

NURSING ASSISTANT



The following items are required for your application to be considered complete:

- Copy of a valid driver's license
 - If you are a Co-Enrolled student and only have a Learner's Permit, please call (352) 671-7219 for more information.
 - If you are a Co-Enrolled student, you must speak to our guidance counselor and fill out a Co-Enrolled packet in Student Services
- Copy of Social Security card (name must match the name on driver's license)
- Copy of high school diploma or GED diploma
- Official, sealed high school transcripts
 - GED transcripts are required if you received your GED
 - If you have your GED, official sealed high school transcripts are still required in addition to your GED transcripts, even if they are incomplete
- Official college transcripts (if applicable)
- Copy of college diploma (if applicable)
- Complete the "My Career Shines" Assessment in Student Services
- Essay telling why you are interested in the Nursing Assistant program and what you know about the Nursing Assistant profession



NURSING ASSISTANT

- Two (2) completed Professional Recommendation Letters
 - References cannot be related to you; No family members, friends, boyfriends, etc.)
- Complete questionnaire
- Read, sign and date technical standards form
- Must attend ONE (1) Information Session: August 21 or September 18 for the September 25, 2017 class. October 9 or November 13 for the January 2018 class. All Information Sessions are on Monday nights at 6:00 p.m.

The following will be required <u>IF</u> you are accepted into the Nursing Assistant Program:

- **TABE Test** –you are **NOT** required to TABE test for this program
- Immunizations we need proof of all the following:
 - Hepatitis B (1st series), Tuberculosis (PPD), Tetanus, Measles Mumps Rubella (MMR), and Varicella Zoster (Chicken Pox), or evidence of immunizations or positive titers
 - The TB/PPD Skin Test, First Series of Hepatitis B, and Chicken Pox immunizations are due within the first two weeks of class.
 - If your TB Skin Test comes back positive, you will need a chest X-ray and we will need a copy of your results.
 - Flu shot is required in the fall semester



HEALTH SCIENCE

Use the following section to tell us in your own words, why you are interested in the Nursing Assistant Program, as well as what you know about the Nursing Assistant profession.



Marion County Public Schools

1014 SW 7th Road, Ocala, Florida 34471 · tel.352.671.7219 · fax 352.671.7221 ·website:www.mariontc.edu



TECHNICAL STANDARDS

HEALTH SCIENCE

Students who are accepted into the Health Science programs are required to be able to perform the following tasks:

- Walk the equivalent of five (5) miles a day.
- Grip, reach above shoulder level, bend at the knee, squat, stoop and crawl.
- Sit, stand for prolonged periods of time.
- Perform CPR/First Aid.
- Lift a minimum of 50 lbs.
- Manipulate small objects dexterously.
- Tolerate exposure to dust, fumes, chemicals, detergents, body fluids, and latex.
- Distinguish colors.
- See objects as small as 1mm.
- Hear subtle sounds, such as heart or lung sounds.
- Withstand varied environmental conditions such as heat, cold, and moisture.
- Cope with a high level of stress.
- Prioritize and make decisions fast under pressure.
- Cope with anger, fear, hostility and/or confrontation in a calm manner.
- Cope with death and dying.
- Concentrate.
- Be flexible and self-directed.
- Problem solve.
- Demonstrate a high degree of patience and confidentiality.
- Communicate in writing and verbally.

By signing below, I acknowledge that I can perform all the tasks mentioned above.

Applicant Signature:	
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Print_____Date____

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MARION TECHNICAL COLLEGE CHERYL SIRMONS, HEALTH SCIENCE ADMINISTRATOR

HEALTH SCIENCE PROFESSIONAL RECOMMENDATION FORM

(This form <u>MUST</u> be filled out by someone who is not related to you and who has known you for at <u>LEAST</u> a year. i.e. Former or current employer, religious affiliation, former or current teacher.)

	has applied to the	_ program at
Marion Technical College	. Please answer the following questions in reference to the	above
named individual.		

In what capacity have you known this individual?

How long have you known this individual?

In your interactions with this individual, do you feel this individual has any characteristics that would be beneficial in their chosen field of study? Explain.

Additional Comments:

Signature of Reference

Signature of Applicant

Printed Name of Reference

Contact Phone Number

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