

Additional Site Application Format

A written request for certification (DHS 1647) as a NATCEP must be included with your typed application.

The following format from Section I to Section V MUST be followed. If any requested information is missing or out of order from the outline, the application will be returned with a list of missing elements.

This is *not a form* itself. This is *an outline* to be followed and used when developing and submitting the application.

SECTION I

- Name of the NATCEP.
- Address where the classroom training will be held (Street address, city, and island).
- Address(es) where the supervised practical training will be held. (If location is a facility, provide the name of the facility).
- Telephone number.
- Fax number (optional).
- Email address.
- Name of the primary Registered Nurse (RN) instructor.
- Hawaii State License number for the primary RN instructor.
- RN instructor's years of nursing *and* long-term care (LTC) facility experience. It **MUST** include at least one (1) year in a LTC facility as a RN. It must state completion of a course in teaching adults, experience in teaching adults or supervising nurse aides.
- Office and/or cellular telephone numbers.
- Name(s) of supplemental instructors and associated credentials (i.e., RN, LPN, PT, OT, etc.).
- Hawaii State License number for each supplemental instructor.
- Years of experience for each supplemental instructor in their respective fields.
- Describe how the supplemental instructor will be supervised by the primary instructor(s).

SECTION II

Brief description of the NATCEP:

- If NATCEP is facility-based
- Estimate the number of graduates; and
- Number of trainees per class cycle

SECTION III

Curriculum details of classroom activities AND supervised practical training instruction.

Make a statement about your current curriculum and that it will be utilized as currently approved.

If any curriculum changes will be made to current curriculum the applicant must submit an entire curriculum format. This abbreviated format cannot be used.

SECTION IV

Assessment of trainee's performance in classroom instruction and supervised practical training.

Make a statement that the additional site will utilize current assessment methods. If the site will not be using current assessment methods this abbreviated format cannot be used.

SECTION V

Instructional materials that will be used/given to trainees:

Make a statement that the additional site will utilize current instructional materials already approved. If the site will not be using current materials this abbreviated format cannot be used.

The NATCEP applicant will submit their application format, DHS 1647, instructor(s) resume, and signed laboratory supply form to Community Ties of America (CTA) using one of the following methods:

Fax: 808-234-5470

Email: t.vanhouten@comties.com

Mail:

Community Ties of America, Inc.
500 Ala Moana Blvd, Suite 7400
Honolulu, HI 96813