



Fulton-Montgomery
Community College

Training Opportunity!

Certified Nursing Assistant (CNA)

Certified Nursing Assistant Training is an excellent training opportunity for individuals interested in pursuing a career in the rewarding field of Healthcare. Successful completion of the training and passing the NYS test will result in certification as a Certified Nursing Assistant

Course Overview:

- The course consists of an intensive 9-week training program starting on **Monday, October 5, 2020**. There will be a combination of evening and day classes online during the week and clinical training at a local health care facility (one of the sponsors).
- Upon successful completion of the training program, students will be scheduled for the NYS Licensing Exam for CNA. Attendance at all the classroom and clinical instruction is **mandatory** in order to complete the training and take the NYS Exam.

Sixteen students will be accepted into the program. Applications will be on a first come, first serve basis. The application deadline is Thursday, October 1, 2020 at 4:00 p.m.

How do I apply for acceptance into the training program? The application, health form, fact sheet, schedule and other information about the program can be found on the FM website www.fmcc.edu. Information is also available in the FM Admissions Office.

- 1) Complete the attached application.
- 2) Provide all required documentation:
 - _____ Proof of minimum age of 17 years
 - _____ Proof of high school diploma or high school equivalency
 - _____ Completed Health Exam Form & physical exam within 6 months of program start date **(Candidate must be able to lift 50 lbs to the waist)**
 - _____ Proof of TB test dated less than 12 months prior to program start date
 - _____ Proof of (dated) MMR immunization records or Titer Certificate showing immunity.
 - _____ Proof of (dated) Flu Shot for Fall/Winter 2020-2021

2 Forms of ID are required

 - _____ Primary ID must be a Government issued photo ID such as a driver's license
 - _____ Secondary form of ID, must have a matching (same name) signature.
- 3) Submit application and documents to FM Admissions Office with a letter of commitment from a sponsoring agency. **NEW** Due to COVID restrictions, you must be sponsored by either Wilkinson RHCF or Nathan Littauer Nursing Home, as they will be conducting the clinicals. If you need help getting sponsored, please contact Phyllis Rosenberger at (518) 708-0690.
- 4) You must attest to having a clear criminal record (absolutely no misdemeanors or felonies)
- 5) Watch with a sweep, second hand and a CNA uniform (shirt, pants, and healthcare worker shoes (white closed shoe, can be white hard toe sneakers, no clogs) to be worn for clinical training only (not included in the fee for the training)

What is the cost of the CNA training? The course fee is \$1,500 which covers all expenses for classroom, clinical training, training materials and testing fees.

What are the requirements for CNA Certification?

- After successful completion of the virtual, live, classroom and clinical portion of the program, students will be scheduled for the NYS Licensing Exam to become certified as a CNA.
- Proper ID: see application.
- No Criminal Record (absolutely no misdemeanors or felonies).
- The NYS Licensing Exam will be scheduled at the end of the mandatory classroom and clinical training required for the course.
- **Students must achieve a passing grade on all 6 written tests throughout the course in order to sit for the NYS Licensing Examination.**
- Official NYS CNA Certification is achieved through attainment of a passing grade on both the NYS written and practical-skills exams. If the student fails either assessment, they will NOT be certified.
- **No “make-up” or repeat certification exams will be scheduled through FM.** Students who miss the test date at FM must contact testing agency (Prometric) to re-test at a regional testing facility at their own expense.

What is expected of participants during the training?

- The program consists of approximately 4-6 weeks of training and will be a combination of classroom and clinical instruction. Attendance is **mandatory** in order to complete the training and sit for the NYS Licensing Certification Exam given at the conclusion of the program.
- Students are expected to login/arrive on time and be prepared to participate in all the training activities.
- Outside of the class time, the students will need to study for the tests throughout the training and for the NYS Licensing Exam at the end of the training.
- It will be important for students to ask questions and ask for help in understanding the classroom material and clinical procedures.

How can I get assistance to help pay for the training and testing? No financial aid is available for this training. Visit www.fmcc.edu and select the Workforce Training tab. Select Certified Nurse Assistant link for sponsoring agency information.

What is the Refund Policy? Applicants who cancel their enrollment by Thursday October 1, 2020 will receive a full refund. After Thursday, Oct. 1, no refunds will be issued.

Family Empowerment Community College Pilot Program

Participants will receive:

- *On-campus childcare*
- *Intensive personalized advisement*
- *Educational support including tutoring*
- *Career counseling*
- *Assistance in transitioning to a four-year school*

For More Information :

<https://www.fmcc.edu/admissions/main/family-empowerment-community-college-pilot-program/>

Application and required documents must be submitted by October 1, 2020 @ 4:00 pm

- By mail to: FM Admissions Office - 2805 State Hwy 67, Johnstown, NY 12095
- Emailed to GenInfo@fmcc.suny.edu
- Placed in the Drop Box at the Student Welcome Center - Rear Entrance on the FM Campus (in a sealed envelope)



Fulton-Montgomery
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Certified Nursing Assistant Training Application

Application Deadline: Thursday, October 1, 2020 at 4 p.m.

