Application

CERTIFICATE
NURSING PROGRAMS

Application Priority Deadline
14 Days Prior to First Day of the Quarter

APPLICATION SUBMISSION INSTRUCTIONS

Thank you for your time and efforts in applying to Green River's Nursing certificate programs. Please read and follow the instructions below carefully and completely.

1. Complete this application and gather the required materials for your program. Please find your program below, and review the list of required materials.

2. Combine your completed application and application materials into one PDF file. You can use the free online Adobe PDF File Merge Tool to combine your documents. Once you have combined your documents into one file, name the PDF file using your last name, and first name. See example below:

①

Application Documents
application.pdf
id.jpeg
immunizations.pdf
etc...

②

Upload | Organize Merge Documents

UPLOAD

③

PDF

Smith, Sam.pdf

3. Using the "Upload Completed Application" link that is located on your intended program's Web site (see link below), upload your one PDF application file.

Nursing Assistant
1. This application, pages 1-4 only.
2. Color copy of photo ID. Refer to page 5.
3. Copies of immunizations record. Refer to pages 4 and 7.
4. Proof of personal health insurance. Refer to page 5.
5. A copy of your CASAS assessment results. Refer to pages 5 and 8.

Application Upload: Upload Completed Application link on program's Website.

Emergency Room & Patient Care Technician
1. This application, pages 1-4 only.
2. Color copy of photo ID. Refer to page 5.
3. Copies of your immunizations record. Refer to pages 4 and 7.
4. Proof of personal health insurance. Refer to page 5.
5. A copy of your CASAS assessment results. Refer to pages 5 and 8.

Application Upload: Upload Completed Application link on program's Website.

Medical Assistant-Phlebotomy
1. This application, pages 1-4 only.
2. Color copy of your photo identification ID. Refer to page 5.
3. Proof of your personal health insurance. Refer to page 5.
4. A copy of your CASAS assessment results. Refer to pages 5 and 8.

Application Upload: Upload Completed Application link on program's Website.

Cardiac Monitor & Electrocardiography (EKG) Technician
1. This application, pages 1-4 only.
2. Color copy of your photo identification ID. Refer to page 5.
3. Copies of your immunizations record. Refer to pages 4 and 7.
4. Proof of your personal health insurance. Refer to page 5.
5. A copy of your CASAS assessment results. Refer to pages 5 and 8.

Application Upload: TBD

GREEN RIVER COLLEGE
NURSING

12401 SE 320TH ST, Auburn, WA 98092
nursing@greenriver.edu

greenriver.edu/nursing

ctcLink ID

Date

Applicant Signature

Signing above you verify that the information contained in this application and the accompanying materials is true and accurate to the best of your knowledge.

Application
CERTIFICATE
NURSING PROGRAMS

CERTIFICATE PROGRAM

Please indicate your intended program of study. The Emergency Room & Patient Care Technician (ER Tech) program can be completed in one quarter or two quarters; for students pursuing ER Tech, please indicate your intended program length--please note that if you select the 2 quarter option, you will be enrolled into the Nursing Assistant program in your first quarter, followed by the Phlebotomy program in your second quarter.

☐ Emergency Room & Patient Care Technician
　☐ 1 Quarter ERT
　☐ 2 Quarter ERT

☐ Nursing Assistant　　☐ Medical Assistant - Phlebotomy

☐ Cardiac Monitor & Electrocardiography (EKG) Technician
New Program-Coming Soon

Quarter Start & Lab Section Preference
Please indicate your intended starting quarter, and which lab section you prefer. Please note that we cannot guarantee that you will be assigned to your lab section preference.

☐ Fall　　☐ Winter　　☐ Spring　　☐ Summer

Lab Section Preference _____

APPLICANT INFORMATION

First Name _____　Middle Initial _____

Last Name _____　Date Of Birth ☐ ☐ ☐ ☐ ☐ ☐
　　　　　　　　　　　　　　　　　　　　　　　　　　D　D　M　M　Y　Y

Street Address _____

Phone _____　Zip Code _____

E-Mail _____　City / Country _____

Do you have medical insurance? ☐ Yes　☐ No

If you do not have medical insurance, you will be required to complete a waiver form once you are enrolled.

ACKNOWLEDGMENT

Please read the statements below, and sign your initials next to each statement to confirm that you have read and understand each statement. For questions, contact Green River Nursing at nursing@greenriver.edu.

I understand that I may request reasonable accommodations to meet the standards of the nursing certificate programs. Refer to the Disability Support Services Web site for information about accommodations.

