Thank you for your interest in our continuing education healthcare courses. Enclosed you will find pre-admission information relevant to our Long Term Care Activity Director training. This application packet must be completed and returned to the continuing education healthcare program director prior to registering for classes.

Please return completed packet to:

Collin College
Continuing Education - Healthcare
4800 Preston Park Blvd.
Plano, Texas 75093
jpai@collin.edu
972-599-3117
An activity professional is a person that plans, implements and evaluates the program of activities in a long term care setting. The activity professional is responsible for establishing an individualized program that meets the physical, social, cognitive and emotional needs of each resident based on the individual’s interests, preferences, habits and lifestyle routine.

Collin College offers a blended learning experience that includes both online and hands-on components. The curriculum is approved by the National Certification Council for Activity Professionals (NCCAP) and includes the required Modular Education Program for Activity Professionals, 2nd edition, which is divided into two parts (MEPAP 1 & 2).

Each part includes a 90 hour online component and a concurrent 112 hours of hands-on training that must be completed in a long term care facility. You must complete MEPAP Part 1 successfully to continue on the Part 2.

For more information on national certification visit www.nccap.org.

All students are required to complete the pre-admissions requirements prior to starting class. Any exceptions must be approved by the Program Director. **If you are currently employed by a facility, please contact the program director for special instructions.**

**ALL STUDENTS INTERESTED IN THE ACTIVITY DIRECTOR TRAINING SHOULD PLAN TO ATTEND A MANDATORY INFORMATION SESSION.**

**Long Term Care Activity Director – Admission Criteria**

1. Completed application (attached)
2. Immunizations (Records must accompany application)
   - MMR (immunization or titer to prove serological immunity)
   - Varicella (record of disease, immunization or titer to prove immunity)
   - Tetanus (in the last 10 years)
3. TB skin test (must be taken within 6 months of clinical rotation)
4. Criminal background (GroupOne information attached)
5. Drug screen (SurScan information attached)

The requirements set forth are mandated by the Texas Department of State Health Services, program accreditation agencies and/or the healthcare facilities associated with the courses. Collin College cannot make exceptions to any of these requirements.
Date of application submission: ____________________

Name: ____________________________________________

Mailing address: __________________________________

________________________________________________

Home phone: ____________________  Cell phone: __________

E-mail address: _____________________________________

- I have attached the required documentation for consideration.
- I have read and understand the rules and regulations of the college and the program and will abide by these as terms of my continuation in the program.
- The information I have given in this application is factual, and I understand that falsification of any required documentation will result in the denial of my application.
- I understand that I must obtain and pay for liability insurance when I register for the practicum.
- I have read and understand the terms related, and release Collin College and its employees from any liability.
- I understand that if I don’t successfully complete and pass each requirement, my application could be declined or I could be immediately dismissed from the program.
- I understand that I must successfully complete both the online and hands-on components of my training and maintain a 75% average to receive a certificate of completion.
- I understand that enrollment in the Long Term Care Activity Director training is limited, and seats will be awarded in date order based on those students who complete all pre-admission requirements (immunizations, drug screen, and background check).

Signature ____________________  Date ____________________
Long Term Care Activity Director

GroupOne Texas Student Background Check Instructions

All students applying for admission to the Activity Director classes must complete a student background check through GroupOne Services. **The cost of this service is $45.** That amount may be paid by Visa or MasterCard.

To initiate a background check, go to GroupOne’s student website at www.gpl.com/students. Once you have read the information on the first screen, click continue. You will then see the screen below. Be sure to pick, Texas, **Collin County Community College and Activity Director** to ensure your background results reach the correct department.

![Screen shot of GroupOne's student background check website]
Long Term Care Activity Director
GroupOne Texas Student Background Check Instructions Continued

Continue to read and move through the screens until you get to the screen below. Please view the information necessary to complete this screen and ensure that you have the relevant information prior to starting the background check process.

All on-line activity is date and time stamped. Typical background reports will take 2-4 business days to complete. Only the program director will have access to this information found in the background report. All information is considered confidential and as such will not be used for any purpose other than to determine an applicant’s eligibility.

Any questions can be directed to Jyo Pai at 972-377-1061. Any website technical difficulties should be directed to GroupOne.
Organization/Company **Collin College - Continuing Education** in accordance with their policies you are hereby required to go to SurScan to complete drug screening. You MUST be at SurScan no later than time _____ : _____ am / pm, date _____ / ____ / 200__.

Person to be tested (print) ________________________________ DOB ________________________________

Person requesting testing ______________________________

____ Health Unit Coordinator

____ Nurse Aide Training

X Activity Director

**Type of Testing Requested**

☐ UA Lab

☐ UA OnSite

☐ Hair Drug Testing

☐ Alcohol

☐ Other

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2030 G. AVENUE • SUITE 1102
PLANO, TX 75074

972.633.1388 • FAX 775.370.3031

(effective 1-1-2009)

M-F 9:00 am – 5:00 pm
Closed from 12:00 pm to 1:00 pm

Sat 9:00 am – 12:00 pm