

TABLE OF CONTENTS

GENERAL INFORMATION

Mission Statement	Page	1
Academic Policy Statement	Page	2
Appeals Process	Page	3
A) Dismissal from Class		
B) Withdrawal from a Class		
C) Absences and Tardiness		
D) Course Cancellation		
E) Class dates and times		
Accreditation and/or Licensure Statement.....	Page	4
Admission Requirements.....		
(See individual course of instruction)		
Grading Methodology	Page	6
Evaluating Criteria	Page	7
A) Certificate of Completion		
B) Transcript		
C) Negligent Behavior		
Certificate or Credit Transferability Statement.....	Page	8
Dress Code	Page	9
A) Classroom		
B) Clinical Site		
Disclosures Table/Student Success Data (Consumer Information).....	Page	10

COURSES OF INSTRUCTION

Basic Nurse Assistants (CNA)	Page	13
• Criminal Background/Physical Exam		
• Admission Requirements		
• Syllabus		
• Course Description		
• Course Objectives		
• Tuition		
• Textbook		
• Course Outline		
• Unit Hours		
• Class Calendar		
Clinical Laboratory Assistants/Phlebotomist	Page	14
• Criminal Background/Physical Exam		
• Admission Requirements		



- Syllabus
- Course Textbook
- Course Description
- Course Objectives
- Tuition
- Course Outline
- Unit Breakdown
- Class Calendar

Computer Technology (for Healthcare).....Page 15

- Admission Requirements
- Syllabus
- Course Description
- Course Objectives
- Tuition
- Textbooks
- Course Outline
- Unit Breakdown

Dialysis TechnicianPage 16

- Admission Requirements
- Syllabus
- Course Description
- Course Objectives
- Tuition
- Textbook
- Course Outline
- Unit Breakdown
- Class Calendar

Electrocardiogram Technician (EKG)Page 17

- Admission Requirements
- Syllabus
- Course Description
- Course Objectives
- Tuition
- Textbook
- Course Outline
- Unit Breakdown
- Class Calendar

Medical Billing and Coding SpecialistPage 18

- Admission Requirements
- Syllabus
- Course Description
- Course Objectives
- Tuition
- Textbook
- Course Outline
- Unit Breakdown
- Class Calendar

Medical Clinical AssistantPage 19

- Program Description
- Admission Requirements
- Syllabus



- Course Description
- Course Objectives
- Tuition
- Unit Breakdown
- Modules A-H
- Textbooks
- Course Outlines

Mental Health Worker/Psychiatric AidePage 20

- Criminal Background
- Physical Exam
- Admission Requirements
- Syllabus
- Course Description
- Course Objectives
- Tuition
- Textbook
- Course Outline
- Unit Breakdown
- Class Calendar

Pharmacy TechnicianPage 21

- Admission Requirements
- Syllabus
- Course Objectives
- Course Description
- Tuition
- Textbook
- Course Outline
- Unit Breakdown
- Class Calendar

Phlebotomy Technician.....Page 22

- Admission Requirements
- Syllabus
- Course Description
- Course Objectives
- Tuition
- Textbook
- Course Outline
- Class Calendar
- Unit Breakdown

Physical Therapy Aide.....Page 23

- Admission Requirements
- Syllabus
- Course Description
- Course Objectives
- Unit Breakdown
- Tuition
- Textbook
- Course Outline



APPENDIX

Statements of Understanding	1, 2, 3
Physical Risk Statement	4
Student Withdrawal Form	5
Student Complaint Policy	6
Student Complaint Form.....	7
Refund Policy/Examples.....	8-22
Student Permanent Record.....	23
Advance Standing.....	24
“In Residence”.....	25
Incomplete Grade “I”.....	26
Policy on Job Placement	27
Services Offered At ELIM.....	28
Family Education Rights and Privacy Act.....	29
Disclosure to Parents of Dependant Students/Consent Form.....	30
Course Application Form.....	available at ELIM office
Enrollment Agreement Form	available at ELIM office
Contact Person for Information.....	available at ELIM office

ELIM Outreach Training Center
1820 RIDGE ROAD SUITE 300-301
HOMEWOOD, ILLINOIS 60430
P: 708-922-9547 F: 708 922-9568
Website: elimotc.com
E-mail elim1820@comcast.net



ELIM Outreach Training Center, Inc.

MISSION STATEMENT

The mission statement of ELIM is to enlist ambitious students teaching as well as instructing them to competently provide healthcare services with knowledge, expertise, and compassion.

The ELIM program will prepare students to graduate with a working knowledge and proficiency to successfully pass the State of Illinois competency exams as well as all appropriate professional affiliation exams.

