cancel the initial enrollment agreement until 5:00pm of the fifth business day after the student has been accepted; and if the right to cancel is not given to any prospective student at the time of the enrollment agreement is signed, then the student has the right to cancel the agreement at any time and receive a refund of all monies paid to date within 15 days of cancellation.
- Any Cancellation should be in writing and must be delivered to school management.

SCHOOLS REFUND POLICY

1. When notice of cancellation is given before 5:00pm of the fifth business day after the date of enrollment, but One week prior to the first day of class, all fees minus the registration processing fee shall be refunded to the student.

2. Should a student's enrollment be terminated after the start of class or less than one week prior the course beginning, the student will be entitled to a prorated refund.
3. Refunds shall be based on when written notice of cancellation from the student is submitted.
4. Applicants not accepted by the school shall receive a refund of all tuition and fees paid within 30 calendar days after the determination of non-acceptance is made. The refund amount will show the registration fee of \$75 deducted.
5. Deposits or down payments shall become part of the tuition.
6. The school shall mail a written acknowledgement of a student's cancellation or written withdrawal to the student within 15 calendar days of the postmark date of notification. Such written acknowledgement is not necessary if a refund has been mailed to the student within the 15 calendar days.
7. A students refunds shall be made by the school within 30 calendar days from the date of receipt of the student's cancellation.
8. A school shall refund all monies paid to it in any of the following circumstances:
 - A) The school did not provide the prospective student with a copy of the student's valid enrollment agreement and a current catalogue or bulletin;
 - B) The school cancels or discontinues the course of instruction in which he student has enrolled;
 - C) The school fails to conduct classes on days or times scheduled, detrimentally affecting the student.

Tuition Reimbursement Scale

Day Withdrawal Occurred	% of Term Enrolled	\$2600 Entitled Refund Reflects Registration \$75 fee deduction
1	4%	\$2496
2	8%	\$2392
3	12%	\$2288
4	16%	\$2184
5	20%	\$2080
6	24%	\$1976
7	28%	\$1872
8	32%	\$1768
9	36%	\$1664
10	40%	\$1560
11	44%	\$1456
12	48%	\$1352
13	52%	\$1248
14	56%	\$1144
15	60-100%	\$0.00

❖ Discount of \$400 received for Payment Plan Agreement will not be honored if a student withdrawals or is disenrolled.

Complaints against the school may be registered at the addresses listed below:

Illinois Board of Higher Education
Private Business and Vocational Schools
1 N. Old State Capitol Plaza,
Suite 333
Springfield, Illinois 62701-1394
www.ibhe.org

- ❖ **Prestige Nurse Aide Training Academy holds the right to disenroll any student due to misconduct, plagiarism, academic dishonesty, theft, assault, battery, or violation of the HIPAA LAW.**

TRANSCRIPTS:

Transcript request must be in writing addressed to the school with the student signature and year of program completion. There may be up to 3 business days processing time in some cases. Transcripts are \$5.00 each for official copies and \$3.00 each for unofficial copies.

Prestige Nurse Aide Training Academy 2015 Projected Calendar of Course Offerings:

January 6- February 24- CNA	June 15 – August 7- CNA/PCT
February 17- March 14-Phlebotomy	June 23- August 1-Phlebotomy
April 6 –June 1- CNA/PCT	August 25 -October 27- EKG
March 24-May 28 –EKG	August 31- October 23- CNA/PCT
March 31– May 2- Phlebotomy	September 28- November 20- CNA/PCT
May 11- June 13 - Phlebotomy	August 25- September 26- Phlebotomy
	November 10 – January 21, 2016-EKG
	November 30- February 5, 2016-CNA/PCT

Certificate of Approval to Operate Issued by the Illinois Board of Higher Education
1 N. Old State Capitol Plaza,
Suite 333
Springfield, Illinois 62701-1394

TO THE STUDENT

- Do not sign this catalog before you read it or if it contains any blank spaces.
- This is a legally binding instrument and is only binding when the agreement is accepted, signed, and dated by the authorized official of the school or the admission officer at the school's principal place of business. Read all pages of this contract before signing.
- You are entitled to receive an exact copy of the catalog, enrollment agreement, and any disclosure pages you sign.
- Any changes in the agreement shall not be binding on either the student or the school unless such changes have been approved in writing by an authorized official of the school and by the student or the student's parent or guardian if the student is a minor.
- The terms and conditions of the catalog are not subject to amendment or modifications by oral agreement.
- The school does not guarantee the transferability of credits to another school, college, or university. Credits or coursework are not likely to transfer; any decision on the comparability, appropriateness and applicability of credit and whether credit should be accepted is the decision of the receiving institution.

