Dear Paramedic Program Applicant:

Thank you for your interest in the Paramedic Program offered at Capital Community College. The program has much to offer students. It has been in existence since 1986, has been Nationally Accreditated through CoAEMSP, (The Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions), and offers a 16-month certificate track or a two year Associates Degree, all of which earn college credits.

Our program graduates have a high success rate on the National Registry boards and job placement. The faculty is well respected health care clinicians with clinical expertise and a strong commitment to meeting the learning needs of their students. The program has strong liaison relationships with area hospitals and pre-hospital emergency care providers which provide rich clinical experiences that allow for the application of theory learned into patient care.

Enclosed is information that will assist you in your pursuit of admission into the paramedic program. Also, you may go to the college website: http://www.capitalcc.edu. There you may access the college catalog for additional information.

Students with disabilities (learning or otherwise) who may require accommodations should contact the Disabilities Coordinator, Helena Carrasquillo, 860-906-5204 or 860-906-5040 in the Counseling Department in Room 208, before the beginning of each semester. The students must voluntarily disclose and provide documentation of their disability to the Disabilities' Coordinator in order for accommodations to be provided by instructors. If applicable, the Disabilities' Coordinator will supply the student with written notification of accommodations. It is the student's responsibility to give this notification to his/her instructor. The student should notify the Program Coordinator that he/she has filed for accommodations prior to the start of classes. It is also the student's responsibility to discuss what the needed accommodations are with the program coordinator and respective course faculty.

If I can be offer further assistance, feel free to email at: dtauber@capitalcc.edu or call me at (860) 906-5153. Email is the preferred method of communication. Additionally, Marian Beland, my assistant, can be contacted at (860) 906-5210 or mbeland@capitalcc.edu.

Sincerely,

Daniel Tauber, M.Ed, CCEMTP, NCEE, EMS-I
Professor and Paramedic Program Coordinator
Department of Health Careers & Public Safety

<u>Step One:</u> Apply to the college:

1. Go to the college web page: http://www.capitalcc.edu

2. Click on **<u>Admission & Financial Aid</u>** then **<u>Admissions</u>**
    Then select the appropriate item:
    - New Student,
    - Transfer Student or
    - Re-admit Student and follow instructions

    (Note: If you wish to review Paramedic information - select Admissions and then Special Admissions Groups)

3. Submit a college application with either program ID code:
    a. EMT-Paramedic Certificate: GJ97 or

    b. Paramedic Studies Associate Degree: GB73

    (If you have applied on-line in the past, you must complete a paper application and write RE-APPLY on top of application.)

4. Every application will be processed by the college and assigned a Banner ID number.

5. College Placement Test Requirements
    a. If you are pursuing an Associate of Science Degree: Take the Math and English placement exams as part of the college application process unless you have completed college level Math and English classes and hand in a college transcript with this information.
    (Go to http://www.capitalcc.edu, click on Student Services then Placement Testing for information.)

    b. If you are applying to the Certificate program you do not need to take the placement exams.

6. Submit College Admission Requirements
    a. Submit all pre-requisites for college admission to the Admissions Desk on the 2nd floor
        (These may be different than what the Paramedic Program requires.)

    b. Admission Requirements
        - A college application
        - A copy of your high school diploma or an original sealed transcript
        - Immunizations (MMR and proof of chicken pox or lab results)
        - If you want any college credits transferred, you must have an original college transcript sent to Admissions and also complete a Request for Transfer Credit Evaluation form. This will be evaluated after you are accepted into the Paramedic program.

Step Two: Submit required documentation for the Paramedic Studies Program

1. Submit all pre-requisites for acceptance into the Paramedic Studies Program directly to Marian Beland, Room1008, mbeland@capitalcc.edu or FAX to: Attn: Marian 860-906-5148

2. Paramedic Program requirements include:
   - Copy of college application or online notification of registration

   - Copy of High School Diploma

   - Copies of current EMT and CPR cards

   - Copy of Immunization Records & Health Assessment Form
     Please note that these immunization documents are in addition to the ones submitted to College Admissions:

     - ☐   MMR
     - ☐   Varicella
     - ☐   Tetanus/Diphtheria/Pertussis
     - ☐   Hepatitis-B
     - ☐   Annual Immunization - Tuberculosis
     - ☐   Annual Immunization – Influenza
     - ☐   Health Assessment Form *(must be completed by a licensed physician)*

   - Two written recommendation letters dated and signed from two health care professionals

   - Validation of EMT experience by a letter documenting experience with a minimum of 50 patient care calls as an EMT on an ambulance

   - Successful completion of the Paramedic entrance exam. When you are ready to take the entrance exam, follow these directions:

     1. Go to https://www.fisdap.net

     2. Click the "Create an Account" button

     3. Enter the product code "CCC478-TUZF" into the field and follow the prompts to purchase an account

     4. Once the account is created and paid for, sign up with Marian Beland at mbeland@capitalcc.edu to schedule exam at the college

CONNECTICUT COMMUNITY COLLEGE
PARAMEDIC STUDIES PROGRAM

Capital Community College
950 Main Street
Hartford, CT 06103

HEALTH ASSESSMENT FORM
for
Students participating in Clinical Activities

COMPLETE ALL REQUIREMENTS by August 1, 2019

Please submit a copy of all required documents as soon as possible.

Capital Community College / Paramedic Studies Program

Student Name:_____ Date of Birth:____/____/____ Date of Physical Exam:_____
Banner ID@_____ Phone: 1)_____ 2)_____
Emergency Contact Name_____ Phone: 1)_____ 2)_____

TO THE EXAMINING PHYSICIAN / HEALTH CARE PROVIDER (HCP):

Based on my health assessment and physical exam:
□ Student **DENIES** Latex Allergy □ Student **CONFIRMS** Latex Allergy

Student is clear to participate in clinical courses **with no restrictions^**.