The ELIM graduate will facilitate practical and trustworthy partnerships with the patient and his or her family, other health care professionals and social services in an environment conducive to the patient's comfort and well being.



Academic Policy Statements

ATTENDANCE

Class attendance is required for all classes. Instructors will be following the two/three day absence rule of attendance. It is understood that emergencies can come up that might require the student to be out of class, but follow up with your instructor. Students are required to complete all assignments missed during absences.

EXAMINATIONS

Any test, quiz, reports, *midterm*, or final exam that needs to be made up **WILL** be reduced by one letter grade. Make-up examine(s) will be given only with the proper documents. Please make an effort to show up on exams days.

STANDARD OF CONDUCT

Talking in the classroom during class time will **NOT** be tolerated. Once the instructor has asked you to cease your conversation and you do not, the Instructor has the right to ask you to **LEAVE** the classroom. Please be advised, that you **CAN** be suspended from school and brought up on disciplinary charges which will include going before a board of directors.

CELL PHONE

When entering the classroom, please **TURN OFF YOUR CELL PHONE** and immediately **PUT IT OUT OF SIGHT**. If you feel that you must take a call, please step out in the hall and make your call. Also, if you have to receive call during class time, you may give out the office number (708-922-9547)

CHEATING ON EXAMINATIONS

If the instructor determines that a student is cheating or attempting to cheat on any examination, the student will receive a grade of “F” for that examination and possibly for the course.

CLINICAL POLICY

Students must participate in all clinical activities assigned. Students must be in full uniform as outline in their handbook. If a student violates clinical procedures they will be dismissed from the program: Please see your student handbook.

¹ The term “cheating” includes, but not limited to, the following: 1. using any notes, books, and /or any other material and /or devices(cell phones) other than those material allowed by the instructor, during a closed book examination; 2 .looking at another student’s examination; 3. taking material and /or study aids from the instructor without the instructor’s permission; and 4. obtaining any information about an examination before taking or making up the examination. The term “examination” included all quizzes, daily exams, the midterm examination and the final examination.



APPEAL

When a student is dismissed, he or she can appeal this action by submitting a letter for reconsideration of the dismissal within 24 hours or the end of the next business day to the Program Director's office. ELIM's instructors will investigate and convene for a final disposition within a timely manner. We will advise the student within this period. In the event the dismissal is upheld there is no refund due to the student.

WITHDRAWAL

Withdrawing from the school may have both academic and financial consequences. You are encouraged to understand the consequences before you decide to withdraw. If you decide to withdraw, you must follow the established withdrawal procedures for the school:

A student may withdrawal (drop) a course by submitting a withdrawal notification to ELIM. The notification form must contain an effective date. Authorize withdrawal by a student must be done in writing to the admission office at 1820 Ridge Rd, Suite 300, Homewood, Illinois 60430.

(form located in your handbook or the office)

GRIEVANCE PROCEDURE

The grievance procedure is to improve the school's ability to support students with the solving of problem while maintaining autonomy, privacy, and liability.

Students who obtain failing grades because of nonattendance are requires to submit medical evidence documenting their inability to finish the course.

If a grade or evaluation disagreement occurs, students should discuss with their instructor how the grade or evaluation was established.

ABSENTEESIM AND TARDINESS

Excessive absenteeism and tardiness are not acceptable at ELIM. Students are allowed two (2) classroom absences, however, the student must make-up missed work on their own. When the student accumulates more than two (2) absences, he or she must see their instructor immediately.

When the student arrives to class after their schedule time, they are considered tardy. Three (3) episode of tardiness is equivalent to one (1) absence.

If the student leave class before it is dismissed, it is counted as ½ day absence.

Promptness and good attendance are critical indicators that are received by prospective employers. A student's ability to obtain and retain a position in a health care or work setting is often based on these behaviors.

Please note, if the class is longer than 11 weeks , you are allowed three (3) classroom absences.

CLINICAL ABSENTEEISM

There are no excused absences from the clinical portion of the program. If the student finds it necessary to miss a schedule clinical, a make up clinical may take place with the next enrolling class. The student will receive an "I" grade until the clinical is completed.

COURSE CANCELLATION

Elim cannot guarantee that a course selected will be available. We reserve the right to cancel or reschedule a course if there are insufficient enrollments.

CLASS TIME

Class times are subject to change without notice

ACCREDITATION and/or LICENSURE STATEMENT

ELIM Outreach Training Center has approved programs to operate by:

1. Illinois Board of Higher Education (IBHE) - Division of Private Business and Vocational School
2. Illinois Department of Public Health (IDPH)

ELIM Outreach Training Center is offering certification exams to students from the following facilities:

1. National Phlebotomy Association (NPA)
2. National Healthcare Association (NHA)
3. National Center for Competency Testing (NCCT)

Please note:

ELIM Outreach Training Center is not accredited by an accrediting body recognized by the U.S. Department of Education.



