

HEALTH CAREERS APPLICATION

Dear Prospective Student:

Thank you for your interest in the Health Careers programs at the Wilkes-Barre Area Career & Technical Center School of Practical Nursing and Health Careers.

PLEASE CHECK THE COURSE OR COURSES THAT YOU WOULD LIKE TO HAVE PLACEMENT CONFIRMED

NURSE AIDE	_____
PHARMACY TECHNICIAN	_____
MEDICAL BILLING & CODING	_____
PHLEBOTOMY TECHNICIAN	_____
EKG TECHNICIAN	_____

PLEASE FILL OUT THE FOLLOWING INFORMATION

A non-refundable \$50.00 application/processing fee is required with this application to confirm placement in class.

Name: _____

Address: _____

Email: _____

Phone: _____

Social Security #: _____

Please return this application and application/processing fee to confirm your placement. Mail to:

Practical Nursing Program

Wilkes-Barre Area Career & Technical Center

P.O. Box 1699, 350 Jumper Road

Wilkes-Barre, PA 18705-0699