Student information:

Last Name: _____ **First Name:** _____ **M.I. :** _____

Maiden Name/Other names known by: _____

Date of Birth: ___ / ___ / _____ **Social Security #:** _____

Gender: Male Female

Street Address: _____ **Apt. #:** _____

City: _____ **State:** _____ **Zip Code:** _____

County: _____

Home Phone: (_____) _____ - _____ **Cell Phone:** (_____) _____ - _____

Can FM send you text messages about this program? Yes No

E-Mail Address: _____

Are you a US Citizen? Yes No

If not, are you authorized to work in the United States? Yes No

Is English your primary language? Yes No

Are you a high school graduate or do you have a high school equivalency? Yes No

Have you ever been certified as a C.N.A.? No Yes, Date of Certification: _____

Are you currently a certified Home Health Aide (H.H.A.)? No Yes, Date of Certification: _____

Are you currently a certified Personal Care Aide (P.C.A.)? No Yes, Date of Certification: _____

Have you ever been convicted of a misdemeanor? Yes No

Have you ever been convicted of a felony? Yes No

Applicant Certification: I understand that all information submitted is true to the best of my knowledge. Any deliberate falsification or omission of application data may result in denial of admission or dismissal. I have reviewed the program requirements and I accept all the participation and attendance requirements of this training program.

Applicant's Signature

Date

CNA Application Check List

**Proof of all items listed below is REQUIRED
in order for your application to be accepted**

___ Proof of age (at least 17)

___ Proof of high school graduation or high school equivalency

___ Completed **FM CNA Health Exam Form** signed by physician and dated
Less than 6 months prior to start of training course.

___ Proof of TB test and results dated less than 12 months prior to start of training
course.

___ Proof of MMR vaccination or a Titer Certificate showing immunity.

___ Proof of flu shot for Fall/Winter 2018-2020.

___ Payment or letter of Commitment from Sponsoring Agency

TWO forms of Identification for testing:

___ **Government issued photo ID with signature.** (for example: driver's
license).

___ **Secondary I.D. with matching (same name) signature.** (for example:
social security card, benefit card, debit/bank card, library card,
passport).

THIS SECTION FOR COLLEGE USE ONLY

Application Received by: _____

Date Received: ____/____/____

Accepted Reviewed and Accepted by:

Date accepted: ____/____/____

Seat # _____

Acceptance letter sent by:

Date: _____

NOTES: _____

___ Self-Paying for Course

___ Check # _____

___ Money Order # _____

___ Credit Card #: _____
Expiration Date: _____

Sponsored by:
___ (Please indicate name of sponsor):

___ Approval letter from sponsor attached

_____ FM HPOG Grant (deferred billing)

_____ SCAP/HPOG (deferred billing)

_____ SCAP (bill SCAP directly)

_____ Other Sponsor (bill Sponsor directly)

Notes:

Fulton-Montgomery Community College

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Health Exam Form

Student: Complete personal information first

MUST BE SUBMITTED TO FM WITH THE APPLICATION FOR THE TRAINING PROGRAM

- 1) Completed FM physical examination form performed within 6 months of the course start date.
2) Proof of a TB test: Must be administered and read by the start of the course.
3) Proof of MMR vaccination dates or MMR titre and proof of immunity.
4) Proof of Flu Shot for Fall/Winter 2020-2021.

Applicant Name:
Address:
Street/Apt. #: City: State: Zip:
Phone (day): (Evening):
Emergency Contact: Phone:
Sponsoring Agency (if applicable):

Physician: Complete this portion. Date, if different from examination date.

Date of Physical Examination: Name of Medical Practice:
Phone Number:

Student Eligibility Requirements for CNA Training Program: Training in transferring, positioning, and the turning of residents/clients is an important and required part of this training program.

Does the applicant have any limitations? No Yes If yes, please explain:

Is applicant able to lift at least 50 pounds to waist level? Yes No

I certify that I have examined this applicant and believe him/her to be in good health, free from and not a carrier of communicable diseases, and able to perform the physical requirements of the CNA program.

Signature Date

TUBERCULIN TEST: PPD or Mantoux Test (required with results and dates read) NOTE: TB Test results are only good for one year. Results must be dated less than 12 months prior to course start date.

Date administered: By whom:
Date read: By whom:
Results:
If results are positive, describe treatment given and date completed:

MMR vaccine administered: #1 #2

MMR titre date and proof of immunity:

Flu Shot for Fall/Winter 2018-2020 - Date administered: