HEALTH CARE PROGRAM IMMUNIZATION & SCREENING REQUIREMENTS

	cas requires that all students in direct contact have obtained the immunizations ments requested by the clinical facility. It is the student's responsibility to obtain wed to enroll or begin clinicals unless all requirements are satisfied.
Bacterial Meningitis: Currently CE students enrolled in course	s/programs with less than 360 contact hours are exempt from this requirement.
immunization is given 4 weeks after the first and third at least 8 months to complete the series of three immunizations} Alternate method (If available)-	on of a positive titer 4-6 weeks after the third immunization. (The second weeks after the second and 16 weeks after the first. It takes a minimum of 4
after the first and third dose 21-30 days after the first) and a final	dosing schedule that requires 3 doses <i>over</i> a 30 day period (second dose 7 days booster 12 months after the first dose. Receiving the first 3 initial doses satisfies otected and to remain in compliance for employment purposes, the 4th dose
_XInfluenza (Flu): proof of one dose within the last year (if requ	ired by clinical facility)
doses of MMR vaccine {separated by at least 30 days) after _Mumps: If you were born in or after _1257. You must have ei age OR a titer result adequate to indicate immunityRubella (German measles): Requiredfor all students. You muage OR a titer result adequate to Indicate immunity.	1957. You must have either documentation of two doses of measles or two 12 months of age OR a titer result adequate to indicate immunity. ther documentation of one dose of mumps or MMR vaccine after 12 months of ust either have documentation of one dose of MMR vaccine after 12 months of for measles, mumps, or rubella. You must Provide dates of immunizations or
_X_Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertus decennial Td booster for all students or a single dose at an interv who will have patient contact or be present in a clinical setting du NOTE: A dose of tetanus/diphtheria (Td) within the last ten years Patient contact and will not be in a clinical setting during their ed	ral of two years from the last Td for all students uring their educational program. s will be accepted for students who have no
_X_Varicella (Chickenpox): You must have two immunizations, a re Please note: This is the <u>ONLY</u> immunization that may have a date satisfying the requirement.	
_X_Tubercul osis {TB) skin test (PPD): You must have proof of a neg of clinical. TB skin test are also required on an annual basis while antibodies OR if you have a history of a positive PPD. Chest x-ray: Required ONLY if there is a history of a positive PPD of the positive PPD and a negative chest x-ray taken after the date.	e enrolled OR proof of a titer positive for test reading. You must provide documentation
Immunizations are required for all students AND must be completed Incomplete applications, as reflected by missing items from the che Students must notify Galveston College Continuing Education of any to register in the class or the inactivation of the application.	
any misrepresentation or falsification of information is caused	ent is true and complete to the best of my knowledge. I understand that d for denial of admissions to the Health Care Program and/or expulsion liveston College Continuing Education and Professional Development
Signature of Applicant	Date

HEALTHCARE PROGRAM REQUIREMENTS

The following documentation I s required for admission into a Galveston College Continuing Education Healthcare Program. **ALL** documentation must be submitted to the Continuing Education and Professional Development Center for approval **TWO (2) WEEKS PRIOR TO CLASS START DATE.** The penalty for falsifying information on your application is immediate withdrawal without a refund.

Fully completed Galveston College Continuing Education Healthcare Program Application. This can be obtained from our website: www.gc.edu/CEregister

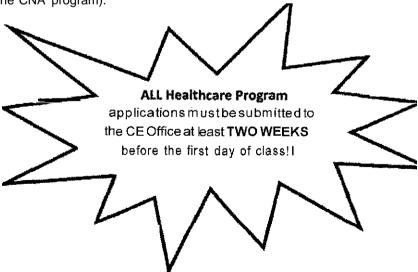
You may also contact or visit the Continuing Education Office.

High School diploma or GED (except for currently enrolled high school students. See CE staff for more information if applies to you). Copy of Current State ID or Driver's License **AND** copy of Social Security Card. Your name on these methods of identification must match exactly, or you may not be able to take your certification examination upon the completion of your course.

Satisfactory Criminal History, obtained through the Texas Dept. of Public Safety website (www.txdps.state.tx.us). The following may disqualify an individual from this program: felony convictions, misdemeanor convictions involving crimes against persons; felony deferred adjudications for the sale possession, distribution, or transfer of narcotics or controlled substance; and registered sex offender.

Documentation of immunizations, as listed on the attachment. **ALL** must be completed prior to enrollment.

Current physical for some programs. (Contact CE staff for more information). Current Healthcare Providers BLS'CPR card is required prior to clinical (except The CNA program).



Galveston College Continuing Education & Professional Development

(409) 944-1344