

EnVaNa
Healthcare Training Center

SCHOOL CATALOG
2026

800 W 5th Ave., Suite 208-A
Naperville, IL 60563
Tel: 630-362-5939
E-mail: envana3@comcast.net
Web: www.envanahealthcare.com

INTRODUCTION

EnVaNa Healthcare Training Center recognizes the importance of healthcare workers to promote healthiness and wellbeing to an individual.

EnVaNa Healthcare Training Center offers Occupational Training for Basic Nurse Assistant (CNA), Patient Care Technician (CPCT = CNA+CPT+CET), Phlebotomy Technician (CPT), Electrocardiogram / EKG Technician (CET), and Pharmacy Technician (CPhT). It has met all applicable requirements under the rules, regulations and supervision of the Illinois Board of Higher Education and of the Private Business and Vocational Schools.

EnVaNa Healthcare Training Center and her employees promise to deliver their outmost services to the students with ethical values, respect, and dignity. The Training Center also promises that every graduate will gain self-confidence and pride with the full knowledge about the course.

Our Philosophy

The learning process never ends; it is just the beginning that opens a new door. A well-trained and enthusiastic individual holds a great commitment within them to prosper and become successful with their career. Knowledge is power. Power and perseverance conquer all things.

Our Objective

Increase the number of well trained and dedicated individuals in the field of healthcare through our principles of learning. Each student will achieve precise knowledge and skills by the time of program course completion.

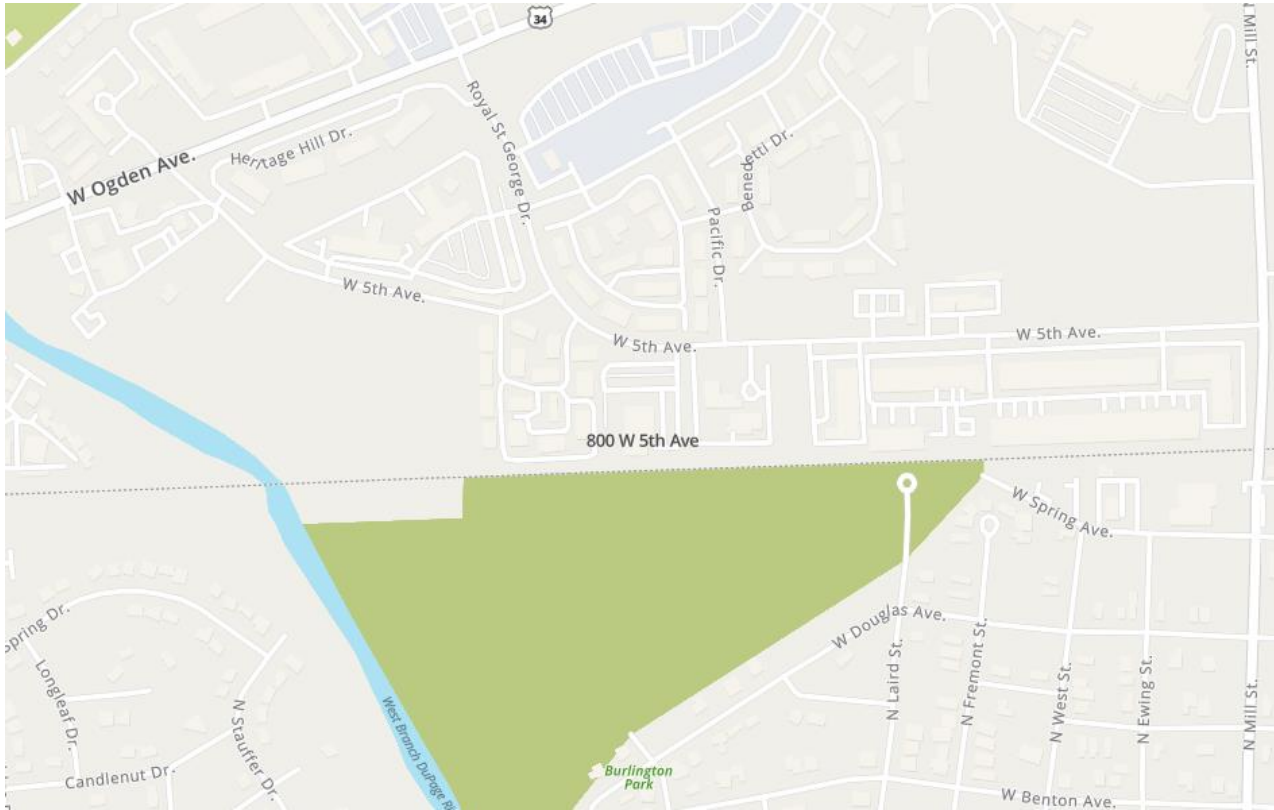
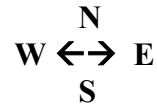
Our Mission

Provide an excellent training course that will produce a highly competent individual not only with the knowledge they have earned but also increasing self-esteem, moral values, respect, and dignity.

