

**2019 St. Elizabeth Healthcare (SEH)
State Tested Nurse Aide Training Program
Employee Enrollment Application/Agreement**

Date: _____ Birth date _____ SSN _____ Email _____

Last name _____ First name _____ M.I. _____ Prefix _____
(Mr.,Mrs.,etc.)

Address _____

City _____ State _____ Zip Code _____ Cell Phone _____

Home Phone _____ Work Phone _____ Class Date (s) you are applying for _____

As an SEH Employee, where do you work? _____ (Unit/Department)

EDUCATION

School	City/State	Years Completed	Degree/Certificate
_____	_____	_____	_____
_____	_____	_____	_____

COURSE INFORMATION:

The purpose of the St. Elizabeth Healthcare State Tested Nurse Aide (STNA) Training Program is to prepare the nurse aide to provide quality, direct patient care under the supervision of licensed nursing personnel. The 80-hour course includes theory, supervised lab and clinical training. At the completion of the 80-hour nurse aide training, the student is eligible to take the competency evaluation (state test) at a recognized state testing center. **The State Tested Nurse Aide Testing fee is \$75, separate from the cost of this course and is payable to your selected testing site.** Pre-nursing students meet the pre-requisite for nursing school.

For Information contact Ellen Ash MSN, RN, at ellen.ash@stelizabeth.com OR call 859-655-4798.

WHERE: Classroom instruction will be held at St. Elizabeth Training & Education Center (SETEC), 3861 Olympic Blvd, Erlanger, KY, 41018. Classes are offered on days (8-4:30pm). Clinical requirements will be fulfilled on the Skilled Nursing Unit St. Elizabeth Healthcare, Florence and/or Ft. Thomas Unit. (Clinical time is held from 7-3:30).

Six Courses scheduled in 2019: Two IN-PERSON 10 DAY Courses and Four On-Line Courses with 4 Clinical Days

A. State Tested Nurse Aide Training 10-day Course

Application Deadline: 14-days prior to start of class at minimum (most classes fill up well in advance of this date)

State Tested Nurse Aide Training (10-day Course) class dates: Class times are 8am-4:30pm except bolded clinical dates, which are 7am-3:30pm. Cost is \$495.00 (\$195.00 for employees)

- 1. MARCH COURSE DATES:** March 1, 4, 5, 11, **12**, 19, **20**, 21, **22**, and 25
- 2. OCTOBER COURSE DATES:** October 1, 2, 7, 14, **15**, 17, **21**, 23, **28**, and 29

B. State Tested Nurse Aide ON-LINE Training Course for Nursing and Pre-Nursing Students (Must show proof of acceptance to college/ university or approval of program coordinator). All computer modules & workbook must be completed prior to attending clinical dates, 43 chapters.

2019 On-line Course Clinical times are 7am-3:30pm – Cost for non-employee is \$595.00. Cost for SEH employees is \$195.00.

Orientation for all online courses is at 3pm at SETEC located at 3861 Olympic Blvd, Erlanger, KY.

- 3. MAY CLINICAL DATES:** 5/13, 5/14, 5/15 and 5/16 (Orientation Tuesday, March 26th at 3pm)
- 4. JUNE CLINICAL DATES:** 6/10, 6/11, 6/12, and 6/13 (Orientation Thursday, Apr 18th at 3pm)
- 5. JULY CLINICAL DATES:** 7/22, 7/23, 7/24, and 7/25, (Orientation Wednesday, June 5th at 3pm)
- 6. DECEMBER CLINICAL DATES:** 12/16, 12/17, 12/18 and 12/19 (Orientation Friday, Nov 1st at 3pm)

COST: Course Fee

\$495/Medicaid Nurse Aide Training **10-day class** (\$195.00 SEH employees)

\$595/Medicaid **Online Training** for pre-nursing and nursing students with acceptance to college or University (\$195.00 SEH employees)

To reserve a spot for class, a completed application and \$100 deposit are required. Please call or email to confirm an opening is available prior to sending documents as classes fill quickly.

(Check, Money Orders, or Payroll deduction only). NO CASH!!

Send to:

St. Elizabeth Healthcare Nurse Aide Training Program

Organizational Development/SETEC

Attention Ellen Ash MSN, RN

1 Medical Village Dr

Edgewood, KY, 41017

Refund Policy: Five days prior to start of course a 100% refund will be given **if all**

materials are returned in reusable condition (workbook and textbook).

After this time, a \$100.00 processing fee will be deducted. No refund will be available after the first day of class for the 10-day course and after the initial start date of the on-line content for the online course (date of orientation). Students are given a one-time option to complete the course in next available class. Students who are dismissed due to conduct or failure to maintain competency will not be eligible for refunds.

St. Elizabeth Healthcare reserves the right to cancel the class due to insufficient enrollment. If a class is canceled, participant fees will be refunded in full.

- PLEASE NOTE – NO ARTIFICIAL NAILS OF ANY KIND ARE PERMITTED IN THE MEDICAL CENTER

COURSE REQUIREMENTS:

Application and \$100 deposit required to hold spot in class (or on waiting list, if applicable).

Payment in full is needed on the first day of class or on the orientation date for the online class.

Additional Prerequisites (needed at least 2 weeks in advance of class - or specific dates TBA for online course):

- Proof of Health Insurance
 - Proof of Liability Insurance - will give information on after enrolled in class (cost is generally around \$40)
 - Criminal background check within the last year - will give information on after enrolled in class (cost is generally around \$25)
 - Will contact Employee Health to verify 2 step PPD TB skin test or BMAT (blood test) initially and annually thereafter
- ✓ Participants must be able to commit to the classroom and clinical time requirements described in the course syllabus.
 - ✓ Information will be given regarding uniform for clinicals, dress code for class, and class expectations.
Students with incomplete paperwork will not be permitted to start class.

Existence of the Kentucky Student Protection Fund

Pursuant to KRS 165A.450 all licensed schools, resident and nonresident, shall be required to contribute to a student protection fund. The fund shall be used to reimburse eligible Kentucky students, to pay off debts, including refunds to students enrolled or on leave of absence by not being enrolled for one (1) academic year or less from the school at the time of the closing, incurred due to the closing of a school, discontinuance of a program, loss of license, or loss of accreditation by a school or program.

Process for Filing a Claim Against the Kentucky Student Protection Fund

To file a claim against the Kentucky Student Protection Fund, each person filing a complaint must submit a signed and completed Form for Claims Against the Student Protection Fund, Form PE-38 and provide the requested information to the following address: Kentucky Commission on Proprietary Education, 300 Sower Boulevard, Frankfort, KY 40601. The form can be found on the website at www.kcpe.ky.gov.

CONTRACT AGREEMENT

I, the undersigned, do agree to the conditions and limitations of this Application/Agreement. I further understand that I will receive a full refund for this course 5 days prior to the start of this class **if all materials are returned in reusable condition (workbook and textbook)**. After that time a \$100.00 processing fee will be deducted. After the first day of class no refund will be available.

I further understand that attendance is important for the completion of the program and I have been made aware of the school's attendance policy (Students cannot miss more than one clinical/one classroom day for the 10-day class and must maintain 100% attendance for the online course). I also understand that artificial fingernails are not permitted in patient care areas.

DATE _____

Applicant _____