Initial _____

For applicants applying to the Nursing Assistant, Emergency Room & Patient Care Technician, and EKG Technician programs: I understand that I must successfully pass a mandatory drug test and will be fingerprinted for clinical placements. I understand any questionable records/incidences in my past can prevent me from completing clinical and therefore, without clinical I cannot complete this program. Applicants to the Medical Assistant-Phlebotomy program do not need to sign their initials next to this statement.

Initial _____

I have read the disqualifying factors for healthcare workers and students, located on the WA State DSHS Website.

Initial _____

I understand that I am responsible for following the instructions of this application, and that deviating from the instructions may impact my eligibility to enroll in the program.

Initial _____

I understand that I must submit my complete application in one PDF file, and that Green River Nursing will only retain my completed application, and will not retain partial applications.

Initial _____

I understand that I must name my PDF application file using my last and first name (i.e. Lopez, Samantha.pdf).

Initial _____

I have arranged my application materials as listed in the Application Submission Instructions on the cover page of this application.

Initial _____

I understand that I am responsible for submitting clear and legible information (i.e. photos, hand writing, etc), and that information that is not clear and or legible may impact my enrollment into the program.

Initial _____

I will be checking the email that I have provided on this application regularly to ensure that I receive notifications from Green River.

Initial _____

I understand that Green River Nursing will only accept my application submission by the application upload link that is specific to the program for which I am applying, and is listed under the Application Submission Instructions section of this application.

Initial _____

I understand that by submitting my application I am confirming that it is complete and accurate to the best of my knowledge, and that Green River Nursing is not obligated to notify me should I submit an incomplete application.

Initial _____

Signing below, you acknowledge that you have read and understand the above statements on this page.

Signature _____

Date _____
mm/yyyy

BACKGROUND CHECK

First Name

Middle Name

Last Name

Date Of Birth

D D M M Y Y

Prior Alias(es)

The following section must be completed and turned in with your application. Do not pay to run the background check. We will contact you when it is appropriate for us to run a background check. Clinical fieldwork is integrated throughout the program and is required for all students. Placement can occur but is not limited to, the following settings: long-term care, rehabilitation care, outpatient clinics, school districts, pediatric clinics, hospitals, and home health. Disqualifying factors on a criminal background check limits or prevents Community Lab/clinical placement and employability. If you have cause for concern regarding your criminal history outcome or any charges related to vulnerable populations (i.e., children, vulnerable adults), contact the Department of Health to receive clarification about the background as it pertains to licensure. Final admission to the program is dependent upon the results of this background check. See Washington State DSHS Secretary's List of Crimes and Negative Actions.

CHILD/ADULT ABUSE INFORMATION ACT RCW 43.43.830 THROUGH 43.43.845
All students who will be placed in practicum education sites for Green River College's nursing programs are requested to complete the below, Washington State Patrol Abuse Clearance section. The purpose of this abuse clearance is to ensure the safety and well-being of patients, clients, and children who come into contact with students. Practicum education sites are expecting that Green River students will not pose undue risks to the safety of patients/children.

The Washington State Patrol, abuse clearance request, is for the following: "Child/Adult Abuse Information: Response limited to convictions against children or other persons, dependency proceedings, abuse of vulnerable adults, and DOL disciplinary board final decisions and any subsequent criminal charges associated with the conduct that is the subject of the disciplinary board final decision." Please be aware that information on other felony and misdemeanor convictions may be reported from the State Patrol office. This abuse clearance is used only for the purpose of practicum education placement, determination and further dissemination or use of the record is prohibited.

As stated earlier, all students are required to complete this form. Any student choosing not to complete this process must be aware that the ability of faculty to arrange practicum education experiences will be severely restricted and, in some instances, impossible. All facilities utilized in Green River's nursing programs require proof of this clearance before students are allowed to participate in any practicum and clinical activities.

I, at this moment, authorize Green River College to perform criminal background checks, maintain the record(s) until I graduate or withdraw from the program, and share the information as requested by clinical sites. I have read and understand the information about the Washington State Patrol Abuse Clearance.

Signature _____   Date: _____
                                                  mm/yyyy

BACHELOR OF SCIENCE
NURSING

Tuberculosis Testing-Completed by Healthcare Provider

Dear Healthcare Provider,

You are receiving this letter to help us document an applicant or current student's vaccination record. For our nursing programs, we require that students be tested for tuberculosis using one of two options:

1. A QuantiFERON test that is negative. If the lab result states the applicant/student is positive, the applicant/student will be required to provide a negative chest x-ray and physician evaluation stating the student has no current symptoms. An asymptomatic applicant/student, whose chest x-ray and assessment indicates no active disease, may attend class/clinical.
2. A two-step TB skin test (TST) that is negative, given 7-21 days apart. If at any point in the testing the TST is positive, it indicates that the applicant/student has been exposed to TB. The applicant/student will be required to provide a negative chest x-ray and physician evaluation stating the student has no current symptoms. An asymptomatic applicant/student, whose chest x-ray and assessment indicates no active disease, may attend class/clinical.