**Approved by
Illinois Board of Higher Education
1 N. Old State Capitol Plaza, Suite 333
Springfield, IL 62701- 1404**

Our Location

Envana Healthcare Training Center, Inc.
800 W 5th Ave. Suite 208
Naperville, IL 60563



Contact Information

Acelita T. Baltazar, RN
Head Administrator

Phone: 630-362-5939

Email: envana3@comcast.net

Web: www.envanahealthcare.com

Criteria for the Issuance of Certificate of Completion

1. Completed the scheduled Course Program.
2. Completed any make-up classes.
3. Passed the course with an accumulated score of 80% and higher.
4. Passed clinical performance skills (BNATP only)
5. Passed the blood draw / venipuncture skills (Phlebotomy only)
6. Paid the tuition and other fees in full.
7. Returned any loan / rented materials in good condition.

Procedure for Obtaining Transcripts

1. Must successfully pass the Certification / Competency Evaluation Exam
2. Written request addressed to Head Administrator plus a \$35.00 processing and postage fee.
3. Additional copy fee of \$10.00 per copy.

Criteria for Job Placement Assistance

The school does not guarantee job placement to graduates upon program completion.

The Chief Managing Employee will issue a Letter of Recommendation to all qualified candidates based on the following:

1. Classroom performance, not limited to knowledge, attitude and behavior.
2. Clinical performance is not limited to knowledge, attitude, and behavior.
3. Written exams and performance skills evaluation.
4. Teamwork and team effort.

Accreditation

The school is approved and licensed to operate by the Illinois Board of Higher Education

The school is approved and licensed to operate by the Illinois Department of Public Health.

The school is affiliated with the National Healthcareer Association.

The school is not accredited with any recognized accrediting body by the US Department of Education.

Licensure / Certification

Basic Nursing Assistant program is certified by **Illinois Department of Public Health**

Phlebotomy Technician, EKG Technician, Patient Care Technician and Pharmacy Technician are certified by **National Healthcareer Association**

Transferability of Certificate

The school does not guarantee transferability of credits or coursework to another institution. Our BNATP is under the guidelines of Omnibus Budget Reconciliation Act (OBRA) and therefore it is accepted within the 50 States of the United States of America. The License given by NHA is recognized by most States of the United States of America. More information can be found at www.NHANOW.com.

Student Debt Assistance Act

The school has no assistance with student's debt.

Student Services and Financial Aid are NOT available.

Payment Arrangement

The school program coordinator may assist with the payment plan due to financial hardship.

Dismissal from the Program

The school has the right to dismiss or drop the student from the program because of the following but not limited to violent behavior, disrupting behavior, aggressive behavior, threatening behavior, disrespectfulness, any form of dishonesty, fraud, verbal and written defamation, violation of school rules and 2 or more days of unexcused or unnecessary absenteeism.

Make-up classes

The Basic Nursing Assistant Training Program has a set schedule submitted to the Illinois Department of Public Health. Anyone who missed any scheduled Theory or Clinical sessions will have to do a make-up class with the next session offered by the school when available. It is strongly advice NOT to miss any of the scheduled Theory and Clinical days.

The Phlebotomy, EKG, Pharmacy Tech courses have a day-to-day schedule set according to the availability of the course Instructor. Anyone who missed 2 or more class session days will be dismissed from the program. It will be the responsibility of the student to catch up on the scheduled topic that was missed.

The scheduled class can be cancelled in the event of bad weather such as but not limited to arctic temperature, snowstorm or blizzard, severe thunderstorm, flash flood, tornado watch. The make-up class will be scheduled accordingly, and further notices will be sent to students.

Receiving and Processing Students Complaints

EnVaNa Healthcare Training Center will resolve student complaints promptly and fairly and will not subject a student to a disciplinary action because of written grievances having been filed with the school or the Head Administrator. EnVaNa Healthcare Training Center will maintain a written record of all student complaints.

How to file complaints

Students are required to submit a written complaint to the school. The complaint should be addressed to Acelita Baltazar, RN, Head Administrator, explaining the actual situation and the date when it happened. The investigation will be initiated upon receipt. The Head Administrator will respond to the student within 14 days.

