



Scioto County Career Technical Center
Post-Secondary Education

Medical Assisting

Getting started at Scioto Tech
2019-2020 Entrance Requirements

*Program Cost: \$8,417.00
Program Hours: 900

Application	
<input type="checkbox"/> Complete and Submit Application for Admission. <input type="checkbox"/> Submit high school diploma or GED certificate.	<u>Post-Secondary Office</u> 740.259.5526
WorkKeys (Pre-entrance Cost)	
<input type="checkbox"/> Schedule WorkKeys Pre-Entrance Exam. <input type="checkbox"/> Required scores: Applied Math 4; Graphic Literacy 4; Workplace Documents 4. <input type="checkbox"/> Testing fee \$60.00 (cash, check, money order or major credit card). <input type="checkbox"/> Picture ID required.	<u>Post-Secondary Office</u> 740.259.5526
Financial Aid/Financial Arrangements	
<input type="checkbox"/> Apply for Financial Aid by completing a FAFSA application at www.fafsa.gov (Federal PELL Grants & Direct Student Loans). <input type="checkbox"/> Schedule appointment with Financial Aid Coordinator to review financial aid application, veterans' benefits, and/or other payment options. <input type="checkbox"/> You must have awarded financial aid, set-up payment plan or paid program costs by the deadline date given at the program orientation.	<u>Financial Aid Office</u> 740.259.5526
Informational	
<input type="checkbox"/> Attend a program informational meeting for acceptance into the program.	<u>Post-Secondary Office</u> 740.259.5526

The following requirements and deadline dates will be given at the Informational Meeting:

<input type="checkbox"/> Background Check (Estimated Pre-entrance Cost: \$46.00) <input type="checkbox"/> Drug Screen (Estimated Pre-entrance Cost: \$60.00)
Potential outside agencies to contact for funding or additional funding to cover program cost. Contact agencies at least 30 days prior to program start date. <ul style="list-style-type: none"> o Bureau of Vocational Rehabilitation - 4303 Old Scioto Trail, Portsmouth, Ohio 740.354.7951 o Bureau of Workers' Compensation - 1005 4th Street, Portsmouth, Ohio 740.354.7974 o CAO - Workforce Investment Act (WIA) - 433 Third Street, Portsmouth, Ohio 740.354.4531 o Workforce Investment Act (WIA) - 941 Market Street, Piketon, Ohio 740.289.2371

*Program costs do not include pre-entrance costs. Pre-entrance costs are the sole responsibility of the student.

Medical Assisting Information Hand-Out

Classes Meet: Monday-Thursday
Classroom Schedule: 9:00 a.m. -- 2:00 p.m.
Instructor: Leslie Johnson & Tami Hall

Total Course Hours: 900
Total Course Weeks: 47

Externship
<ul style="list-style-type: none"><input type="checkbox"/> Extern schedule will begin the last 5-6 weeks of the program<input type="checkbox"/> The externship site will be assigned by the instructor<input type="checkbox"/> Students are required to complete externship hours
Certification
<ul style="list-style-type: none"><input type="checkbox"/> National Center for Competency Testing (NCCT)<ul style="list-style-type: none">➤ National Certified Medical Assistant (NCMA)➤ National Certified Insurance & Coding Specialist (NICIS)<input type="checkbox"/> Ohio Proficiency Assessment & Certification (OPAC)<ul style="list-style-type: none">➤ Excel➤ Indexing➤ Keyboarding➤ Math➤ Medical Terminology➤ Word<input type="checkbox"/> First Aid / CPR<input type="checkbox"/> OSHA (10 hour) <p>Certification Exams will be held at the end of the program. Pre-Registration by student is required.</p>
Attendance
<ul style="list-style-type: none"><input type="checkbox"/> Attendance is recorded daily on an hourly basis by the instructor and it is the expressed responsibility of the student to be in attendance<input type="checkbox"/> Students must maintain a minimum attendance of 90% of the clock hours scheduled<input type="checkbox"/> Student who will be absent must notify the Post-Secondary office at least 1/2 hour before class begins<input type="checkbox"/> NOTE: Refer to the most recent Post-Secondary Education Center Student Handbook and Planner for more information.
Information
<ul style="list-style-type: none"><input type="checkbox"/> Any questions about the program, please contact the instructor leslie.johnson@sciototech.org or tami.hall@sciototech.org

Program curriculum includes:
<ul style="list-style-type: none"><input type="checkbox"/> Anatomy & Physiology<input type="checkbox"/> Medical Terminology<input type="checkbox"/> Pharmacology<input type="checkbox"/> Phlebotomy<input type="checkbox"/> ICD & CPT Coding<input type="checkbox"/> Insurance & Billing<input type="checkbox"/> Electronic Health Records Software<input type="checkbox"/> PC's<input type="checkbox"/> Medical Office Skills



Scioto County Career Technical Center
Post-Secondary Education

For Office Use Only

Application for Admission

Please print clearly and return to SCCTC Post-Secondary Office, 951 Vern Riffe Drive, Lucasville, OH 45648, Phone 740.259.5526, Fax 740.259.8312.

**All questions must be answered. If not applicable, answer N/A.

First Name _____ Last Name _____ MI _____ Maiden Name _____

Date of Birth: _____ Social Security Number: _____

Home Phone _____ Cell Phone _____

E-Mail Address: _____

Street Address _____ City _____ State _____ Zip _____

Program(s) of Interest: _____ Program start date(s): _____

High School Attended: _____ Year of Graduation: _____

High School Location: _____
City _____ State _____

Year GED Earned: _____

(Please attach a copy of your diploma or GED certificate with this application)

Education Advancement:

List all career technical centers, colleges, and/or universities previously attended:

Name of Institution: _____ Type of Degree _____

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Name of Institution: _____ Type of Degree _____

Equal Opportunity Statement

Scioto County Career Technical Center does not discriminate in admission, access, or treatment in programs, and activities or employment policies or practices on the basis of race, creed, sex, color, national or ethnic origin, religion, marital status, age, sexual orientation, or disability. Inquiries regarding Title IX may be directed to the Title IX coordinator at 740.259.5522 ext. 2234.

Alternate Contact Information:

Name: _____	Relationship: _____
Home Phone: _____	Cell Phone: _____
Address: _____	
Street	City
State	Zip

I authorize the Scioto County Career Technical Center, Post-Secondary Education, to obtain and exchange any information about myself as required from past and future employers, training facilities, and other organizations for the purpose of determining eligibility, suitability, and providing services. This also includes obtaining any income verification from employers, public assistance agencies, and/or any other social service agency.

I certify that the statements included in this application are accurate and true to the best of my knowledge. I understand that my enrollment is voluntary and that I shall not hold the Board of Education or school officials responsible for injury resulting from my actions or conduct.

I have read and agree to all the above:

Print Name: _____

Signature: _____ Date: _____

Mission Statement

The mission of Scioto County Career Technical Center, the region’s driving force for re-energizing the economy, is to provide a superior workforce through personalized training, new technologies, and community partnerships.

Refund Policy

Full-Time/600+ hours
A 100% refund* of tuition and lab fees if the student withdraws in the 1st week of the term.
A 75% refund * of tuition and lab fees if the student withdraws within the 2 nd week of the term.
A 50% refund* of tuition and lab fees if the student withdraws within the 3 rd week of the term.
No refund after the 3 rd week of the term.
*Excludes any expenses incurred by the school such as assessments already taken, books, tools, etc.

Short-Term/up to 599 hours
If a program is cancelled for any reason, or a student withdraws prior to the start date of a program, a 100% refund will be given.
No refund will be given after the start date of the program.