

Community Education

5055 Santa Teresa Blvd Gilroy, CA 95020 Phone: (408)848-4732

Dear Student:

Welcome and thank you for your interest in our upcoming Certified Medical Assistant Training Program.

Program dates and information are as follows:

February 18,2025 - May 22, 2025

You will complete a total of 187.50 classroom hours with a 120-hour extern-ship to follow.

All students must attend an information session to register for this program.

These classes will be held on the Hollister campus

Included in this informational packet are the following documents:

- Program Summary
- Course Calendar with payment due dates
- Class Fee Payment Plan Form
- Registration Form with Cancellation Policy
- Gavilan College provides educational services and access for eligible students with verified disabilities who intend to pursue coursework at Gavilan College
- Student support program website link hhttps://www.gavilan.edu/student/aec/index.php

Required Textbooks for the Certified Medical Assistant Training Program:

- Kinns The Clinical Medical Assistant 15th Edition ISBN-13-978-0323873765
- Study Guide and Procedure Checklist Manual Kinns Clinical Medical 15th Edition ISBN-13-978-0323874229
- Language of Medicine 13th Edition ISBN-13-978-0443107795-0443107795

For updates and information, please:

- Website: www.community.gavilan.edu
- Email us: commed@gavilan.edu
- Call our offices: (408)848-4732

Thank you,

Gavilan College Certified Medical Assistant Training Program

Program Summary: A medical assistant is a multi-skilled allied healthcare professional that specializes in procedures commonly performed in the ambulatory health care setting. Medical assistants perform both clinical and administrative duties and assist a variety of providers including physicians, nurse practitioners and physician assistants. They typically work in medical offices, clinics, urgent care centers and may work in general medicine or specialty practices. This program will prepare you for the CCMA exam.

Program Expectations:

- 100% attendance mandatory
- No refunds for drop or course fails.
- Fully Covid-19 Vaccinated
- Fast-paced accelerated program

Course Fee: \$3200

Financial Assistance: Regular College Financial Aid is not applicable to this program, but you may be eligible for other funding!

Payment Plan Fee & Info.:In order to register with a register with a payment plan, you are required to make a 1st payment of \$640 + \$100 (pmt plan fee) for a total of \$740.00 due at the time of registration. Four additional payment of \$640 will be due on specified dates. (see course calendar)

Certification: This program will prepare you for the CCMA

State Exam.

No absences allowed

Extern-ship placement will follow the successful completion of the classroom portion of the course.

Requirements for students:

Must be 18 years of age or older; have proof of H.S. graduation or GED; be proficient in keyboarding; understand computing and word processing; have command of the English Language and Math; have Internet access, printing capabilities and an email address. All eligible students must be able to pass drug and background checks.

Physical Requirements: Students must be able to easily lift 30lbs.,

stand up to 3hrs, and have the ability to ambulate and move their bodies at a medium pace.

Additional Costs

Books: \$200.00-\$225.00

Student Kit \$50.00 (optional)

Scrubs: \$30-\$50. Navy blue or Gray (A watch is needed for this class as well as closed toed shoes, no mesh or canvas) Liability Insur.: \$37.00 (Information given in class to purchase) Drug & Background Check: \$71.00 (Information given in class to purchase) CPR Cert.: \$65.00 (DONE IN CLASS) Required Immunizations: (will depend upon student's need)

(Covid Vaccine will be required)

All applicants must be fully vaccinated prior to submitting applications.

State Exam: \$180.00 (subject to change)

Cancellation Policy

No refunds for this program. Please choose carefully! Students on a payment plan who cancel or drop after the first-class session are still responsible to pay the entire course fee of \$3300 to Gavilan College.



Certified Medical Assistant Training Program Dates

February 18, 2025 - May 22, 2025

187.50 classroom hours

120-hour externship to follow

Program Meets Tuesdays & Thursdays

8:30am-3:30pm

Hollister Campus

For Additional Program Information Online Info: www.community.gavilan.edu Call for Info: (408)848-4732 848-4732 Walk-in Info.: Gavilan College Community Ed Dept

To register in this program: Students must submit either a <u>completed and signed</u> registration form or a registration/payment plan form. These are at the end of this packet and <u>no fields should be left blank</u>.

(1st pmt w/fee due at time of registration)

Submit Your Application

By E-mail: mgalvez@gavilan.edu

By Mail: Gavilan College, 5055 Santa Teresa Blvd, Gilroy, 95020y, CA 95020

Gavilan College

Support Services Information

- Gavilan College provides educational services and access for eligible students with verified disabilities who intend to pursue coursework at Gavilan College
- Student support program website link hhttps://www.gavilan.edu/student/aec/index.php
- CalWORKs program Gavilan College website link https://www.gavilan.edu/student/eops/calworks/ index.php
- Fresh Success Program Gavilan College website link https://www.gavilan.edu/student/eops/ calworks/freshsuccess.php
- El Centro-Gavilan College website link https://www.gavilan.edu/resources/index.php
- Food Pantry Gavilan College website link https://www.gavilan.edu/student/eops/calworks/ food_pantry/food.pantry.php

EQUAL OPPORTUNITY IS THE LAW

It is against the law for this recipient of federal financial assistance to discriminate on the following bases: against any individual in the United States, on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, sex stereotyping, transgender status, and gender identity), national origin (including limited English proficiency), age, disability, or political affiliation or belief, or, against any beneficiary of, applicant to, or participant in programs financially assisted under Title I of the Workforce Innovation and Opportunity Act (WIOA), on the basis of the individual's citizenship status or participation in any WIOA Title I-financially assisted program or activity. Recipients of federal financial assistance must take reasonable steps to ensure that communications with individuals with disabilities are as effective as communications. with others. This means that, upon request, and at no cost to the individual, recipients are required to provide appropriate auxiliary aids and services to qualified individuals with disabilities.