COMPLAINTS AGAINST THIS SCHOOL MAY BE REGISTERED WITH THE BOARD OF HIGHER EDUCATION AT:

**Illinois Board of Higher Education
1 N. Old State Capitol Plaza, Suite 333
Springfield, IL 62701
<http://complaints.ibhe.org>
www.ibhe.org**

CONSUMER INFORMATION

DISCLOSURE REPORTING CATEGORY	Basic Nursing Assistant	Phlebotomy Technician	EKG Tech	Patient Care Tech	Pharmacy Tech
A) For each program of study, report:					
1) The number of students who were admitted in the course of instruction as of July 1, 2024 to June 30, 2025	172	0	0	0	0
2) The number of additional students who were admitted in the program of instruction during the next 12 months and classified in one of the following categories					
a) New Start	0	0	0	0	0
b) Re-enrollments	0	0	0	0	0
c) Transfers into the program from other programs at the school	0	0	0	0	0
3) The total number of students admitted in the program or course of instruction during the 12-month reporting period (the number of students reported under subsection A1 plus the total number of students reported under subsection A2)	172	0	0	0	0
4) The number of students enrolled in the program or course of instruction during the 12-month reporting period who:					
a) Transferred out of the program or course and into another program or course at the school	0	0	0	0	0
b) Completed or graduated from a program or course of instruction	172	0	0	0	0
c) Withdrew from the school	0	0	0	0	0
d) Are still enrolled	0	0	0	0	0
5) The number of students enrolled in the program or course of instruction who were					
a) Placed in their field of study	172	0	0	0	0
b) Placed in a related field	0	0	0	0	0
c) Placed out of the field	0	0	0	0	0
d) Not available for placement due to personal reasons	2	0	0	0	0
e) Not employed	0	0	0	0	0
B1) The number of students who took a state licensing examination or professional certification examination (if any) during the reporting period	172	0	0	0	0
B2) The number of students who took and passed a state licensing examination or professional certification examination (if any) during the reporting period	170	0	0	0	0
C) The number of graduates who obtained employment in the field who did not use school's placement assistance during the reporting period	170	0	0	0	0
D) The average starting salary for all school graduates employed during the reporting period	\$24.00	n/a	n/a	n/a	n/a

DESCRIPTION OF PROGRAM / COURSE OBJECTIVES

Basic Nursing Assistant Training Program: Tuition Fee = \$1080.00

Credit Hours: 120 hours (80 hours theory and 40 hours clinical)

Vocational Objective and Instructional Areas:

The students will be learning the fundamentals of nursing care skills, the basic daily physical care and comfort needs of clients as directed by supervising licensed personnel. Students will understand the importance of safety and security of clients, family, self or others by observing safety precautions and promoting a sense of security and well-being. Students will be taught and trained but not limited to the 9 modules through theory discussion and return demonstration for 80 hours and a minimum of 21 performance skills for 40 hours clinical.

Modules: Introduction to Health Care, Residents Rights and NA Responsibilities, Infection Control in the Health Care Setting, Emergency Procedures, Injury Prevention in the Healthcare Environment, Care of Resident, Fundamentals of Rehabilitation/Restorative Nursing, End of Life Care, Alzheimer's Disease and Related Dementia.

Performance Skills: Wash hands, Perform Oral Hygiene, Shave a Resident, Perform Nail Care, Perform Perineal Care, Give Partial Bath, Give a Shower or Tub Bath, Make Occupied Bed, Dress a Resident, Transfer Resident to Wheelchair Using a Transfer Belt, Transfer Using Mechanical Lift, Ambulate with Transfer Belt, Feed A Resident, Calculate Intake and Output, Place Resident in a Side-Lying Position Perform Passive Range of Motion, Apply and Remove Personal Protective Equipment, Measure and Record Temperature, Pulse and Respiration, Measure and Record Blood Pressure, Measure and Record Weight, Measure and Record Height

Clinical Experience:

Students will be assigned to a Resident requiring assistance to perform the Activities of Daily Living. 40 hours of Nursing Home experience to perform 21 Basic Skills but not limited to:

Wash Hands

Oral/Mouth care

Shave a Resident

Perform Nail care

Perform Perineal care

Give Partial Bed Bath

Give Shower or Tub bath

Nursing Home setting only

Make an Occupied Bed

Nursing Home setting only

Dress a Resident

Transfer Resident to Wheelchair using Transfer Belt

Transfer using mechanical lift

Nursing Home setting only

Ambulate using a Gait Belt

Feed a Resident

Calculate intake and output

Place Resident in a side-lying position

Nursing Home setting only

Perform Passive Range of Motion

Apply and Remove Personal Protective Equipment

Measure and Record TPR

Temperature, Pulse, Respiration
Measure and Record BP
Blood Pressure
Measure and Record Weight
Measure and Record Height

Qualified candidates will be scheduled to sit for Competency Examination administered by SIUC and earn the title of Certified Nursing Assistant (CNA) from the IDPH. Cost \$85.00

CNA can work at the following facilities: Hospitals, Long Term Care Facilities, Rehabilitation Facilities, Assisted Living Facilities, Supported Living Facilities, Adult Day Care, Community Care Program Facilities, Retirement Homes, Home Health Care, Home Services, Hospice Care, Nurse Agency, Doctor's Clinic and Private Home Care

Textbook: \$75.00 Workbook: \$35.00

Nursing Assisting, A Foundation in Caregiving 6th Edition by Diana Dugan, RN

Textbook: ISBN: 978-1-60425-154-8

Workbook: ISBN: 978-1-60425-155-5

Other expenses related to the BNATP program: Cost varies per vendor.

BP set – sphygmomanometer and Stethoscope \$50.00

BLS Provider Manual = \$19.00

CPR card = \$60.00

TB Test = \$30 & up

Non-skid shoes = \$40 & up

Ceil Blue Scrub Set = \$30 & up

Criminal Background Check = \$55 & up

Criminal Background Check will be initiated upon registration and must be completed within 10 days before the start of the class. If the background check comes back showing a disqualifying conviction, the student may apply for a waiver. Enrollment will be on hold until the waiver is approved.

ADMINISTRATIVE CODE

TITLE 77: PUBLIC HEALTH

CHAPTER I: DEPARTMENT OF PUBLIC HEALTH

SUBCHAPTER c: LONG-TERM CARE FACILITIES

PART 395 LONG-TERM CARE ASSISTANTS AND AIDES TRAINING PROGRAMS CODE

SECTION 395.171 HEALTH CARE WORKER BACKGROUND CHECK

Section 395.171 Health Care Worker Background Check

- a) A training program shall comply with the Health Care Worker Background Check Act and the Health Care Worker Background Check Code.
- b) A training program shall provide counseling to all individuals seeking admission to the training program concerning the Health Care Worker Background Check Act and the Health Care Worker Background Check Code. The counseling shall include, at a minimum:
 - 1) Notification that a fingerprint-based criminal history records check will be initiated.
 - 2) A clear statement that a fingerprint-based criminal history records check is required for the individual to work as a direct access worker, a CNA or a Direct Support Person in Illinois; and
 - 3) A listing of those offenses in Section 25 of the Health Care Worker Background Check Act for which a conviction would disqualify the individual from finding employment as a direct access worker, a CNA or a Direct Support Person unless the individual obtained a waiver pursuant to Section 40 of the Health Care Worker Background Check Act.
- c) An individual shall not be allowed to enroll in a training program unless the individual has had:
 - 1) A criminal background check that reveals no disqualifying convictions, unless a waiver has been granted; and
 - 2) No administrative findings of abuse, neglect, or misappropriation of property.

(Source: Amended at 44 Ill. Reg. 3455, effective February 21, 2020)

Dear CNA Student:

A law in Illinois says that you cannot work as a nurse's aide for a hospital, nursing home, or home health agency if you have certain criminal convictions. The list of crimes that will keep you from working as a CNA is at the bottom of this page.

While this is not meant to discourage you, it is strongly recommended that, if you have a conviction for one or more of these crimes, you should not continue in this class until you apply and receive a waiver from the Department.

A waiver does not change your criminal record. A waiver allows an employer to "legally" hire you, even though you have a criminal record.

A waiver is NOT granted to everyone that applies. You may send in all the information requested and still not be granted a waiver. Each waiver application is reviewed completely. There are no hard and fast rules, but the following may be used as a guide:

You will probably **not** be granted a waiver if any of the following is true:

- You are still on probation, parole, or incarcerated.
- Your victim was an elderly or disable person.
- You have had several (more than two) similar crimes in the last five years.
- You have had several violent crimes in the last five years.
- Your crime is any type of murder or sexual assault.
- You have less than two years clean and sober.

A waiver may be granted if:

- You have paid all your court fines and have satisfactorily completed probation.
- You only have a few (less than three) convictions more than five years ago.
- You have had a single, non-violent crime in the last five years.
- You have more than two years clean and sober.

