



8647 Mathis Avenue Suite 202  
 Manassas, VA 20110  
 Phone: 571-222-6600 Fax:571-222-6601  
 info@excelhealthinstitute.com  
 www.excelhealthinstitute.com

## Nurse Aide Refresher Admission Application

Admission Requirements:			
1. Completed application form 2. A copy of Nurse Aide certificate of completion 3. Applicants must be at least 18 years old	4. Administration fee plus deposit		
Student Full Legal Name			
<i>Last</i>	<i>First</i>	<i>Middle</i>	
Street Address			Apt #
City	State	Zip	
Home Phone:		Cell Phone:	
Email:			
How would you prefer announcements sent to you? <i>Cell</i> <i>H Phone</i> <i>email</i> (circle one)			
Date of Birth:    /    /	Social Security Number:		Gender: <u>  </u> M <u>  </u> F

Education	
Highest Level: <input type="checkbox"/> Middle School    / <input type="checkbox"/> High School    / <input type="checkbox"/> GED    / <input type="checkbox"/> College/University	
Name of School:	Date completed:

Name of Nurse Aide School Attended:	Date completed :
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Current Employer

Emergency Contact Information	
Name:	Relationship
Address:	
Phone:	

Please indicate which class schedule you are registering for:
<input type="checkbox"/> Weekday Program <input type="checkbox"/> Weekend Program

**\* The above information is true to best of my knowledge and I understand falsification of information can result in termination from the Nurse Aide refresher course. No certificate will be issued upon completion of this nurse aide refresher course because it does not meet the full 120 hour nurse aide program.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Mail the completed application form with administration fee and deposit to:  
 Excel Health Institute LLC  
 8647 Mathis Avenue Ste. 202  
 Manassas VA 20110  
 Make Check and Money Order payable to: Excel Health Institute LLC.

\*Administration Fee is NON REFUNDABLE.\*  
 You will be notified if there is a change in your program start date due to poor enrollment or other reasons. Your enrollment will default to the new schedule unless you apply for withdrawal and refund from the program.