For students who received a QuantiFERON Test or those requiring physician's assessment and chest x-ray please attach a signed copy of the medical record indicating the results.

First TB Test	
Placement Date	Location of Placement
Reading Date 48-72 hrs after placement	Results Documented in MM

Second TB Test - PLaced 7-21 Days Later	
Placement Date	Location of Placement
Reading Date 48-72 hrs after placement	Results Documented in MM

Student Name _____
 Last   First

Printed Provider Name and Credentials _____

Provider Signature _____   Date _____
                                                                                            mm/yyyy

Address of Healthcare Facility _____

ELIGILBLITY TO APPLY

Please carefully read the eligibility requirements that are listed below. Note that Medical Assistant-Phlebotomy applicants do not need to submit records of immunizations. Applicants to the Emergency Room & Patient Care Technician, Nursing Assistant, and Cardiac Monitor & Electrocardiography (EKG) Technician programs do need to submit immunization records with their application.

- Be an admitted Green River student. Apply to Green River College, if you are not already a student. Once your application is processed, a ctcLink identification (ID) number will be issued and sent to the email address that you provided on your GRC application.

- Must best 18 years of age or older prior to graduation date and licensure.

- Must pass background check and mandatory drug screening.

- Applicants applying to the Nursing Assistant, Emergency Room & Patient Care Technician, and EKG Technician programs must be up-to-date on their immunizations. This can take up to 8 months to complete. Medical Assistant-Phlebotomy applicants do not need to meet this requirement.

- Possess personal health insurance.

- Completion of Reading and Math CASAS Assessment, with a score of at least 228 in Reading.

- Possess valid state and or Federal photo identification (ID).

COST

Please refer to the Green River College Website for the current tuition rates and fees. Note that the costs listed below for each program are approximate costs and are intended to provide you with a close estimate of the actual costs.

Emergency Room & Patient Care Technician

Required	Approximate Cost
Tuition-In State	**$1821.00**
Course Fees	$600.00
Books-textbook and workbook	$200.00-$400.00
BLS Card-AHA adult, infant, child, and AED	Included
Liability Insurance	$21.00
Uniform-scrub top and pants	$20.00+
Health Insurance	Arranged by Student
Shoes-solid white or black vinyl or leather English Composition	$20.00+
Department of Health Certification Application Fee	$150.00
Name Tag	$8.00
Gait Belt	**$15.00**
Stethoscope-single barrel preferred	$25.00
Blood Pressure Cuff	$25.00
Watch with Second Hand	$10.00
National Certification Exam	$110.00
Department of Health Certification Application Fees	$215.00
Total Approximate Cost	$3440.00

Nursing Assistant

Required	Approximate Cost
Tuition-In State	$1444.00
Course Fees	$250.00
Books-textbook and workbook	$100.00-$200.00
BLS Card-AHA adult, infant, child, and AED	Included
Liability Insurance	$21.00
Uniform-scrub top and pants	$20.00+
Health Insurance	Arranged by Student
Shoes-solid white or black vinyl or leather English Composition	$20.00+
Name Tag	$8.00
Gait Belt	$15.00
Stethoscope-single barrel preferred	$25.00
Blood Pressure Cuff	$25.00
Watch with Second Hand	$10.00
National Certification Exam	$110.00
Department of Health Certification Application Fees	$65.00
Total Approximate Cost	$2213.00

Medical Assistant-Phlebotomy

Required	Approximate Cost
Tuition-In State	$1080.44
Course Fees	$350.00
Books-textbook and workbook	$100.00-$200.00
BLS Card-AHA adult, infant, child, and AED	Included
Liability Insurance	$21.00
Uniform-scrub top and pants	$20.00+
Health Insurance	Arranged by Student
Shoes-solid white or black vinyl or leather English Composition	$20.00+
Department of Health Certification Application Fee	$150.00
Approximate Total	$1841.44+

Cardiac Monitor & Electrocardiography (EKG) Technician

Required	Approximate Cost

New Program Coming Soon

Funding Options

Eligible students in Green River's nursing certificate programs can apply for grant funding through Green River's Workforce Education Office, which may provide funding for tuition, books, childcare, transportation, and specialized tools and equipment. Visit their Website or contact their office to learn more about your eligibility, the application process, and applicable deadlines.