ELIM OUTREACH TRAINING CENTER

1820 Ridge Road Suite 300-301
Homewood, Illinois 60430
Ph. 708-922-9547 Fax: 708-922-9568
E-Mail: elim1820@comcast.net
Website: <http://www.elimotc.com>



GRADING METHODOLOGY

A=	93-100 PERCENT
B=	86-92 PERCENT
C=	80-85 PERCENT

Students have the responsibility to keep both the academic and professional veracity of the school and to meet the maximum standard of academic and proficient behavior.

Students must maintain an 80% average on all exams to remain in good standing. Also, grades below 80% represent unsatisfactory progress, and you must see your instructor immediately.

Students will receive progress reports from their daily exams, mid-term exam, final exams, and clinical performances.

Also, students must pass the above exams with an 80% or better. If the student receives a failing grade he/she must see their instructor immediately. One exam will be dropped at the end of course.

ABSENTEEISM:

Students are allowed two (2) absences. In the event of excused absenteeism, make up exams may be granted by the discretion of your instructor. Please be advised that only ONE make-up will be granted for the entire course. Final approval will be issued by Mrs. Triplett.

Excused absenteeism may include but is not limited to the following: hospitalization, illness needing medical care, or death in the family. To obtain excused absence, ELIM must be notified before the day of the absence.

Please see "ACADEMIC POLICY STATEMENT"

ELIM EVALUATING CRITERIA

Following the guidelines pursuant to the course syllabus and schedule, respectively, students are required to demonstrate mastery in the program competencies. The curriculum design and lessons are developed to train students to master the course competencies. Students are evaluated through testing and the outcome of their clinical performance.

A CERTIFICATE OF COMPLETION WILL BE ISSUED UPON SUCCESSFUL COMPLETION OF COURSEWORK. DIPLOMAS ARE NOT ISSUED. A CERTIFICATE OF COMPLETION WILL BE ISSUED UPON GRADUATION.

TRANSCRIPTS ARE AVAILABLE UPON REQUESTS AS PROOF OF INDIVIDUAL COURSE COMPLETION. THE FIRST TRANSCRIPT IS FREE. THEREAFTER, THE COST IS \$5.00 MAKE CHECK OR MONEY ORDER PAYABLE TO ELIM. PLEASE ALLOW 3 WORKING DAYS FROM THE DATE OF RECEIPT OF PAYMENT.

NEGLIGENT BEHAVIOR

Any student considered negligent in their performance, shall provide cause for immediate dismissal from the program by the recommendation of the Director and or the instructor.

Negligent or insubordination during clinical /classroom, include, but not limit to the following:

1. Exhibits an inability to transfer theory to practice
 2. Exhibits an inability to follow simple directions including completing tasks assigned
 3. Failure to report important information to responsible clinician in a timely manner
 4. The use of inappropriate language in the classroom or clinical setting
 5. Demonstrate an unwillingness or inability to function as a team member as well as a patient care team member in a hospital, skill facility or other medical settings
 6. Demonstrate an reluctance to accept formal or informal assessment and or correction by supervision and is argumentative (clinical/classroom instructors)
 7. Is negligent or makes careless mistakes
 8. Demonstrate little or no regards for patient safety and privacy
 9. Display a negative or unprofessional attitude in the classroom, hospital, or clinical setting
 10. Incapable or unwilling to acknowledge and follow appropriate protocol in class or other facilities. This includes following guidelines or methods used by the clinical site, respecting the chain of command and directing concerns to the immediate supervisor /instructors in a timely manner.
 11. Cheating will not be tolerated and is grounds for dismissal from the program
 12. Make-up clinicals are assigned by Mrs. Triplett and your instructors only. Do not attempt to make up a clinical on your own. You will be dismissed from that clinical.
 13. Possession, consumption, or under the influence of alcoholic beverages or illegal drugs on school or clinical settings
 14. The accepting of gratuity from patients
 15. Giving or furnishing false information to school officials
 16. Breach of confidentiality
 17. Please see "ACADEMIS POLICY STATEMENT"
- CELL PHONES ARE NOT PERMITTED IN THE CLASSROOM OR CLINICAL SETTING;
VIOLATION OF THIS POLICY IS GROUNDS FOR IMMEDIATE DISMISSAL FROM THE PROGRAM

CERTIFICATE OR CREDIT TRANSFERABILITY STATEMENT

ELIM Outreach Training Center does not offer credit hours for its courses of instructions. ELIM's programs operate on clock hours. Therefore, we cannot guarantee transferability of clock hours or certificates of completion to another institution. We highly recommend that you contact other institutions and find out their policies on transferability of clock hours and certificates of completion from other institutions.