The following contains information for the most recent 12 month reporting period of July 1 through June 30 for the Patient Care Technician Program.

FY 2014-2015

1. The number of students who were admitted in the course of instruction as of July 1 of that reporting period	<u>10</u>
2. Additions during the year due to: a. New Start b. Re enrollment c. Transfers in the course of instruction from other courses of instruction of the school	<u>8</u> <u>0</u> <u>0</u>
3. Total number of students admitted during the reporting period (the number of students reported under item (1) plus the additional reported under parts (A), (B),and (C) of item (2).	<u>18</u>
4. Of the total course of instruction enrollment, the number of students who: a. Transferred out of the course of instruction to another course of instruction b. Completed or graduated from a course of instruction c. Withdrew from the school d. Are still enrolled	<u>0</u> <u>10</u> <u>0</u> <u>8</u>
5. The number of students listed in item (3) who: a. Were placed in their field of study b. Were placed in a related field c. Placed out of the field d. Were not available for placement due to personal reason e. Were not employed	<u>10</u> <u>0</u> <u>0</u> <u>0</u>
6. The number of students who took a State licensing examination, if any, during the reporting period.	<u>10</u>
7. The number of students who took and passed a State licensing examination or professional certification examination, if any, during the reporting period.	<u>10</u>
8. The number of graduates who obtained employment in the field who did not use the school's placement assistance during the reporting period; such information may be compiled by reasonable efforts of the school to contact graduates by written correspondence	<u>7</u>
9. The average starting salary for all school graduates employed during the reporting period; such information may be compiled by reasonable efforts of the school to contact graduates by written correspondence	<u>\$44,000</u>

STUDENT ACKNOWLEDGMENTS

- 1. I hereby acknowledge receipt of the school’s catalog, which contains information describing programs offered, and equipment or supplies provided. The school catalog is included as part of this enrollment agreement and I acknowledge that I have received a copy of this catalog.

Student Initials _____

- 2. I have carefully read and received an exact copy of this enrollment agreement.

Student Initials _____

- 3. I understand that the school may terminate my enrollment agreement if I fail to comply with attendance, academic, financial requirements, or if I fail to abide by established standards of conduct, as outlined in the school catalog. While enrolled in the school, I understand that I must maintain satisfactory academic progress as described in the school catalog and that my financial obligation to the school must be paid in full before a certificate or credential may be awarded.

Student Initials _____

- 4. I hereby acknowledge that the school has made available to me all required disclosure information listed under the consumer Information Section of this Enrollment Agreement.

Student Initials _____

- 5. I understand the school does not guarantee transferability of credit and that in some cases, credits or coursework are not likely to transfer to another institution. In cases where transferability is guaranteed, Prestige Nurse Aide Training Academy must provide me copies of transfer agreements that name the exact institution(s) and include agreement details and limitations.

Student Initials _____

- 6. I understand that the school does not guarantee job placement to graduates upon program completion.

Student Initials _____

- 7. I understand complaints, which cannot be resolved by direct negotiation with the school in accordance to its written grievance policy, may be filed with Illinois Board of Higher Education, Division of Private Business and Vocational Schools, 1 N. Old State Capitol Plaza, Suite 333 Springfield, Illinois 62701-1394 or at www.ibhe.org.

Student Initials _____

The Student acknowledges receiving an exact copy of this completed agreement, the school catalog, and a written confirmation of acceptance prior to signing this contract. The student by signing this contract acknowledges that he/she has read this contract, understands the terms and conditions, and agrees to the conditions outlined in this contract. It is further understood that this agreement that this agreement supersedes all prior or contemporaneous verbal or written agreements and may not be modified without the written agreement of the student and the School Official. The student and the school will retain a copy of this agreement.

Student’s Signature

Date

Program Director’s Signature

Date