IMMUNIZATIONS AND ADDITIONAL REQUIREMENTS

REQUIRED IMMUNIZATIONS AND TESTS
In order to participate in the Community Lab/clinical courses, students need to have all of the immunizations and tests completed. Documentation must be from a healthcare provider and include signature, credentials, and date (mm/dd/yyyy). This can take up to 8 months to complete. Please refer to the Green River Nursing Website for directions. Green River College will not attempt to locate an alternative location for clinicals for those that do not have the required immunizations and tests.

Tuberculin Status [PPD(TB)]: Must have 2-step TB noting placement location and results with dates (4 visits total), or a Quantiferon blood draw.

If no records or more than 12 months since last Two-Step TST, a Two-Step TST must be done before enrollment in the program. The 2-step process is explained as follows:

- First visit: Get the TB shot (make sure you get documentation for this – date and signature).
- Second visit: Two days after visit #1 you go back to get the TB Test Reading (results) – this should be given in millimeters (mm), which will determine whether the test is positive or negative.
- Third visit: No sooner than one week after visit #1 (1st TB shot), no later than two weeks after visit #1. You will get the whole process done over again. This visit you get your 2nd TB shot.
- Fourth (final) visit: Two days after visit #3 you will get the 2nd TB shot reading. Again, you need documentation stating the results in millimeters (mm) and whether the effect is positive or negative.

Note of Caution: Be aware that a 2-step TB has 4 total components, the TB shot and TB reading, both done twice. You must have 2 separate TB Tests within the proper timeframe. For your convenience, a form is available on Page 5 that can be filled out by your provider and follows the above guidelines for timed 2-step TB testing.

If an applicant has a medically documented history of prior BCG vaccine, an IGRA test will need to be obtained. If the results are positive, they will be required to get a clear chest x-ray and provide a negative symptom check from a healthcare provider. (IGRA should be drawn on the same day as live-virus vaccines or weeks after administration of live-virus vaccines.). Students with a history of positive TB results must provide proof of a clear chest x-ray and submit an annual negative symptom check from a healthcare provider.

Hepatitis B: The Hepatitis B vaccination is a series of 3 intramuscular injections completed at appropriate time intervals (1 and 6 months after the initial dose) and a post-vaccination titer (blood draw) at 6-8 weeks after the series completion. If the titer is negative, then the series is repeated, and another titer is drawn 6-8 weeks after the completion of the second series. This vaccination can be obtained through your healthcare provider. Students may also provide documentation of a positive titer (anti-HBs or HepB Sab) or sign a vaccination declination. However, specific healthcare institutions may require vaccination without exception; alternate clinical rotation arrangements will not be made. Can take up to 8 months to complete.

Tetanus, diphtheria, pertussis (Tdap): Must have one adult dose of Pertussis (Tdap) after age 18. And a Tdap or Td within 10 years.

Measles (Rubeola), Mumps, & Rubella: Proof of vaccination (2 doses at appropriate intervals) or proof of immunity by titer, showing resistance to all three.

Varicella (Chickenpox): Proof of vaccination (2 doses at appropriate intervals) or proof of immunity by titer.

Flu: Annual season flu vaccination is required for community clinics. Typically offered beginning in August/September and available through April.

COVID-19: We require the two-step Moderna or Pfizer OR one-step Johnson & Johnson COVID-19 vaccine in order to participate in the program as well as at least one booster.

ADDITIONAL REQUIREMENTS

Medical Insurance: Provide a copy of your medical insurance card with your application materials. If you do not have medical insurance, you will be required to complete a waiver form after you are enrolled in the program. Please note in your application that you do not have medical insurance in order to prevent delayed registration.

Liability Insurance: Purchase insurance during the first week of the fall quarter from Green River College.

Reading and Math CASAS Assessment Placement: To participate in the nursing certificate programs, students must place into level 4 reading courses through the CASAS assessment, and also take the Math portion of the CASAS, although their is no minimum requirement for math placement. The CASAS is a free assessment and can be taken in the Placement & Testing Center.

I-BEST SUPPORT

Classroom success can be yours, even if you have experienced past challenges in a traditional classroom setting. The nursing certificate programs incorporate the I-Best program, where you can receive support from an I-Best instructor for the length of your nursing courses. This second instructor assists your nursing instructor in helping with: English as a second language, study skills development, math skills assistance, test taking, and exploring career options. To qualify for the additional I-Best program support, you must take a placement assessment called the CASAS. All nursing students are required to take the Reading and Math CASAS assessments prior to the quarter starting.

Disability Support Services and Accomodations

Applicants to the nursing certificate programs who need accommodations to meet the standards of the nursing certificate programs may request accommodations, and are required to certify that accommodations will be provided for them so they can meet the standards of the nursing certificate programs. Eligibility for accommodations is identified through the Disability Support Services office. Additional information about requesting accommodation is available at www.greenriver.edu/DSS.

END OF APPLICATION