Again, this is not meant to discourage you. There is a need for responsible, hardworking, and caring nurse's aides. However, it would be a shame if you invested the time, work, and money in a nurse aide class and then you were unable to get a job.

If you have a conviction, it is recommended that you discuss the issue privately with your instructor before the next class meeting. You may request a waiver application by calling 1-217-782-2813.

Crimes that disqualify (meaning that you cannot work as CNA with these convictions) you from working as a nurse's aide (these include both misdemeanors and felonies):

- Battery, domestic battery; assault; forgery; theft; retail theft; robbery, armed robbery, aggravated robbery; burglary, residential burglary.
- Armed violence; criminal trespass to a residence; financial exploitation of an elderly or disable person
- Murder, homicide, manslaughter; kidnapping, child abduction; unlawful restraint, forcible detention
- Indecent solicitation of a child, sexual exploitation of a child.
- Tampering with food, drugs, or cosmetics.
- Aggravated stalking; home invasion
- Sexual assault, sexual abuse; endangering the life or health of a child' abuse or gross neglect of a long-term care facility resident
- Criminal neglect of an elderly person's ritual mutilation, ritualized abuse of a child
- Vehicular hijacking aggravated vehicular hijacking; arson; unlawful use of a weapon.
- Manufacture and delivery of controlled substances (drugs); manufacture and delivery of cannabis (Marijuana)
- Possession with intent to deliver (either drugs and or marijuana)

Please Note: You may have been convicted and not sent to jail. Often people are fined or given probation, but these are still convictions. If you are unsure whether an arrest ended up being a conviction, contact the county in which you were arrested and speak to the people at the Circuit Clerk or State's Attorney's office or your attorney.

Some convictions that are **not** disqualifying (meaning you can work if these are your only convictions):

- Prostitution; possession of cannabis or a controlled substance; DUI; deceptive practices (writing "bad" checks on your own account).

Phlebotomy Technician Training Program: Tuition Fee = \$880.00

Credit Hours: 100 hours (60 hours theory, 40 hours laboratory)

Vocational Objective:

1. To increase the number of well trained and dedicated individuals in the field of health care through our principles of learning.
2. To maintain and disseminate information on vocational education.
3. To develop comprehensive and successful practice of phlebotomy through highly skilled techniques, wide knowledge of the current healthcare environment, and a sympathetic approach to patients of all ages, backgrounds and medical conditions.
4. To achieve accurate knowledge and skills by the time of program course completion.

Instructional Areas:

1. Perform a minimum of 30 successful unaided venipuncture collections and 10 successful unaided capillary collections.
2. Instruction in a variety of collection techniques including vacuum collection, syringe, and capillary skin-puncture methods.

Lab Experience:

Each student will give consent to one another to perform a variety of collection techniques including vacuum collection, syringe, and capillary skin-puncture methods.

Students will complete a minimum of 30 successful unaided venipuncture collections and 10 successful unaided capillary collections.

Qualified candidates will be scheduled sit for Competency Examination administered by National Healthcareer Association and earn the title of Certified Phlebotomy Technician (CPT)

CPT can work in Hospitals, Laboratory Company, Health Insurance Company, Dialysis Clinic, Doctor's Clinic, Home Health Care

Textbook: cost varies per vendor \$80 & up

Phlebotomy Worktext and Procedures Manual, 5th ed. by Robin S. Warekois and Richard Robinson
ISBN 978-0-323-64266-8

Electrocardiogram / EKG Technician Training Program: Tuition Fee = \$840.00

Credit Hours: 40 hours theory

Vocational Objective:

1. To increase the number of well trained and dedicated individuals in the field of health care through our principles of learning.
2. To maintain and disseminate information on vocational education.
3. To develop comprehensive and successful practice of ECG/EKG Tech through highly skilled techniques, wide knowledge of the current healthcare environment, and a sympathetic approach to patients of all ages, backgrounds, and medical conditions.
4. To achieve accurate knowledge and skills by the time of program course completion.

Instructional Areas:

- Successful completion of Certification exam: Certified Electrocardiogram / EKG Technician as administered by the National Healthcareer Association

Certified EKG Tech can work in Hospital, Diagnostic Mobile Company, Doctor's Clinic, Heart Center, and Cardiac Rehab Center

Textbook: cost varies per vendor \$40 & up

Hartman's Complete Guide for the EKG Technician by Wilma Lynne Clarke, EdD, RN 2nd Edition
ISBN 978-1-60425-151-7

Patient Care Technician Training Program

Patient Care Technician is not an independent course. This is acquired after a successful completion of three (3) courses such as BASIC NURSING ASSISTANT TRAINING PROGRAM (BNATP), EKG TECHNICIAN, and PHLEBOTOMY TECHNICIAN. All of the aforementioned courses must be taken from ENVANA HEALTHCARE TRAINING CENTER.

