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MASON CENTER
FOR HEALTHCARE EDUCATION

Application for Certified Nursing Assistant Course

Financial obligation: The total cost of the course is \$700. Tuition is due in the full amount 10 calendar days before the start of in-person classes. The Mason Center will not collect tuition more than 10 days prior to the scheduled start date of a program. Students can pay their tuition by Cash, Check, Money Order, or Cashier's Check. Students who pay in cash are provided with a \$25.00 tuition discount. You can purchase mandatory books through the Mason Center for an additional fee.

Section 1: Personal Information

(Please note that to change a name that is already in our system, we must have documentation of proof of name change.)

Name: _____
Last First Middle Maiden

Previously used names: _____

Address: _____
Street Apt# City State Zip code

Telephone numbers: _____
Home Cell

Email-Address(required): _____

Date of birth: _____ **Place of birth:** _____
(city/state)

Social Security Number: _____

Section 2: Background

Have you been convicted of a crime other than speeding? ☐ Yes ☐ No

If "yes" please explain: _____

Section 3: Application Attestation

I further attest that: **1.** I have read the application and attached admission policy and agree I meet the admission requirements **2.** All statements on the application are true and complete; and **3.** I am of good judgement and moral character.

Print Name of Applicant: _____

Signature of Applicant: _____

Date: _____

For office use only: Application accepted: _____ Yes _____ No Date reviewed: _____

Person who reviewed application: _____

Notification to applicant sent via: _____ email _____ mail _____ phone Date sent: _____