Also, ELIM Outreach Training Center does not guarantee the transferability of credit to another school, college, or university.

Credits or course work is not likely to transfer. Any decision on the comparability, appropriateness, and applicability of credits and whether credits should be accepted is the decision of the receiving institution.

DRESS/PERSONAL APPEARANCE FOR CLINICAL AND CLASSROOM

- | | | |
|-----|-------------------------|---|
| 1. | Uniform | White scrub top and bottom, properly fitted
(color may be decided by the instructor) |
| 2. | Shoes | White professional shoe with non-skid sole, closed toe
required (white athletic shoe with white laces are
acceptable) |
| 3. | Hosiery | White hosiery or white socks |
| 4. | ID Badge | Visibly displayed on uniform at all times
(first badge is free, thereafter the cost is \$2.50) |
| 5. | Hair | Neatly combed and off the collar (male student's
mustache and beard must be neatly trimmed) |
| 6. | Jewelry | One (1) plain ring and one (1) pair of earrings are
acceptable in the clinical setting, and one necklace
is allowed. ABSOUTELY NO FACIAL, AND TONGUE RINGS
PERMITTED IN THE CLINICAL SETTING |
| 7. | Make-up | No excessive make-up and no perfume allowed. The
(elderly residents/patients are sensitive to smells) |
| 8. | Nails | Trim to a reasonable length (filed to finger tips),
clear nail polish only. NO SCULPTURE NAILS ARE
PERMITTED IN THE CLINICAL SETTINGS OR MOCK CLINICALS |
| 9. | Tattoos | Must be covered, if possible |
| 10. | Personal Hygiene | Good personal hygiene is as important as a clean uniform |

Failure to comply with ELIM's dress codes, including consideration for the **clinical site, will negatively affect clinical grades and possibly disrupt continued participation in the program. In the classroom students will wear a scrub uniform(color per instructor) If you arrive to the clinical site or to class improperly dressed you will be sent home and you will have to make up the class assignment on your time, Clinical will have to be made up with the next incoming class, if there is space available.**

Institutional Disclosures Reporting Table
Reporting Period: July 1, 2013 - June 30, 2014

Click here to
return to the
Table of
Contents



INSTITUTION NAME:
ELIM OUTREACH TRAINING CENTER

Indicate all ways the disclosure information is distributed or made available to students at this institution:
X Attached to Enrollment Agreement
X Provided in Current Academic Catalog
X Reported on School Website
Other:

Per Section 1095.200 of 23 Ill. Adm. Code 1095:

The following information must be submitted to the Board annually; failure to do so is grounds for immediate revocation of the permit of approval.

DISCLOSURE REPORTING CATEGORY		Basic Nurse Administration	Clinical Laboratory Assistant / Phlebotomy	Computer Technology	Dialysis Technician	EKG Technician
A) For each program of study, report:						
1) The number of students who were admitted in the program or course of instruction* as of July 1 of this reporting period.		104	0	0	59	7
2) The number of additional students who were admitted in the program or course of instruction during the next 12 months and classified in one of the following categories:						
	a) New starts	58			32	10
	b) Re-enrollments	5			1	1
	c) Transfers into the program from other programs at the school	0			0	0
3) The total number of students admitted in the program or course of instruction during the 12-month reporting period (the number of students reported under subsection A1 plus the total number of students reported under subsection A2).		167			92	18
4) The number of students enrolled in the program or course of instruction during the 12-month reporting period who:						
	a) Transferred out of the program or course and into another program or course at the school	0			0	0
	b) Completed or graduated from a program or course of instruction	89			50	6
	c) Withdrew from the school	15			9	1
	d) Are still enrolled	32			15	5
5) The number of students enrolled in the program or course of instruction who were:						
	a) Placed in their field of study	10			8	0
	b) Placed in a related field				5	
	c) Placed out of the field					
	d) Not available for placement due to personal reasons					
	e) Not employed					
B1) The number of students who took a State licensing examination or professional certification examination, if any, during the reporting period.						
		90			0	7
B2) The number of students who took and passed a State licensing examination or professional certification examination, if any, during the reporting period.						
		79			0	7
C) The number of graduates who obtained employment in the field who did not use the school's placement assistance during the reporting period; such information may be compiled by reasonable efforts of the school to contact graduates by written correspondence.						
		24			20	2
D) The average starting salary for all school graduates employed during the reporting period; this information may be compiled by reasonable efforts of the school to contact graduates by written correspondence.						
		\$10.75			\$13.50	\$12.00