BNATP, Phlebotomy Technician and EKG Technician courses can be taken separately. Each course is independent and not a pre-requisite of the other.

Refer to all Vocational Objectives and Instructional Areas as mentioned above for BNATP, EKG TECHNICIAN and PHLEBOTOMY TECHNICIAN COURSES.

NHA – National Healthcareer Association is an accredited licensing body of which their certifications are recognized by employers nationwide.

Completion of the three (3) courses qualifies a candidate to take PCT certification given by NHA.

The candidate will be awarded the title of Certified Patient Care Technician, CPCT after a successful passing from NHA certification exam

Tuition Fee: NO FEE

There will be no additional tuition fee to pay to get the Certificate of Completion for Patient Care Technician.

The cost to complete the program is \$2800.00, which will be the total cost of the three (3) courses.

BNATP (\$1080.00), EKG Tech (\$840.00), Phlebotomy Tech (\$880.00)

CPCT can work at the following facilities: Hospitals, Long Term Care Facilities, Rehabilitation Facilities, Assisted Living Facilities, Supported Living Facilities, Adult Day Care, Community Care Program Facilities, Retirement Homes, Home Health Care, Home Services, Hospice Care, Private Home Care, Nurse Agency, Doctor's Clinic, Doctor's Clinic, Diagnostic Mobile Company, Heart Center, and Cardiac Rehab Center

Pharmacy Technician Training Program: Tuition Fee = \$2800.00

Credit Hours: 100 hours theory

Vocational Objective:

1. To increase the number of well trained and dedicated individuals in the field of health care through our principles of learning.
2. To maintain and disseminate information on vocational education.
3. To develop a comprehensive and successful practice of Pharmacy Tech through highly skilled techniques, wide knowledge of the current healthcare environment, and a sympathetic approach to patients of all ages, backgrounds and medical conditions.
4. To achieve accurate knowledge and skills by the time of program course completion.

Instructional Areas:

- Successful completion of Certification exam: Certified Pharmacy Technician as administered by the National Healthcareer Association

Certified Pharmacy Tech can work in Hospital Pharmacy, Retail Pharmacy, Pharmaceutical Co.

Textbook: cost varies per vendor \$80 & up

Mosby's Pharmacy Technician: Principles and Practice, 3rd ed., 2011 Teresa Hopper, BS, CPhT

REQUIREMENTS FOR ADMISSION TO PROGRAM / COURSE:

1. Must be at least 16 years of age.
2. Submit a copy of High School diploma or GED equivalent *
3. Submit a copy of Social Security Card or ITIN
4. Submit a copy of government ID (Driver's License or US passport) *
5. Submit a copy of the negative TB skin test / blood test or Chest x-ray *
6. No Criminal record
7. Hepatitis Shot (optional) for Phlebotomy Technician (recommended)
8. Tetanus Shot (optional) for Phlebotomy Technician (recommended)

*All submitted copies of documents will be property of the school. If the student requested them to be returned, the school will charge a service fee of \$35.00 and certified mail of \$15.00.

Attendance for all Programs / Courses:

1. Student who missed 1 day of theory sessions will have to do make up class; 2 or more days of theory sessions missed, the student will be asked to drop the course.
2. Students who missed 1 clinical session will be asked to do make up clinical session for BNATP
3. Make-up classes and clinical sessions will be scheduled by the Chief Managing Employee.
4. Failure to fulfill make up classes will result in a denial for the Certificate of Completion.

