



We Care Online

*A Learning Institution for
the Healthcare Industry*

We Care Online, LLC
2177 W Bella Vista
Wichita, KS 67203
(888) 932-2501

www.WeCareOnlineClasses.com

We Care Online
2177 W Bella Vista
Wichita, KS 67203
Email: cindy@wecareonlineclasses.com
Website: www.WeCareOnlineClasses.com
Phone: 888-932-2501
Fax: 520-572-2110

Dear Student:

We are excited to have you in our course. 100% of the class work will be done on-line.

Computer Requirements:

- **Windows 98 or higher**
- **486 processor or higher.**
- **Internet Explorer or,**
- **Netscape**

Please complete the form(s) in this packet. You may email, mail or fax them to We Care Online. Your course may require a copy of your certificate or Social Security card. Please fax or mail a copy of any additional items along with your completed forms.

Your course will take place on Blackboard. You can log in to your class on the course start date. Your instructor will email you the username and password you will use to access your course. We cannot open the course to you until the class date. (Open enrollment courses may be accessed when the student requests.)

If a book is required for this course, please be sure to have it by the course start date.

You will be asked to complete a course evaluation. Please make sure your instructor receives it as soon as you have completed the online class work.

We will do our best to make this class a good experience! Please feel free to contact us with any questions you may have!



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COMPUTER EXPERIENCE FORM

I have basic knowledge in computer usage or have someone willing to assist me with this course and obtaining my assignments. I understand, if I have computer difficulties, the help section in the Blackboard is available should I need their assistance. If I need help with the content of the course my instructor will be available via email or phone number that has been supplied in the syllabus.

I agree to be responsible for my own work with this on-line course. I will treat this course as a serious learning adventure as well as an addition to my education in Health Care. By signing below, I acknowledge that I have read and understand the attached Enrollment Agreement.

Signed -Student

Date

Lynn Cline R.N.

Signed – We Care Online Representative

Date

STUDENT INFORMATION

Name:

Address:

City:

ST:

Zip:

Date of Birth

Phone:

Email Address:

**License or
Certificate #:**

Course:

**Social Security
Number:**

Course Date:

Student Paid

Invoice Facility

FACILITY INFORMATION (Required if Invoice Facility is checked)

Facility Name:

Address:

City:

ST:

Zip:

Contact Name:

Email Address:

Phone:

Fax:

Fax this form to: 520-572-2110
Or Email to: cindy@wecareonlineclasses.com



KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

APPLICATION FOR STATE TEST

Check the course you are currently enrolled in. If one of the following is not checked, this form will be rejected and the candidate will not be able to take the test.

- 90-Hour Certified Nurse Aide Course, 20-Hour Home Health Aide Course, Bridge Course for Nurse Aide Course

Complete this form, attach the following and return to instructor:

Copy of identification with current name & social security number (such as driver's license, social security card) Non-refundable application fee of \$20.00 (check or money order).

Course Information (The candidate must complete this part with instructions by the instructor.)

Instructor ID #, Course #, # of course hrs

Candidate Information (incomplete forms will result in test schedule delay)

Name Last, First, MI

Other Names Used

Social Security Number

Birth date, Sex: Male, Female

Address Street, City, State, Zip

Phone Number Home, Work

Please mark the highest level of education received:

- (N) No high school, (H) High school diploma or GED, (L) Licensed Practical Nurse, (D) Diploma Nurse(RN), (A) Associate Degree, (B) Bachelor's Degree, (M) Master's Degree, (E) Education Specialist, (P) PhD

Candidate's Signature

I do hereby attest that the information supplied in this application and any attachments is accurate and complete to the best of my knowledge. I do hereby give permission to the department to verify any information provided in this application and any attachments and to send my test results to my instructor.

Candidate's Signature

Date

Candidate, **please note:**

1. You must present two forms of identification, one must be picture identification, to the proctor at the test site.
2. You must be able to provide your social security number on the test for identification..
3. **YOU MUST BE ON TIME.**
4. If you are late, or fail to appear for your scheduled test, you must call (785) 296-1250 to request a rescheduling form which requires an additional fee of \$20.00.
5. Each candidate has a total of three attempts within 12 months from the beginning date of the course to successfully complete the written state test.
6. If the test is not passed within 12 months from the starting date of the initial course, the course must be retaken to be eligible to retake the test.
7. **ALL FEES ARE NONREFUNDABLE**
8. Certificates are issued 3-4 weeks after the test date.
9. Test scores may be requested by writing to the address listed below.

**Health Occupations Credentialing, KDHE
Curtis State Office Bldg. Ste 200
1000 SW Jackson
Topeka, Kansas 66612-1365
(785) 296-1250**

www.kdheks.gov/hoc

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT**Test site information**

ATCHISON, Northeast Kansas Technical College, 1501 W Riley (913-367-6204)

BELOIT, North Central Kansas Technical College 3033 US 24 HWY (785) 738-9003

BURLINGAME, Allen County Community College 100 Bloomquist (785) 654-2416)

CHANUTE, Neosho County Community College 800 W. 14TH (620-431-2820) ext 280

COFFEYVILLE, Coffeyville Community College, 8th & Beech (620-251-3910)

COLBY, Colby Community College 1255 S. Range (785-462-3904).