□ *yes*   □ *no**   *If no, please explain the nature of the restrictions/limitations related to the delivery of patient care:

_____
**^*See Technical Standards, a sample of abilities & characteristics needed to complete program requirements, attached.*

IMMUNIZATION RECORD
Refer to the CDC *Healthcare Personnel Vaccination Recommendations* at http://www.immunize.org/catg.d/p2017.pdf

REQUIRED TITERS MUST BE POSITIVE PER LABORATORY STANDARD and MUST ACCOMPANY THIS FORM

If not immune, immunization series may need to be administered and a second titer may be required.

1. **MMR: MEASLES (RUBEOLA), MUMPS & RUBELLA (GERMAN MEASLES),** *see* ***https://www.cdc.gov/mmwr/pdf/rr/rr6204.pdf***

> **Evidence of vaccination per the schedule below on or after first birthday:**
> Dose 1:____/____/____ Dose 2:____/____/____ (4 weeks after Dose 1)
> **OR**
> Titer results (attached):_____POSITIVE_____NEGATIVE   (Qualitative or Quantitative titer, laboratory report attached)

> | For HCP born before 1957 see |
> | *http://www.immunize.org/catg.d/p2017.pdf* |

2. **VARICELLA** (CHICKEN POX)

> □ History of Disease, Date:____/____/____   Note: documentation must be provided by a healthcare provider

> **OR**

> Titer results (attached):_____POSITIVE_____NEGATIVE   (Qualitative or Quantitative titer, laboratory report must be attached)

> **OR**
> Dose 1:____/____/____   Dose 2:____/____/____(at least 28 days apart)
> Booster:____/____/____(if needed)

3. **TETANUS/DIPHTHERIA/PERTUSSIS** (**Tdap**) see https://www.cdc.gov/vaccines/hcp/vis/vis-statements/tdap.html

> Tdap Dose:____/____/____(within last 10 years)
> **OR**
> Td (Tdap) Booster:____/____/____(if Tdap was > 10 years ago)

4. **HEPATITIS B:** *Quantitative titer is required following vaccination series:*

> *Titer results (attached):_____POSITIVE (anti-HBs >_ 10 mIU/ml)_____NEGATIVE   (at least 2 months after final dose)*

> **OR** vaccination with a 2-dose series of Heplisav-B OR a 3-dose series of Engerix-B or Recombivax HB, followed by a titer

> Dose 1:____/____/____
> Dose 2:____/____/____(~1 month later)
> Dose 3:____/____/____(~ 5 months later) for Engerix-B or Recombivax HB only

> | For Hep B Non-responders see |
> | *http://www.immunize.org/catg.d/p2017.pdf* |

ANNUAL IMMUNIZATION REQUIREMENTS:

1. Tuberculosis Testing is required every year, options as below:
TB Skin Test (TST): **INITIAL TST MUST be a two-step test** #1 Date Given:_____Date Read:_____**Result**____negative____positive
#2 Date Given:_____Date Read:_____**Result**____negative____positive

OR   TB Blood Test (IGRA, i.e. Quantiferon)   Date of Blood Draw:_____Results (attached):_____

OR
If either test is positive a chest x-ray required   Date of X-Ray:_____Result: normal   abnormal

2. Influenza (Flu) Vaccination is required each year, contact your college for the due date

_____ _____ _____ _____
Healthcare Provider Print Name   **Healthcare Provider Signature**   **DEA Number**   **DATE**

Address:_____**Telephone** (____)_____

Paramedic Studies Program

Capital Community College

Student Statement of Responsibility

I understand that I must submit a completed Health Assessment form prior to participation in any clinical experiences.

I am aware that if my health status should change in a way that would impact my ability to perform in the paramedic program, I must notify the Director/Administrator of the program immediately. The need for additional clearance will be determined at that time.

_____
Student Name (Please Print)

_____   _____
Student Signature   Date

CAPITAL COMMUNITY COLLEGE
AND
SAINT FRANCIS HOSPITAL
PARAMEDIC PROGRAM

Paramedic Program

PARAMEDIC STUDIES - ASSOCIATE OF SCIENCE DEGREE

First Semester (16 Credits)

PMD	111	Paramedic I	8
PMD	116	Anatomy & Physiology for Emergency Care I	2
MAT	137	Intermediate Algebra	3
ENG	101	Composition	3

Second Semester (16 Credits)

PMD	112	Paramedic II	8
PMD	117	Anatomy & Physiology for Emergency Care II	2
ENG	102	Composition & Literature	3
---	---	Humanities Elective	3

Third Semester (10 Credits)

PMD	115	Paramedic III	7
PSY	111	General Psychology I	3

Fourth Semester (14 Credits)

PMD	211	Paramedic IV	7
BMG	202	Principles of Management	3
BIO	235	Microbiology or	
CHE	111	Concepts of Chemistry	4

Fifth Semester (12 Credits)

SOC	101	Principles of Sociology	3
BBG	210	Business Communications	3
BMG	220	Human Resources Management	3
---	---	Humanities Elective	3

Total Credits: 68

PARAMEDIC STUDIES - CERTIFICATE

First Semester (10 Credits)

PMD	111	Paramedic I	8
PMD	116	Anatomy & Physiology for Emergency Care I	2

Second Semester (10 Credits)

PMD	112	Paramedic II	8
PMD	117	Anatomy & Physiology for Emergency Care II	2

Third Semester (7 Credits)

PMD	115	Paramedic III	7

Fourth Semester (7 Credits)

PMD	211	Paramedic IV	7

Total Credits: 34

Anatomy & Physiology is taken concurrently with the Paramedic Program.
   Day (Fall) and Evening (Spring) courses are available. Please indicate such on your application.
For more information, please contact:
   Daniel Tauber, Program Coordinator, EMS Education
   Email: dtauber@capitalcc.edu or Phone: 860-906-5153

CAPITAL COMMUNITY COLLEGE
Application for Admission

Enrollment Services
950 Main Street
Hartford, CT 06103

P: 860-906-5140 • F: 860-906-5129
E: ca-admissions@capitalcc.edu
www.capitalcc.edu

The application process differs depending on whether you are a new student, transfer student, returning student or non-degree student. Choose the box below that best describes you and follow the steps outlined in that box.

PLEASE NOTE: Communication from the Admissions Office will be through the e-mail address you provide in this application. This will include your acceptance letter and next steps for registration.

NEW STUDENT:
First-time college student

1. Complete this **Application for Admission**.
2. Submit **proof of high school or GED completion or college degree completion**. An official transcript or diploma with graduation date is acceptable.
3. Submit **immunization** records. Please go to the Admissions home page at www.capitalcc.edu for more information on immunization requirements.

RETURNING STUDENT:
Haven't attended Capital in two or more years

1. Complete this **Application for Admission**.
2. Verify that Admissions has your **proof of high school or GED completion or college degree completion**.
3. Verify that Admissions has your **immunization records**.

NOTE: A $20.00 non-refundable application fee is required, except for applicants who have previously attended a CT Community College.

TRANSFER STUDENT:
Have attended a college or university other than Capital

1. Complete this **Application for Admission**.
2. Submit **proof of high school or GED completion or college degree completion**. An official transcript or diploma with graduation date is acceptable.
3. Submit **immunization** records. See #3 under "New Student".
4. Submit **official college transcripts** along with a *Transfer Credit Evaluation Form* available at the Enrollment Services Office.

NON-DEGREE STUDENT:
Taking a college course but not completing a degree at Capital

1. Complete this **Application for Admission**.
2. If you wish to take a course that has a pre-requisite, you will need to fill out the *Pre-requisite Waiver Form* and submit it along with your college transcript to the Counseling Office. Please go to the Counseling home page at www.capitalcc.edu for more information.

Capital Community College

(Please print legibly in blue or black ink)

APPLICATION for ADMISSION

CAPITAL
Community
COLLEGE

CONTACT INFORMATION

Legal Last Name   Legal First Name   Middle   Previous Maiden/Last Name

Social Security Number

(Social security number requested for purposes of financial aid, federal income tax benefits, provision of some college services, accuracy of student records and other business purposes.)

Date of Birth   Gender

M   F

Email

Mailing Address   Number & Street   Apt. #   City   State   Zip

Permanent Address   Number & Street   Apt. #   City   State   Zip

Phone Numbers   Cell Phone   Home Phone   Work Phone

ATTENDANCE & APPLYING

Have you previously attended this college?

Yes   No   If yes, when?

Have you previously attended a CT Community College?

Yes   No   If yes, where?

Are you transferring from another college?

Yes   No

For which semester are you applying?

Fall (Aug-Dec)
Spring (Jan-May)
Winter (Dec-Jan)
Summer (May- Aug)

Summer continuing into fall

Year

FAMILY EDUCATIONAL BACKGROUND

Check the category that applies to your parent(s) or guardian(s):

Neither attended college
One or both attended college but did not earn a degree
One or both earned an associate degree
One or both earned a bachelor's degree or higher

ETHNICITY/RACE

This information is requested on a voluntary basis by the U.S. Department of Education, National Center for Education Statistics. Your answer will not affect admission to or registration in the college.

Do you consider yourself to be Hispanic/Latino?

Yes   No

What is your race? (Select one or more)

White (10)   American Indian or Alaskan Native (50)
Black or African American (20)   Native Hawaiian or Other Pacific Islander (80)
Asian (45)

CITIZENSHIP

Are you a United States citizen?   If no, are you a permanent resident? (green card holder)

Yes   No   Yes   No

IN-STATE TUITION

Out-of-state students may be eligible for a reduced tuition rate through the NEBHE program. For details, see the college catalog or website.

1. Are you eligible for in-state tuition because you have continuously resided in Connecticut for at least one year <u>and</u> Connecticut is your permanent home?
   Yes   No

2. If "No," can you claim and demonstrate through documentation that you are eligible for in-state tuition?
   Yes   No

3. Check here if applying under the New England Regional Student program (NEBHE).
   NEBHE

If you answered "Yes" to question #2 or checked question #3, you must submit a "Declaration of Eligibility for In-State or NEBHE Tuition" for review and determination of eligibility.

MILITARY STATUS

Are you currently on active duty with the U.S. Armed Forces? (ACTD)   Yes   No
Are you currently a member of the National Guard or Reserve? (NGRE)   Yes   No
Have you ever served in the U.S. Armed Forces? (VETT)   Yes   No
Are you a dependent of a member of the U.S. Armed Forces? (VETD)   Yes   No

If you answered "Yes" to any of these questions, you may be entitled to benefits and should meet with the college's Veterans Certifying Official (VCO).

Received Date ____ / ____ / ____   Student Type _____

BANNER @ _____   Entered By _____

Admit Type _____   Entered Date ____ / ____ / ____

Application Fee Paid ☐ Yes ☐ No   Credit/Debit Card

Cash _____ Check # _____   _____

Money Order _____ Waived _____   Exp. Date ____ / ____

Revised: 2/25/2019   9

EDUCATIONAL GOAL

Check only one

- Developmental (college prep) education (DV)
- English skills (ESL) (ES)
- Certificate - undergrad credit (CT)
- Fulfill other college's requirement (AC)
- Transfer without an associate degree (ON)
- Associate degree (DG)

- Earn associate degree, then transfer (DT)
- Personal development course(s) (PD)
- Job preparation/retraining course (JB)
- Job promotion (JP)
- Unsure at this time (UN)
- Goal not listed (NL)

PREVIOUS COLLEGES ATTENDED

College/University Name   State

Dates of Attendance   Graduation Date   Degree Awarded

College/University Name   State

Dates of Attendance   Graduation Date   Degree Awarded

College/University Name   State

Dates of Attendance   Graduation Date   Degree Awarded

INTERNATIONAL STUDENT INFORMATION

Are you an international student who needs an I-20 form for an F1 Visa?
☐ Yes   ☐ No

Other Visa Holder (indicate type)   Visa Start Date

Visa Admission Number   Visa End Date

International Address

COMMUNICATION & CONSENT

Email Communications
I request the college forward me any initial correspondence to the email address I have provided, including personally identifiable information pertaining to me from college records protected by FERPA.

Consent for the Disclosure of Education Records
I understand that to maintain accurate student records, including the records pertaining to my attendance at the college, and for other necessary business purposes, the college may need to release or provide access to personally identifiable information in its records pertaining to me to another college in the CT Community College System or to the system's administrative office. Accordingly, I hereby authorize the college to release or allow access to such information to those indicated for the purposes described.

Signature

INTENDED PROGRAM OF STUDY

In which degree/certificate program do you plan to enroll? *(use attached list)*

Primary Major   Code

Secondary Major *(optional)*   Code

HIGHEST EDUCATIONAL LEVEL ACHIEVED

Check only one

- No high school diploma or GED (01)
- High school diploma or GED (02)
- Some college (06)
- Undergraduate certificate (05)
- Associate degree (07)
- Bachelor's degree (08)

- Master's degree (09)
- Other advanced degree (10)
- Doctoral degree (11)
- First professional degree (JD, MD, DDS, LLB) (12)
- Sixth-Year certificate (13)

ACADEMIC BACKGROUND

Do you have a high school diploma?
☐ Yes   ☐ No   ☐ Pending

Name of High School

City/State   Country

Have you passed the high school equivalency exam GED, TASC, HiSET? (070997)
☐ Yes   ☐ No   Year   Town/State

Are you a home school graduate? (100001)
☐ Yes   ☐ No   Grad Year   Town/State

Please submit a copy of your final official high school transcript or equivalency credential.

Have you participated in the High School Partnership Program through the CT Community Colleges?
☐ Yes   ☐ No

Have you taken courses at your high school and earned college credit? (concurrent enrollment)
☐ Yes   ☐ No

Signature

I certify with my signature below that I am the applicant and that the information I have provided above is accurate. If admitted, I pledge to comply in good faith with all the rules and regulations of the college. I realize that any misleading information provided by me on this application may be cause for dismissal. I understand that information collected in this application is for reporting purposes only and will not be used in the selection process for admission.

Signature   Date

Parent/Guardian Signature (if under 18)   Date

CAPITAL COMMUNITY COLLEGE

STATE IMMUNIZATION POLICY

BANNER ID# @ | | | | | | | | | |
If unknown, leave blank

Enrollment Services • 950 Main Street • Hartford, CT 06103 • Phone 860-906-5140 • Fax 860-906-5119

Students must comply and return this completed document to the Admissions Office PRIOR to registration.

If you were born after December 31, 1956, Connecticut State Law requires that all full-time (degree seeking and nondegree/non-matriculating) and part-time matriculating students enrolled in postsecondary schools be adequately protected against measles, mumps and rubella. In addition, beginning on August 1, 2010 all full-time and matriculating students, except those born in the continental United States prior to January 1, 1980, must provide proof of immunization against varicella (chicken pox). Students must have two (2) doses of each vaccine administered at least one (1) month apart to insure adequate immunization.

If you are not exempt, please complete one of the options below and attach the necessary documentation.

Name of Student _____ SS# _____-_____-_____ Date of Birth ____/____/____

Address _____
Street   Town   State   Zip

OPTION 1: RECORD OF IMMUNIZATION This section must be completed by either a physician or someone operating under the direction of a physician (ex. School nurse, physician's assistant, or nurse practitioner).			OPTION 2: LAB EVIDENCE OF IMMUNITY OR CONFIRMED CASE OF DISEASE Test results (Titer) for lab evidence must be attached to this form or, document that you have already had the disease(s). If you cannot document a confirmed case of the disease(s), then you must submit immunity results from a medical laboratory.		
Vaccination Type	1st Dose	2nd Dose	Date of Test	Result of Test	Date of Disease
Measles	mo/day/yr	mo/day/yr	mo/day/yr		
Mumps	mo/day/yr	mo/day/yr	mo/day/yr		
Rubella	mo/day/yr	mo/day/yr	mo/day/yr		

OR

MMR	mo/day/yr	mo/day/yr	mo/day/yr		

AND

Varicella (Born after 1/1/1980)	mo/day/yr	mo/day/yr	mo/day/yr		

OPTION 1 & 2: This must be completed by your physician. I hereby certify that this student has received the immunization(s) or has laboratory evidence of immunity as indicated.

_____   _____
Signature of physician or authorized person   Date

OPTION 3 & 4: Medical or Religious exemptions on the reverse side

Physician's stamp or DEA number

7/10

IMMUNIZATION WAIVERS

OPTION 3: MEDICAL EXEMPTION

Students with medical exemptions shall be permitted to attend college except in the case of a vaccine-preventable disease outbreak in the college. All susceptible students will be excluded from college based on public health officials' determination that the college is a primary site for disease exposure, transmission and spread into the community. Students excluded from college for this reason will not be able to return to school until:

1. the danger of the outbreak has passed as determined by public health officials
2. the student becomes ill with the disease and completely recovers, or
3. the student is immunized.

For example, for measles, the complete incubation period is 18 days from the onset of symptoms for the last case in the community. Outbreaks like measles may last for several months.

According to State statutes, (Connecticut General Statues Sections 19a-7f and 10-204a) no student may be admitted to school without proof of immunization or a statement of exemption. Students seeking an exemption on the basis that a given immunization is medically contraindicated should attach a statement to the form signed by their physician stating that in the physician's opinion, such immunization is medically contraindicated and why it is contraindicated (ex. hypersensitivity to a vaccine component, demonstrated reaction to vaccine etc.) In addition, the student should complete the following statement and return it to the CCC Admissions Office.

I am submitting the enclosed documentation from a physician that immunization is medically contraindicated. Therefore, I am exempt from receiving the required immunization as specified by the physician, and shall be permitted to attend college except in the case of a vaccine-preventable disease outbreak in the school.

_____   _____
Student Name   Student Signature

OPTION 4: RELIGIOUS EXEMPTION

Students with religious exemptions shall be permitted to attend college except in the case of a vaccine-preventable disease outbreak in the college. All susceptible students will be excluded from college based on public health officials' determination that the college is a primary site for disease exposure, transmission and spread into the community. Students excluded from college for this reason will not be able to return to school until:

1. the danger of the outbreak has passed as determined by public health officials
2. the student becomes ill with the disease and completely recovers, or
3. the student is immunized.

For example, for measles, the complete incubation period is 18 days from the onset of symptoms for the last case in the community. Outbreaks like measles may last for several months.

According to State statutes, (Connecticut General Statues Sections 19a-7f and 10-204a) no student may be admitted to school without proof of immunization or a statement of exemption. Students seeking an exemption on the basis that immunizations would be contrary to their religious beliefs should complete the following statement and return it to the CCC Admissions Office.

I hereby assert that immunizations would be contrary to my religious beliefs. Therefore, I am exempt from receiving the required immunization under Section 10-201a of the Connecticut General Statutes and shall be permitted to attend college except in the case of a vaccine-preventable disease outbreak in the school.

_____   _____
Student Name   Student Signature

Request for Transfer Credit Evaluation

CAPITAL
COLLEGE

Enrollment Services
950 Main Street
Hartford, CT 06103
Phone: 860-906-5123
Fax: 860-906-5119

Date: _____   Student Banner ID#: _____

Last Name: _____   First Name: _____

Maiden or Former Name (if applicable): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Work/Cell Number: _____

Email Address: _____

❖ Contact each of your previous colleges and have official transcripts sent **before** completing this form.

❖ Transfer credits are awarded to satisfy requirements of your program of study and in accordance with college policy. Please refer to the current college catalog for more information.

❖ When the evaluation is complete, you can log on to myCommNet, at http://my.commnet.edu, and view your Academic Transcript. Any transfer credit awarded by Capital will display at the top of your transcript.

❖ What is your Current Program of Study? **You must be fully accepted into your program**
   Degree Type (select one):   ◯ Associate Degree   ◯ Certificate

   Program : _____

   **Prospective allied health program applicants do not need to have an evaluation done before applying to the program. Evaluations are automatically completed once accepted into those programs.

List each of your previous colleges that will be sending transcripts:

College _____ State/Country_____

College _____ State/Country_____

College _____ State/Country_____

Updated 10/2014

SPRING 2019 TUITION & FEES
Installment Payment Plan for all Charges

| | | College | Student | | **CASH** | Installment Plan Payment | Installment Plan Payments *** On or After | | |
| IN STATE TUITION AND FEES | | Service | Activity | Transportation | **PRICE** | | **1st pmt** Jan 2, 2019 or after | **2nd pmt** 14-Feb | **3rd pmt** 7-Mar |
Credit Level	In State Tuition	Fee	Fee	Fee	**TOTAL**	Fee			
1	163.00	81.00	10.00	20.00	274.00				
2	326.00	88.00	10.00	20.00	444.00				
3	489.00	94.00	10.00	20.00	613.00				
4	652.00	99.00	10.00	20.00	781.00				
5	815.00	118.00	10.00	20.00	963.00				
6	978.00	134.00	10.00	20.00	1,142.00	25.00	481.80	342.60	342.60
7	1,141.00	152.00	10.00	20.00	1,323.00	25.00	554.20	396.90	396.90
8	1,304.00	167.00	10.00	20.00	1,501.00	25.00	625.40	450.30	450.30
9	1,467.00	185.00	10.00	20.00	1,682.00	25.00	697.80	504.60	504.60
10	1,630.00	200.00	10.00	20.00	1,860.00	25.00	769.00	558.00	558.00
11	1,793.00	218.00	10.00	20.00	2,041.00	25.00	841.40	612.30	612.30
12	1,956.00	236.00	20.00	20.00	2,232.00	25.00	917.80	669.60	669.60

| | | College | Student | | **CASH** | Installment Plan Payment | Installment Plan Payments *** On or After | | |
| OUT OF STATE TUITION AND FEES | | Service | Activity | Transportation | **PRICE** | | **1st pmt** Jan 2, 2019 or after | **2nd pmt** 14-Feb | **3rd pmt** 7-Mar |
Credit Level	Out State Tuition	Fee	Fee	Fee	**TOTAL**	Fee			
1	489.00	243.00	10.00	20.00	762.00				
2	978.00	264.00	10.00	20.00	1,272.00				
3	1,467.00	282.00	10.00	20.00	1,779.00				
4	1,956.00	297.00	10.00	20.00	2,283.00				
5	2,445.00	354.00	10.00	20.00	2,829.00				
6	2,934.00	402.00	10.00	20.00	3,366.00	25.00	1,371.40	1,009.80	1,009.80
7	3,423.00	456.00	10.00	20.00	3,909.00	25.00	1,588.60	1,172.70	1,172.70
8	3,912.00	501.00	10.00	20.00	4,443.00	25.00	1,802.20	1,332.90	1,332.90
9	4,401.00	555.00	10.00	20.00	4,986.00	25.00	2,019.40	1,495.80	1,495.80
10	4,890.00	600.00	10.00	20.00	5,520.00	25.00	2,233.00	1,656.00	1,656.00
11	5,379.00	654.00	10.00	20.00	6,063.00	25.00	2,450.20	1,818.90	1,818.90
12	5,868.00	708.00	20.00	20.00	6,616.00	25.00	2,671.40	1,984.80	1,984.80

* An additional **flat tuition charge of $100** per semester shall apply **over 17 credits**

** **FEES ONLY** for Pre-Registration Purposes, **from 10/15/2018 to 01/02/19**

Beginning August 6, 2018, students MUST either **Pay in Full, OR enter an Installment Payment Plan**

*** **Payment Plans will increase to include Mandatory Usage Fees, if applicable**

ADDITIONAL MANDATORY USAGE FEES

Program Fees:

Clinical Prgm Fee - Level 1*	$ 487.00	Per Semester - Level 1 Allied Health Program OR Nursing
Nursing Prgm-Lrnng Spprt&Assess	$ 82.00	Per Semester
(these 2 Program Fees are NON-Refundable.)		
Nursing Prgm-NCLEX Prep Prgm	$ 180.00	Last Semester of Nursing ONLY (Program Fee refundable)

Course Fees:

Supplemental Course Fee Level 1**	$ 102.50	Per course
Supplemental Course Fee Level 2**	$ 205.00	Per course
Material Fee ***	$ 51.00	Per course

(Course Fees are 100% refundable prior to the 1st day of class & 50% during the Add/Drop period.)

* Per semester; not assess Material or Supplemental Course Fee
** Per course; level determined by additional contact hours

Tuition and Fees are subject to change

Students can enroll in an Installment Payment Plan online via my.commnet.edu starting October 15th, 2018. There is a $25 non-refundable fee for participation in the plan. For general information please contact the Bursar's office 860-906-5061.

Checking Student Requirements

Students should first check to determine if there are any unsatisfied requirements that must be submitted to the college in order to determine your financial aid eligibility. This can be done by following the steps below.

1. Log into myCommNet

2. Access Banner Student Self-Service (icon)
   If you have records at multiple schools, select your current school

3. Click "Financial Aid"

4. Click "Financial Aid Status"

   Choose the current award/academic year.

5. Review all of the information on this page.

6. If you see the words "**Unsatisfied Student Requirements**" in blue, click that link.

   There you will see details of what documentation or actions are still required for your aid application to be complete.

7. Log out of myCommNet when you are finished

To inform you of your application status, we will periodically email you at your *student email address*. If there are no unsatisfied requirements listed, you may proceed to viewing your Financial Aid Award information.

Satisfactory Academic Progress

You must be meeting the financial aid Satisfactory Academic Progress requirements to receive your award. The policy is available at http://my.commnet.edu and in the College Handbook. Every semester you will receive an email advising you to check your status at http://my.commnet.edu by selecting the Financial Aid "Eligibility Requirements" menu followed by the "Academic Progress" tab.

Your Financial Aid Award

When we complete our review of your financial aid application we will notify you at your Capital Community College *student college email address* and direct you to the myCommNet student information system. By using myCommNet, you can review and adjust your Financial Aid Award, complete award requirements, and email the financial aid office with your questions and concerns.

We will assume that you want to accept any grants (free money) that you are eligible for, but there may be additional awards like work study, that you have the option to accept or decline. **Awards are based on full time enrollment. If you enroll for less than 12 credits your award will adjust according to your official enrollment status.**

Once you have been awarded Financial Aid, your award can be viewed on myCommNet by following the steps listed below.

1. Log into myCommNet

2. Access Banner Student Self-Service (icon)
   If you have records at multiple schools, select your current school

3. Click "Financial Aid"

4. Select the "Award Package" menu

   Choose the current award/academic year.

5. The "General Information" tab displays first. Review all information on this page.

6. Click the "Award Overview" tab to review your financial aid award

   Note that only aid with an "Accepted" status may eventually pay to your account

   Click the Terms and Conditions'link to review the conditions of payment of your financial aid

7. If you are a Work Study recipient, Click the "Accept Award Offer" tab

   Follow the instructions to accept/decline aid as needed. Please contact the Financial Aid Office if you have questions.

8. Log out of myCommNet when you are finished

Capital Community College

Your Guide to Financial Aid

Office of Student Financial Aid

**950 Main Street
Hartford, CT 06103
Phone: 860.906.5090
Fax: 860.906.5092
Email: CA– FinAidHelp@capitalcc.edu**

The Financial Aid Office at Capital Community College

The Financial Aid Office at Capital Community College is committed to providing financial assistance to students who lack the financial resources necessary to meet the cost of attendance. We encourage all students and their families to apply in a timely manner. It is the student's responsibility to complete the application on time. Incomplete applications will be reviewed. Students and their families should be aware that they are applying for federal, state, and college funds. **Due to the limitation of funds, please be aware that if you enroll for less than six credits you may not be eligible for any aid.** Students are also expected to be familiar with the general provisions of financial aid. To help you understand this process, Financial Aid Workshops are held throughout the year. Information on financial aid programs, regulations, and procedures are found in the College catalog. Late applications will be awarded on a funds available basis.

Applying for Financial Aid

1. Your E-mail Address

It is essential that you possess an email address in order to participate fully in the financial aid process. You will need to provide either your personal or *student college email address* when applying for your FSA ID. New students will be assigned a *student college email address* once they've been fully admitted to the college.

2. Creating a Federal Student Aid ID

It is important that you apply for a Federal Student Aid ID (FSA ID). A FSA ID gives you access to the Free Application for Federal Student Aid website and can serve as your legal signature when completing the FAFSA. **To create an FSA ID, go to the federal government's FSA ID website (https://fsaid.ed.gov).** Should you have questions or concerns regarding applying for a FSA ID, please contact the Federal Student Aid Hotline at 1(800) 433-3243.

If your parent is required to sign your FAFSA application, they may also obtain a FSA ID at the website indicated previously. Please note, parents must have access to their own personal email address in order to create an FSA ID. The student's email address cannot be used when creating a parental FSA ID.

Priority Timetable

While we accept applications all year, in order to ensure priority consideration, your results from the FAFSA and any other required documentation must be received in the Financial Aid Office at Capital Community College by:

July 1—Fall & Spring Semesters

December 1—Spring Semester Only

Late applicants are encouraged to apply.

3. FAFSA on the Web

To apply for financial aid you must complete the Free Application for Federal Student Aid (FAFSA) at https://fafsa.ed.gov

You will need:

- Your (and your spouse's, if you are married) Federal Income Tax Return from the prior year.

- Your parent(s)' Federal Income Tax Return from the prior year.

- Your Social Security card and driver's license

- Your alien registration card (if you are not a U.S. citizen)

- W2 forms or other records of income earned

- Records of untaxed income received such as child support, untaxed social security benefits, SNAP, disability, worker's compensation veterans benefits, military or clergy allowances

- Current bank statements and records of stocks, bonds, and other investments

- Business or farm records, if applicable

- **Capital's School Code: 007635**

One of the features that you will notice when completing your FAFSA application, is that students and parents will have the option of using the IRS link to transmit federal income tax data directly to the FAFSA application. The use of the **IRS Data Retrieval** feature can significantly expedite the processing of your financial aid award and may save students time by reducing the need to submit additional paperwork. We encourage all applicants to make use of this important feature.

Your Financial Aid Status

You will know when your application for Federal Student Aid has been processed by the U.S. Department of Education when you receive an email from them at the address you provided on the FAFSA (3-5 business days). This will be followed by an email sent by the Financial Aid Office to your *student college email address* confirming the college's receipt of your FAFSA results.

Now you can track your financial aid status and award information on the internet by using the CT Community College secure online portal available to you at http://my.commnet.edu. To use this system, you need to know your student Net ID number and Password. **This is different from the Federal Student Aid ID (FSA ID) and password you created when applying for financial aid.** When you were admitted to Capital Community College, you were provided with your Net ID and *student college email.* If you haven't already done so, please activate these accounts in order to proceed. If you don't remember your Net ID student number or Password, you may utilize the **Net ID Lookup** or **Reset Your Password** links on the http://my.commnet.edu login screen.

Once you have logged into the CT Community College Online Portal (http://my.commnet.edu), you will be able to check your financial aid status by clicking on the **Banner Self Service** link located under the **Access Banner Self Service** menu. This will take you directly to the Banner Self Service homepage.

Revised 2/25/2019

HOW TO APPLY FOR FINANCIAL AID/FSA ID

1. Create a Federal Student Aid ID at www.fsaid.ed.gov and complete an online application at www.fafsa.ed.gov. If you have any questions or need assistance with the application call **1-800-433-3243.**

<p align="center">Or</p>

2. **Register online** at http://www.capitalcc.edu/student-services/financial-aid/ to attend an on-campus workshop.

3. You **must bring** the following:

☐ All ⸴ income information (Federal Income Taxes, W-2's and any other pertinent income information).

☐ If you are under the age of 24, not married, not a U.S. Veteran or don't have children you will need to provide your parents information.

☐ Eligible non-citizens must bring their Permanent Resident Card.

On-Campus Workshops:

Workshops are being held in **room 218,** 2nd floor by **appointment** only:
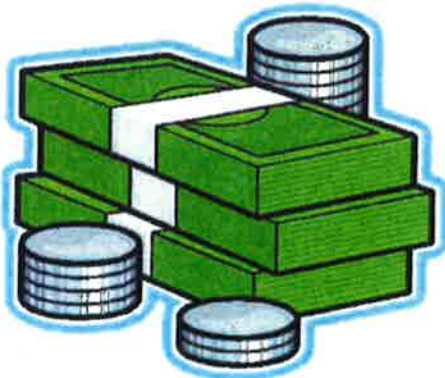
All workshops will begin promptly and you must be <u>registered</u> to attend!

FSA ID – Instructions

Contact the Federal Department of Education at **1-800-557-7394.**

FAFSA site www.fafsa.ed.gov

Page one select the following:

- Enter your (the students') FSA ID
- Create an FSA ID the system will take you to a new screen to create a log in

Page two

- **Email** – We recommend you using the college's email to avoid emails sent to Junk and Spam folders. Later during the FSA ID creation process, you will be sent a code, you **must have access** to the email provided (and remember the password).
- **Confirm your email**
- **Create an Username** - The username must be from 6 to 30 characters long. You can use any combination of numbers and / or uppercase and lowercase letters. _____
- **Create a Password (Must have: numbers, upper letters, lowercase letters, special characters, and must be between 8-30 characters).** _____
- **Confirm Password – Must be the same as above**
- **Select ● I am 13 years of age or older.**
- **Click Continue**

Page Three – Enter personal information

- **Enter your social security number**
- **Enter your date of birth MM / DD / Full year YYYY**
- **Enter: First Name, Middle Initial, and Last Name**
- **Click Continue**

Page Four – This step will link your old Pin number to your newly FSA ID

- **Enter your Social Security**
- **Date of Birth**
- **First Name, Middle Initial and Last Name**
- **In the upper right corner, write down your current PIN number.**
- **Click Verify**
- **If you forgot your pin, you can select "Forgot my PIN" this will prompt the challenge question. If answered correctly, the data will be matched.**
- **If you forgot your PIN number and the challenge question, you would have to click-Continue without PIN. The disadvantage is, you would have to wait 2-3 days for the information to be validated before you could use the FSA ID.**

Effective May 10, 2015 Federal Government introduced the FSA ID

ACCUPLACER® Placement Test

What is the ACCUPLACER Placement Test?

- ➢ computer-adaptive *(the test adjusts to how you respond to previous questions)*
- ➢ multiple-choice format, except for the WritePlacer (written essay)
- ➢ untimed *(test completion: 1-3hours on average)*
- ➢ **ENGLISH and MATH**

Why does Capital use the ACCUPLACER Placement Test?

Capital uses the ACCUPLACER® Placement Test to provide students with useful information about their academic skills in Math, Reading, and Writing. The results of this test, in conjunction with their academic background, goals, and interests, are used by academic advisors and counselors to determine a student's Math and English course selection. You cannot "pass" or "fail" the placement test, but it is very important you prepare and do your very best.

How can a student be exempt from the ACCUPLACER Placement Test?

Exemption will be granted to students if they have met **one** of the following requirements.

- ➢ Took the **SATs** or **ACTs** within the **last 3years** and have met Capital's score requirements below:

  OLD SATs (prior to March 2016): Reading/ Writing→ 450+, MATH→550+

  NEW SATs (March 2016 & future): Critical Reading→25+, MATH→570+

  ACTs: ENGLISH→22 OR ENGLISH Combined→47, MATH→18 – 21

- ➢ Attained a "C" or better in previous college credit-level English and/or Math courses.

- ➢ Matriculating student who has an Associate's degree or higher.

- ➢ Took an ACCUPLACER Placement test at a previous institution within the **last 3 years.**

*Students **must** submit appropriate documentation (college transcripts, SAT/ACT, or ACCUPLACER score reports) to the Placement Testing Center to ensure they have met requirements for test exemption.*

How can a student prepare for the test?

