



# Application: Clinical Medical Assistant

Jefferson Community College (JCC) Continuing Education Division in partnership with Condensed Curriculum International (CCI) is offering a pre-certification training at **Jefferson Community College, 1220 Coffeen Street, Watertown, NY.**

**Program Summary:** The Clinical Medical Assistant Program is a 20-week program that prepares students to take the National Healthcareer Association Certified Clinical Medical Assistant National examination and begin work in the healthcare field. During the program, students will earn 140 hours of classroom lecture, 160 hours of clinical externship and hands-on lab experience.

CMA program syllabus includes how to assist physicians by preparing patients for examination and treatment, routine laboratory procedures and diagnostic testing. Students will learn the technical aspects about phlebotomy and pharmacology, the proper use and administration of medications, taking and documenting vital signs, cardiology including proper lead placements and legal aspects of healthcare.

Extended Learning Center: E-129

Monday & Wednesday

March 5 – July 25, 2018

6:00 – 9:30 p.m.

\$2,399 (textbooks included)

Application deadline: **February 2, 2018**

Course Code: CCI 004 701

- 1) All information given on the application form must be typed or neatly printed.
- 2) Arrange for an **official copy of your college transcript, or high school transcript** to be forwarded to the Continuing Education Division by **contacting your high school and/or college.**
- 3) Two letters of reference are required. These references may not be family members. References should be responsible adults who can attest to your ability to successfully complete this training. Letters can be mailed to Continuing Education separately, or included in **sealed** envelopes with your application.
- 4) Mail completed applications to: **Continuing Education Division at Jefferson Community College - 1220 Coffeen Street, Watertown, NY 13601 Attention: Continuing Education.**

*There are only 20-seats available in this program. Acceptance letters will be mailed to the 20 people selected for the program. Continuing Education will not notify applicants who are not accepted into the Clinical Medical Assistant certification program.*

# Spring 2018 Clinical Medical Assistant Certification Program APPLICATION

Name \_\_\_\_\_  
Last First Middle

Other/Previous Name (which may appear on records) \_\_\_\_\_

Address \_\_\_\_\_  
Number & Street Apt. Number

\_\_\_\_\_ City State Zip code

Phone: cell or day number: ( ) \_\_\_\_\_ Work: ( ) \_\_\_\_\_

Social Security Number \_\_\_\_\_

Date of Birth \_\_\_\_\_ Email \_\_\_\_\_

**How did you hear about the Clinical Medical Assistant Training Program?**

\_\_\_\_\_

**Extra-Curricular Activities** (please list all school, community or religious activities in which you have participated. Include all offices which you have held and honors you have received.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Give names and address of the persons whom you have asked to speak to your ability to successfully complete this training.** These references must *not* be family members.

Name \_\_\_\_\_ Title/Position \_\_\_\_\_

Address \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Email \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Name \_\_\_\_\_ Title/Position \_\_\_\_\_

Address \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Both of the persons named above need to submit a **letter of recommendation** and a **reference form (see enclosed)**. These must be sent directly to **Jefferson Community College - 1220 Coffeen Street, Watertown, NY 13601** **Attention: Continuing Education.**

**Educational Background**

	School	City	Dates Attended	Degree
High School	_____	_____	_____	_____
College(s)	_____	_____	_____	_____
	_____	_____	_____	_____
Special Certification	_____	_____	_____	_____

**Employment**

Present Employer \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Dates of Employment \_\_\_\_\_

Nature of Work \_\_\_\_\_

Previous of Employer \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Dates of Employment \_\_\_\_\_

Nature of Work \_\_\_\_\_



**Jefferson Community College**  
**Clinical Medical Assistant certification Program**

**Certificate of Information**

I certify, to the best of my knowledge, that the information supplied on this application is complete and accurate. I know that this is a pre-certification training and not a college degree.

Applicants signature \_\_\_\_\_ Date \_\_\_\_\_

Jefferson Community College admits students without regard for race, color, creed, sex, age, religion, national/ethnic origin, sexual orientation, disability, pregnancy or military status.

## Application Checklist

- Completed Application Form
  
- Transcripts: (College or High School diploma or copy of high school equivalency diploma.
  
- Two letters of recommendation in sealed envelopes.