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STUDENT ADMISSION APPLICATION 2017

First Name	Middle Initial	Last Name
Address		Apt. Number
City	State	Zip Code
Phone Number	E-Mail Address	
Emergency Contact	Phone Number	

Please indicate the class date you are applying for: _____ BC MP
 Contact if earlier session is available? _____

How did you hear about Valley Training Center?

Friend – Referred by: _____
 Internet
 Newspaper Advertisement
 Other: _____

Please answer the following questions:

Are you able to lift a minimum of 50 pounds? YES NO
 Do you have any medical restrictions or conditions? YES NO
 Have you ever been convicted of a felony or misdemeanor? YES NO
 If so, please explain:

IMPORTANT STUDENT POLICIES:

Valley Training’s Nurse Aide Training Program consists of 75 hours of instruction, laboratory, and clinical sessions. You must attend ALL training sessions in order to complete the program and receive a certificate of completion.

- Absences and tardiness will only be approved by the Director of the program on a case-by-case basis.
- To request a refund a student must submit the request in writing before the start date of the class. Refund requests may be submitted via email, fax, or dropped off at our office in the form of a letter. At that time, the student’s name will be removed from the class list and their spot will remain open for another potential student to sign up.
- In order to receive a refund the student must also sign a Refund Request Form, which may be obtained after submitting their request in writing. Refunds will not be issued until the Refund Request Form is signed.
- There are absolutely no refunds once the class has started.

I HAVE READ AND AGREE TO THE ABOVE STUDENT POLICIES BY VALLEY TRAINING CENTER.

(This will be kept on record by Valley Training Center office.)

Applicant’s Signature _____ Date _____