Grading Scale for all Programs / Courses

Quizzes average	30%	A = 96% to 100%
Midterm	30%	B = 91% to 95%
Final Exam	40%	C = 86% to 90%
Fail below 80%		D = 80% to 85%
Pass 80% and Up		F = Failed – below 80% *
Laboratory / Clinical	= Pass or Fail	

***Failed Student will not receive the Certificate of Completion for the course taken**

STUDENT: INSTRUCTOR RATIO

8 to 36 Students per 1 Theory Instructor
 8 Students (BNATP) per 1 Clinical Instructor
 16 Students per Lab Instructor

Schedule of Programs

YEAR 2026

BASIC NURSING ASSISTANT TRAINING PROGRAM

Scheduled classes must have a minimum of 8 Students enrolled

LECTURE:

**Monday – Tuesday – Wednesday – Friday -- 3:30pm to 10:00pm (6hrs)
and Saturday / Sunday -- 8:30am to 5:30pm (8hrs)**

CLINICAL: 7:00am to 6:00pm (10hrs) Site(TBA)

**All schedules are subject to change – please contact program coordinator
630-362-5939 prior to enrollment**

June 1 – 19, 2026

July 19 - August 5, 2026

June 19 – July 4, 2026

August 4 – 20, 2026

EKG TECHNICIAN

Tuesday and Thursday 2pm - 4pm

TBA

PHLEBOTOMY TECHNICIAN

Tuesday and Thursday 4pm – 9pm

TBA

PHARMACY TECHNICIAN: Tuesday & Thursday 20 sessions 9am to 2pm

TBD

ENVANA Healthcare Training Center, Inc

800 W 5th Ave. Suite 208A, NAPERVILLE, IL 60563

TEL: 630-362-5939

WEBSITE: www.envanahealthcare.com E-MAIL: envana3@comcast.net

ENROLLMENT AGREEMENT

REGISTRATION DATE: _____

STUDENT INFORMATION (PLEASE PRINT)

STUDENT NAME: _____ SSN or ITIN (LAST 4 DIGIT ONLY) _____
First MI Last

ADDRESS: _____
Street City State Zip Code

PHONENUMBERS:(_____) _____ E-MAILADDRESS: _____ @ _____

EMERGENCY CONTACT: _____ RELATIONSHIP: _____ TEL #: _____

PROGRAM / COURSE NAME: (Circle One) Basic Nursing Assistant / Phlebotomy Technician / EKG Technician / Pharmacy Technician

PROGRAM START DATE: _____ SCHEDULED END DATE: _____ NUMBER OF WEEKS: _____

DAY EVENING WEEKEND CLASS MEETS: (circle) MON TUES WED THURS FRI SAT SUN

TIME CLASS BEGINS: _____ TIME CLASS ENDS: _____ TOTAL CREDIT or CLOCK HOURS: _____

Tuition & other fees: NON-REFUNDABLE REGISTRATION FEE: \$ 60.00

We do not process any form of FINANCIAL AID

Course Program	Nursing Assistant	Phlebotomy Technician	EKG Technician	Patient Care Technician	Pharmacy Technician	Miscellaneous expenses are not provided by the Institution. Students are responsible for obtaining the following. (cost of each may vary)
Tuition Fee	1080.00	880.00	840.00	2800.00 CNA+PCT +EKG	2800.00	BNATP: CEIL BLUE Scrubs, TB or Chest-X-ray, Covid-19 vaccine Phlebotomy: TB test, Tetanus and Hepatitis B vaccine is optional but highly recommended
Laboratory	Included	Included	Included	Included	Included	All Courses: Textbook is needed on the first day of class
Certification	SIUC/IDPH	NHA	NHA	NHA	NHA	Certification Fee: SIUC: \$85.00 NHA: \$125.00
Payment	Registration Fee	Tuition Fee	First Payment due 7 days before start of class		50%	+\$20.00 non-refundable convenience fee
Cash			Last Payment due before Mid-term		50%	+\$20.00 non-refundable convenience fee
Cashier's Ck			Late payment penalty 10% of balance + \$5.00 daily			
Money Order						
Zelle/Venmo			We do not accept credit card payment			

REFUND / CANCELLATION / WITHDRAWAL POLICY

STUDENT'S RIGHT TO CANCEL

The student has the right to cancel the initial enrollment agreement until midnight of the 5th business day after the student has been admitted (Registration Date). Cancellations should be submitted to the authorized official of the school in writing.

Registration Date is the same of the Acceptance Date

- The student must submit a written notice of cancellation or withdrawal.
- School shall, when the student gives **written notice of cancellation**, provide a refund in the amount of at least the following:
 - When the notice of cancellation is given **before** midnight of the fifth (5th) business day after the date of enrollment but prior to the first day of class, payment for tuition fee shall be refunded to the student.
 - When the notice of cancellation is given **after** midnight of the fifth business day after the date of enrollment but prior to the first day of class, the school will retain 25% of the full tuition fee.
 - When the notice of cancellation is given during the first week i.e. 1st day of class attendance, the school will retain all payments made up to 50% of the full tuition fee.
 - When the notice of cancellation is given during the second week of class attendance or 50% of the course schedule (before midterm), the school will retain 75% of the full tuition fee
 - When the notice of cancellation is given after 50% of the course schedule (after midterm), the student must pay the full cost of tuition fee and will not be eligible for a refund.