CONCORDIA, Cloud County Community College 2221 Campus Dr. (785-243-1435) ext 360

DODGE CITY, Dodge City Community College 2501 N. 14th (620-227-9357)

EL DORADO, Butler County Community College, 901 S Haverhill Rd (316-320-7375)

EMPORIA, Flint Hills Technical College 3301 West 18th (620-341-2300) ext 226

FORT SCOTT, Fort Scott Community College, 2108 S Horton (620-223-2700)

GARDEN CITY, Garden City Community College 801 Campus Dr (620-275-3239)

GREAT BEND, Barton County Community College 245 N E 30th Road, (620-792-9324)

HAYS, North Central Kansas Technical College, 2205 Wheatland Rd. (785-625-2437)

HUTCHINSON, Hutchinson Community College, 1300 N Plum (620-) 665-3512)

INDEPENDENCE, Independence Community College 200 Arco Place (620-332-1420)

IOLA, Allen County Community College 1801 N Cottonwood, (620-365-5116) ext 236

KANSAS CITY, Donnelly College, 608 N 18th, (913-621-8774

KANSAS CITY, Kansas Area Technical School, 2220 N 59th St. (913-627-4100)

KANSAS CITY, Kansas City Kansas Community College 7250 State Ave. (913-334-1100)

LIBERAL, Southwest Kansas Technical School 2215 N. Kansas (620-626-3819)

MANHATTAN, Manhattan Area Technical College, 3136 Dickens Ave (785) 587-2800

MERRIAM, Johnson County Community College, Kings Cove, 10000 W 75th Street, Ste 241 (913-469-2350)

PARSONS, Labette Community College 1200 Main (620-421-6700)ext 1182

PITTSBURG, Pittsburg State University, 1701 S Broadway (620) 235-4332

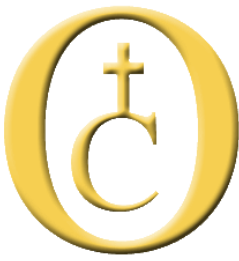
PRATT, Pratt Community College Highway 61 (620-672-5641).

SALINA, Salina Area Vo-Tech School 2562 Centennial Rd, (785-309-3105)

TOPEKA, Kaw Area Vo-Tech School 5724 Huntoon, (785-228-6324)

WICHITA, Wichita Area Technical College Schweiter campus 1400 George Washington Dr, (316-667-1950)

WINFIELD, Cowley County Community College, 125 S 2nd (620-441-6581)



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Enrollment Agreement

Home Health Aide

20 Hours

Course Duration: 2 Week Course, Online

Course price: \$120.00

Materials Fee: \$17.50

Other Fees:

\$20.00 Test Site Fee (to take to the State Test Site – Not included in price of course)

\$20.00 State Application Fee

Book Required:

No book is required for this course

- Course schedule varies, please check course schedule at WeCareOnlineClasses.com
- This course is designed to provide Certified Nurse Aides with additional training and knowledge to provide safe, effective, and supportive personal care assistance in the privacy and comfort of an individual client's home setting. Includes 20 hours as required by KDHE.
- Certificate of Completion will be mailed to the address on file when the course ends and the student has completed all course requirements within the allotted time frame.
- Certificate of Completion will not be issued until course tuition has been paid in full.

Course Prerequisites.

This course may require proof of certain licenses or identity. Please fax or mail a copy of the required items with this enrollment pack. Failure to provide items needed may result in a non-passing grade for this course.

We Care Online's Right to Cancel.

We Care Online reserves the right to refuse service or cancel this enrollment agreement at any time, in the event the student fails to comply with academic, attendance or financial requirements or, disrupts the normal activities of We Care Online. In the event We Care Online cancels this enrollment agreement, a refund will be made to the buyer based on the time line below.

If course is:	0 - 25% complete	100% refund
	25 -50% complete	50% refund
	50 - 100% complete	No refund

Buyer's Right to Cancel.

The student has a right to cancel this enrollment agreement and obtain a refund. If student wishes to withdraw totally from the program, they may cancel this enrollment agreement by calling We Care Online at 888-932-2501. Course will not be refunded once the student has been enrolled in BlackBoard. Textbook will not be refunded by We Care Online.

Job Placement Disclaimer.

We Care Online does not guarantee employment after completion of this course.

We Care Online's Right to Reschedule:

We Care Online reserves the right to reschedule or extend this course in the event of power failure, technical issues or when the number of students enrolled is too small. Back up instructors are available in the event the course instructor becomes unavailable. Refunds will be available to students in the event a course has been rescheduled more than 60 days out.