- Capital's Placement Testing Center webpage
- ACCUPLACER Study App
- Collegeboard ACCUPLACER Sample Questions
- YouTube videos
- Online test prep websites
- Khan Academy (MATH)

Frequently Asked Questions

1. *How can I take the Placement Test?* Please visit the Placement Testing Center's webpage to make a test appointment. Testing schedules vary by semester.

2. *Do I have to pay for the test?* No. Once you have completed Capital's enrollment process you will be given an 8-digit Banner Student ID number which will allow you to take the test.

3. *What should I bring on the day of the test?* Students are required to bring a **valid picture ID** (driver's license/permit, passport, permanent resident card, Capital Community College ID), **writing utensil** and their **8-digit BANNER Student ID Number**. High school students are allowed to test with their school ID.

4. *How soon can I receive my scores?* Immediately after testing.

5. *Can I take my English and Math tests on separate days?* **ABSOLUTELY!** You are highly encouraged to schedule your tests on separate days to decrease testing exhaustion and anxiety.

6. *I used to get help in high school with tests and I have an IEP due to my disability. Will I receive the same accommodations/academic adjustments for the Placement test?*

   If you have a documented disability and require academic adjustments, please contact: Helena Carrasquillo (Disabilities Coordinator) at (860) 906-5204 or hcarrasquillo@capitalcc.edu.

   To obtain adjustments, you must schedule an appointment with Helena and provide documentation which describes your disability and supports your need to receive adjustments. This should be done **2 weeks** prior to your test appointment. Academic adjustments for testing will only be provided to students who have completed this process.

7. *What happens if I do not do well in the test?* You cannot "pass" or "fail" the Placement Test. If you do not place into English or Math courses you will be required to complete an intensive tutoring program through the Center for Academic Transitions. Once you have completed tutoring, you will be granted the opportunity to retake the test.

Roxanne Plummer
Coordinator/ Placement Testing Specialist
Room 220, Second Floor
rplummer@capitalcc.edu
860-906-5089
http://www.capitalcc.edu/student-services/placement-testing/

ACCUPLACER® Placement Test

Testing Tips

✓ **REVIEW, REVIEW, REVIEW!!**

  o *Please visit the Placement Testing Center's webpage to review testing material and prepare for the test.*

✓ Give yourself enough time to take the test. Schedule the test on a day when you will not be rushed.

✓ If you do not like sitting for a long time, please schedule your English and Math tests on separate days to decrease test anxiety and fatigue.

✓ Review Test Center policies before coming to test so you are aware of testing protocols.

✓ Please ensure you are well rested and have eaten a balanced meal.

✓ **ARRIVE EARLY** and walk with a **Photo ID, Capital BANNER Student ID Number** and a **writing utensil.**

✓ **Take a deep breath. RELAX!**

✓ **Read instructions and questions carefully.**

✓ **Take your time.**

Welcome and Advising Center
Steps To Becoming A Capital Student
Inquire - Apply - Succeed

CAPITAL Community COLLEGE

You Are Here

Welcome and Advising
Receive and Review Welcome Packet (i.e., college application, new student checklist); Complete Application

Admissions
Submit Completed Application (with $20 Fee, Immunization Records, HS Diploma, Transcript, etc.)
Visit www.capitalcc.edu/congratulations for Acceptance and Enrollment Steps

Financial Aid
Apply for Financial Aid at www.fafsa.ed.gov College Code: 007635
Check College Email for Updates Go to myCommNet to check award information

Placement Testing
Register for Placement Test under Student Services on www.capitalcc.edu

New Student Registration Session
Sign up to Register for Courses with an Advisor by clicking Placement Testing under Student Services

Counseling Services
Meet with a Counselor to discuss academic, personal, and social needs

New Student Orientation
Attendance is required of all New Students; Meet Faculty/Staff; Learn about the College and College Resources

Contact Us!

Address: 950 Main Street, 2nd Floor Hartford, CT 06103

Email: CA-WelcomeCenter@capitalcc.edu

Phone: (860) 906-5077

College Website: www.capitalcc.edu

Office Hours:

Monday, Wednesday, Thursday
8:30 a.m. - 5:00 p.m.

Tuesday
8:30 a.m. - 6:00 p.m.
(Spring and Fall Semesters Only)

Friday - 8:30 a.m. - 4:00 p.m.

(Degrees and Certificates listed on back)

Map & Directions

Capital Community College is conveniently located near the intersection of Routes 91 and 84. Parking is available for students, guests, and visitors at the **Morgan Street Garage**.

Parking for Capital Students, guests and visitors – Morgan Street Parking Garage
Parking is available in the Morgan Street Garage, located at 155 Morgan Street, directly behind the college (the building with green glass windows). Handicap-access is available. Parking validation for guests and visitors is available at the College's main lobby desk.

> **From Interstate 91 North or South**
> Take Exit 32-B (Trumbull Street). At bottom of ramp, turn left onto Market Street. Take third left onto Talcott Street then first left into Garage entrance.
>
> **From Interstate 84 East (from West Harford, Farmington, etc.)**
> Take Exit 50 (Main Street). At third traffic light, turn right onto Market Street. Take first left onto Talcott Street then first left into Garage entrance.
>
> **From Interstate 84 West (from E. Hartford, Manchester, Route 2)**
> Take Exit 50 (Main Street). At bottom of ramp, turn left onto Market Street. Take second left onto Talcott Street, then first left into Garage entrance.

To Enter the College
The entrance to Capital is located diagonally across the intersection of Market and Talcott Streets. Please use the pedestrian signal lights to cross this intersection!

Go through the revolving door and take the escalator two flights up to the Main Street level. Walk through the mall to Capital's Main lobby. From there, you can take the elevator to your destination.

PLEASE STOP AT THE RECEPTIONIST DESK IN THE MAIN LOBBY OF THE COLLEGE TO OBTAIN A VISITOR'S ID BADGE, AS WELL AS PARKING VALIDATION BEFORE YOU PROCEED TO YOUR MEETING OR VISIT.