| | Certified | l Medical Assistant | Training Pro | ogram Paymer | Payment Plan | | | | | |
|---|-------------------------------------|--------------------------|----------------------|--------------------|--------------|---|--|--|--|--|
| | Instructor Name | Semester | Total Cost | Start Date | End Date | | | | | |
| | Kim Bohannon | Fall 2024 | <u>\$3300.00</u> Feb | rury 18, 2025 - Ma | ay 22, 2025 | | | | | |
| | Payment Deadlines | Amount | Office Use | | se | | | | | |
| | 1st pmt - At time of registration | \$640.00 + \$100 = \$740 | 00 | | | | | | | |
| | 2nd pmt - Wednesday, Feb 25, 2025 | \$640.00 | | | | _ | | | | |
| 1 | 3rd pmt - Wednesday, March 19, 2025 | \$640.00 | | | | | | | | |
| | 4th pmt-Wednesday, April 16 , 2025 | \$640.00 | | | | | | | | |
| | 5th pmt - Wednesday, May 14, 2025 | \$640.00 | | | | | | | | |
| | | Terms ar | nd Conditions | | | | | | | |

The Gavilan College Community Education Department has implemented a payment plan option for students enrolling in our fee- based, not for college credit Veterinary Assistant Training Program. This plan requires that full payment of the program fees be paid in 5 installments. A deposit of \$640.00 + \$100.00 payment plan fee = \$740 is due upon registration (see schedule above).

Initial The balance is then paid over 4 more installments.

Initial. AutoPay. Payment will be automatically processed every month by due date.

> Students who have not completed each installment by each due date will not be allowed to continue in the class and will be ineligible to receive their certificate. Students will not receive any refund of previous payments if they are not allowed to complete the training program for non-payment. A <u>\$25 NSF Fee</u> will be charged to the student every time the C.C. # is not valid, not working or NSF. Payment will be deducted automatically on specified dates.

Payments may only be made through the Community Education office.

There is no penalty for early payment.

This course is not eligible for Federal or State student aid programs because these are not college credit-bearing courses. I have read, understand and agree to the conditions of this Class Fee Payment Plan. I further understand that it is my responsibility to make each payment on or before the due date and I promise to do so. Failure to do so may result in my being ineligible to complete the training program. I have received a copy of this Payment Plan form. Failure to successfully complete

Initial

Initial

this training program does not release me from this obligation. All unpaid balances will be forwarded to collections.

| Student Signature | Date | Community Education Signature | Date | | | | | |
|--|------|---------------------------------|------|--|--|--|--|--|
| | | | | | | | | |
| | | | | | | | | |
| Not Valid Unless All Information is Provided | | | | | | | | |
| Student Name: | | Student Full Address: | | | | | | |
| Student Social Security Number: | | Student Cell Phone/Home Phone: | | | | | | |
| Student Email: | | Student Date of Birth: | | | | | | |
| Reference Information | | | | | | | | |
| Reference Person Name: | | Reference Person Daytime Phone: | | | | | | |
| Reference Person Address: | | Reference Person Email: | | | | | | |
| City: State: Zip: | | | | | | | | |

REGISTRATION FORM

Certified Medical Assistant Training Program

| | Gavilan Col | lege Community Edu (408) 848–4732 | cation | |
|---|---|---|---|---------------|
| Student Name: | | | | |
| | | | | |
| City: | | State: | Zip: | |
| Day Phone: (| / | Evening Phone 、 | | |
| Email Address: | | · | | |
| Birth Date: | May we send you e-mai | il announcements? Yes | No | |
| Where did you hear abo | ut us? | | | |
| Preferred Language | | Limited English speaker | Yes No | |
| Other: | | | | |
| Start Date | /Time | Title of Cours | se | Fee |
| Tuesdays &Thursdays | February 18, 2025 - May 22, 2029 8:30am-3:30pm | 5 Certifi | ied Medical Assistant Program | \$3200 |
| Payment Option | S | | Total | \$3200 |
| Payment Optic through Gavilan College Co \$100.00 Payment Plan Fee the duration of the progra | on Plan through Gavilan Co ommunity Education. The Class Fee Pay e. These payments are due to the Gavil m on specified dates; for specific detai | yment Plan option will be broken int an C.E. office upon registration. 4 ec ils, see the Class Fee Payment Plan F | iON A payment option plan may be avain to an initial non-refundable deposit of \$6 qual payments of \$640.00 will then be de Form in this packet. | 40.00 plus a |
| | r money orders payable to: (| | | |
| MO # | Check# | Name on Check | | |
| EreditCardInfo | Visa MasterCard | Expires/ | | |
| | | | | |
| Cardholder Name | <u> </u> | | | |
| Authorized Signa | ture | | | |
| the Class | | posit of \$640.00 plus the \$100.00 P | ons require a 7-day advance notice. Stu ayment Plan Fee. Students taking part ir | the Class Fee |
| Paymen | | | | |

STUDENT ACTION REQUIRED

To complete registration, students must print, sign & date this form as confirmation that they have read and understood the above program cancellation policy. Please note that students are not registered in this program until they receive direct confirmation via email from the Gavilan College Community Education Office. This is an intensive program and we make no guarantee of completion or passage.

Student Name

Student Signature

Date