Checklist of requirements for NTC Certified Medication Aide Program include (proof is required):

To be in each students chart before the fourth week of class or before clinicals (whichever comes first):

_____Signed agreement about refund policy

_____Be at least 18 years of age/copy of driver's license or identification card

____Copy of Social Security Card—Take original card with you when take state test

_____A high school graduate or have a GED /copy of

Employed in a facility as a State Tested Nursing Assistant and listed on the Ohio Nurse Aide Registry <u>if the applicant is to function as a certified medication aide in a nursing home</u> (4723-27-04 (3)/proof from registry or other facility with phone number & proof of identification

____OR Have at least one year of direct care experience in a residential care facility if the applicant is to <u>function as a certified medication aide in a residential care facility/Assisted Living</u> (4723-27-04 (4b). Proof of employment required.

_____Have the equivalent of twelve months or more of full-time employment in the five years preceding clinicals in a facility or residential care facility.

____Successfully completed a Nurse Aide competency evaluation.

_____Not be ineligible for licensure or certification as specified in section 4723.092 of the Revised Code (see Nursing Administrator with questions)

Provide proof of current American Heart Association BLS CPR certification

Certificate of professional liability (malpractice) insurance. This may be purchased through an insurance agency or from Nurses Service Organization at 1-800-247-1500 or www.nso.com or fax # 1-800-739-8818. Apply for insurance as a student nurse or nurse aide- <u>not student</u> <u>nurse aide.</u>

_____BCII and FBI fingerprint background check direct copy submitted to the Ohio Board of Nursing **and** a copy to Nursing Training Center

_____Able to read, write, speak and understand English as evidenced by a required admission test for the program with passing scores.

_____Free from communicable diseases, in suitable emotional and physical health as evidenced by obtaining a physical (forms available at the school). Be able to lift 50 pounds.

____Complete a two-step tuberculin test or negative chest x-ray.

_____OR provide a copy of original 2 step and get a one-step tuberculin test

____Be of good moral character

For an individual currently employed at an Assisted Living facility or in a long-term care facility, a letter of recommendation will be required. It can be from a supervisor, Director of Nursing, or Administrator. NTC may contact your supervisor for a reference. For those not employed currently in a nursing facility, a letter of recommendation can be submitted to NTC from a previous long-term care employer.

Standard watch with a second hand (no Apple watch or similar for clinicals)

___Drug Book

Additional Information:

NTC reserves the right to reschedule or cancel any course that does not meet our minimum enrollment requirements.

Registration forms, copies of required documents, and admission exam must be successfully completed at least one week before the start of class.

A deposit of \$350 is due at the time of registration. All fees must be paid in full and all required paperwork submitted (see checklist of requirements) by week four. The cost of the training program is \$700. Refund policy: If a course is cancelled or rescheduled, all fees paid are subject to reimbursement to transference, upon presentation of receipt. If you withdraw from class within one week after the first day of class, you are entitled to a full refund of what you have paid. If you withdraw after one week and before the third week of starting the course, you are entitled to 50% refund of what you have paid. After three weeks of attending the class, you are not entitled to receive a refund.

Other items to be completed in course and submitted:

_____Midterm Independent Practice Form

_____Final Independent Practice Form

_____Shadowing Form

_____25 Drug Cards

_____Final Skills Checkoff

_____Student Clinical Evaluation