3. Deposits or down payments shall become part of the tuition. **Registration fee is not a part of the tuition fee.**
4. 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 15 calendar days.
5. The student's refund shall be made by the school within 30 calendar days from the date of receipt of the student's cancellation.
6. A student may give notice of cancellation to the school in writing. The unexplained absence of a student from a school for more than 2 school days shall constitute constructive notice of cancellation to the school. For the purpose of cancellation, the date shall be the last day of attendance.
7. A school may not make refunds which exceed those prescribed in this Section. The school has no refund policy that returns more money to a student than those policies prescribed in this Section. A school shall refund all monies paid to it in any of the following circumstances:
 - a. The school cancelled or discontinued the course of instruction in which the student has enrolled.

NOTICE TO STUDENT

1. Do not sign this agreement before you have read it or if it contains any blank spaces.
2. This agreement 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 admissions officer at the school's principal place of business. Read all pages of this contract before signing.
3. You are entitled to an exact copy of the agreement and any disclosure pages you sign.
4. This agreement and the school catalog constitute the entire agreement between the student and the school.
5. Any changes in this agreement must be made in writing and shall not be binding on either the student or the school unless such changes have been approved in writing by the authorized official of the school and by the student or the student's parent or guardian. All terms and conditions of the agreement are not subject to amendments or modification by oral agreement.
6. 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.

STUDENT ACKNOWLEDGMENTS

1. I hereby acknowledge receipt of the school's catalog by email, 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 viewed, read a copy of this catalog. (Can be downloaded from the school website: www.envanahealthcare.com). **Student's Initials** _____.
2. I have carefully read this enrollment agreement. **Student's Initials** _____
3. I understand that the school may terminate my enrollment if I fail to comply with attendance, academic, and 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's 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's Initials** _____
5. I understand that the school does not guarantee transferability of credit and that in most cases, credits or coursework are not likely to transfer to another institution. **Student's Initials** _____
6. I understand that the school does not guarantee job placement to graduates upon program completion. **Student's Initials** _____
7. I understand that complaints, which cannot be resolved by direct negotiation with the school in accordance to its written grievance policy, may be filed with the Illinois Board of Higher Education, 1 N. Old State Capitol Plaza, Suite 333 Springfield, IL 62701 or at <http://complaints.ibhe.org> or www.ibhe.org. **Student's Initials** _____

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 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 and Parent / Guardian Signature (If Minor)

Admission Date

Program Director's Signature

Date

CONSUMER INFORMATION

DISCLOSURE REPORTING CATEGORY	BNATP	Phlebotomy Technician	EKG Tech	PCT	Pharmacy Tech
A) For each program of study, report:					
1) The number of students who were admitted in the course of instruction as of July 1, 2024 to June 30, 2025	172	0	0	0	0
2) The number of additional students who were admitted in the program of instruction during the next 12 months and classified in one of the following categories					
d) New Start	0	0	0	0	0
e) Re-enrollments	0	0	0	0	0
f) Transfers into the program from other programs at the school	0	0	0	0	0
3) The total number of students admitted in the program or course of instruction during the 12-month reporting period (the number of students reported under subsection A1 plus the total number of students reported under subsection A2)	172	0	0	0	0
4) The number of students enrolled in the program or course of instruction during the 12-month reporting period who:					
e) Transferred out of the program or course and into another program or course at the school	0	0	0	0	0
f) Completed or graduated from a program or course of instruction	172	0	0	0	0
g) Withdrew from the school	0	0	0	0	0
h) Are still enrolled	0	0	0	0	0
5) The number of students enrolled in the program or course of instruction who were					
f) Placed in their field of study	172	0	0	0	0
g) Placed in a related field	0	0	0	0	0
h) Placed out of the field	0	0	0	0	0
i) Not available for placement due to personal reasons	2	0	0	0	0
j) Not employed	0	0	0	0	0
B1) The number of students who took a state licensing examination or professional certification examination (if any) during the reporting period	172	0	0	0	0
B2) The number of students who took and passed a state licensing examination or professional certification examination (if any) during the reporting period	170	0	0	0	0
C) The number of graduates who obtained employment in the field who did not use school's placement assistance during the reporting period	170	0	0	0	0
D) The average starting salary for all school graduates employed during the reporting period	\$24.00	n/a	n/a	n/a	n/a