GET IN. GET OUT. GET A JOB.

CT STATE QUINEBAUG VALLEY

FALL 2023 CERTIFIED NURSE AIDE

PROGRAM DESCRIPTION

Required training to obtain Certified Nurse Aide certification in the state of CT

Skills:

- Patient/resident/home care
- Support for all activities of daily living
- Managing a client with Alzheimer's or dementia
- Includes hands-on clinical
 experience

CONTACT US:

Course Fee: \$1,999

SCHEDULE

- Dates: Aug 24 Nov 6
- Class/Lab Meeting Days: Tuesday, Thursday; 5PM - 9PM
- Clinical Meeting Days: Monday, Tuesday, Thursday; 4:30PM - 9:30PM

TUITION ASSISTANCE

- Career ConneCT
- Healthcare Pipeline Initiative
- Payment Plan Eligible
- SNAP E&T Funds
- QVCC Foundation

REGISTER TODAY!

860-932-4005

WORKFORCEDEVELOPMENT@QVCC.EDU



QVCC.EDU/WORKFORCE



For Office Use Only				
Student ID@:				
Entered By/College:				
Term/POT:				

CT STATE COMMUNITY COLLEGE

Course Registration Form - Workforce Development & Continuing Education

Registration deadline is **one business day prior to the start of class.** Completion of any program does not guarantee employment. All students must meet course prerequisite requirements. If prerequisites were NOT taken at CT State, you must provide a transcript (official or unofficial) at the time of registration.

CAMPUS L	OCATION: Select one	:					
STUDENT	LEGAL NAME:						
	First		Middle Name		Last Name		
STREET:							
TELEPHONE:			Town EXT MESSAGE PERMISSION 🛛 Yes 🗌 I		State Zip Code lo		
E-MAIL AD	DRESS:						
SOCIAL SECURITY #:			DATE OF BIR (Required by the Col				
Is this you	^r first time attending a C	onnecticut Community College? I	Yes No	HS Diploma	or GED? □Yes □No		
Gender: □ Male □ Female □ Other U.S. Citizen? □ Yes □ No			Yes 🗆 No	Veteran? 🗆 Yes 🖾 No			
Ethnicity: Race:	ity: Hispanic/Latino Non-Hispanic/Non-Latino Decline to State (None) White Black or African American American Indian or Alaskan Native Asian Native Hawaiian or Other Pacific Islander Other Decline to State						
How did h	ear about this program?	Website Family/Friend	Facebook/social meeting	dia 🛛 Other _			
CRN	SUBJ & Course #	Course Title	Dates (To and From)	Days	Time	Cost	
	l				Total Payment:	\$ 0.00	
	🗆 Cash 🛛	Credit 🛛 🗆 Check	Third Party		(SNAP, WIOA, etc.)		

*Payments can be made at the Bursar's office or submitted through your <u>MyCTState</u> account by selecting <u>Account Summary</u> and logging in with your student ID number. A full refund for noncredit programs will only be considered when a student drops a class up to one business day prior to the first scheduled meeting. No refunds or credit towards another program will be considered after the first class has begun.

Acknowledgment Statement:

I understand that when I register for any class at CT State Community College or receive any service from the CT State, I accept full responsibility to pay all tuition, fees, and other associated costs as a result of my course registration and/or receipt of services. I understand and accept that if I fail to pay by the scheduled due date and fail to make acceptable payment arrangements to bring my account current, CT State Community College may refer my delinquent account to a collection agency and the College may no longer accept direct payments. I further understand that if the CT State Community College refers my student account balance to a third party for collection, a collection fee may be assessed and that my delinquent account may be reported to one or more of the national credit bureaus or be subject to tax-offset. By my signature I acknowledge this statement. By my signature I also acknowledge that I have read and agree to all terms and conditions outlined in the Student Enrollment Agreement: https://www.ct.edu/admission/tuition.

By signing the below, I affirm that I am the above-named person, and that the information presented above is true and accurate.

Student Signature: ____

Date: ___