*A course of instruction is a standalone course that meets for an extended period of time and provides instruction that may or may not be related to a program of study, but is either not part of the sequence or can be taken independent of the full sequence as a stand-alone option. A Course of Instruction may directly prepare students for a certificate or other completion credential or it can stand alone as an optional preparation or, in the case of students requiring catch-up work, a prerequisite for a program. A stand-alone course might lead to a credential to be used toward preparing individuals for a trade, occupation, vocation, profession; or it might improve, enhance or add to skills and abilities related to occupational/career opportunities.

Note: As indicated in the PBVS Administrative Rules, Section 1095.200, student retention and graduation rates must be maintained that are appropriate to standards in the field. Furthermore, a State licensing examination or professional certification examination passage rate of at least 50% of the average passage rate for schools within the industry for any State licensing examination or professional certification examination must be maintained.

} In the event that the school fails to meet the minimum standards, that school shall be placed on probation.
} If that school's passage rate in its next reporting period does not exceed 50% of the average passage rate of that class of schools as a whole, then the Board shall revoke the school's approval for that program to operate in this State. Such revocation also shall be grounds for reviewing the approval to operate as an institution.

Institutional Disclosures Reporting Table
Reporting Period: July 1, 2013 - June 30, 2014

Click here to
return to the
Table of
Contents



INSTITUTION NAME:
ELIM OUTREACH TRAINING CENTER

Indicate all ways the disclosure information is distributed or made available to students at this institution:

X Attached to Enrollment Agreement

X Provided in Current Academic Catalog

X Reported on School Website

Other: _____

Per Section 1095.200 of 23 Ill. Adm. Code 1095:

The following information must be submitted to the Board annually; failure to do so is grounds for immediate revocation of the permit of approval.

DISCLOSURE REPORTING CATEGORY		Medical Billing & Coding	Medical Clinical Assistant	Mental Health Worker	Pharmacy Technician	Phlebotomy Technician
A) For each program of study, report:						
1) The number of students who were admitted in the program or course of instruction* as of July 1 of this reporting period.		9	0	4	32	36
2) The number of additional students who were admitted in the program or course of instruction during the next 12 months and classified in one of the following categories:						
	a) New starts	4	0	0	16	44
	b) Re-enrollments	0	0	0	0	0
	c) Transfers into the program from other programs at the school	0	0	0	0	0
3) The total number of students admitted in the program or course of instruction during the 12-month reporting period (the number of students reported under subsection A1 plus the total number of students reported under subsection A2).		13		4	48	80
4) The number of students enrolled in the program or course of instruction during the 12-month reporting period who:						
	a) Transferred out of the program or course and into another program or course at the school	0	0	0	0	0
	b) Completed or graduated from a program or course of instruction	7		4	3	3
	c) Withdrew from the school	2	0	0	2	6
	d) Are still enrolled	2	0	0	0	27
5) The number of students enrolled in the program or course of instruction who were:						
	a) Placed in their field of study	0	0	0	5	0
	b) Placed in a related field	0	0	3	0	2
	c) Placed out of the field	0	0	0	0	0
	d) Not available for placement due to personal reasons	3	0	0	0	0
	e) Not employed					
B1) The number of students who took a State licensing examination or professional certification examination, if any, during the reporting period.						
		6	0	0	5	30
B2) The number of students who took and passed a State licensing examination or professional certification examination, if any, during the reporting period.						
		6			5	29
C) The number of graduates who obtained employment in the field who did not use the school's placement assistance during the reporting period; such information may be compiled by reasonable efforts of the school to contact graduates by written correspondence.						
		2		10	4	2
D) The average starting salary for all school graduates employed during the reporting period; this information may be compiled by reasonable efforts of the school to contact graduates by written correspondence.						
		\$17.50		\$11.00	\$12.50	\$13.75

*A course of instruction is a standalone course that meets for an extended period of time and provides instruction that may or may not be related to a program of study, but is either not part of the sequence or can be taken independent of the full sequence as a stand-alone option. A Course of Instruction may directly prepare students for a certificate or other completion credential or it can stand alone as an optional preparation or, in the case of students requiring catch-up work, a prerequisite for a program. A stand-alone course might lead to a credential to be used toward preparing individuals for a trade, occupation, vocation, profession; or it might improve, enhance or add to skills and abilities related to occupational/career opportunities.

Note: As indicated in the PBVS Administrative Rules, Section 1095.200, student retention and graduation rates must be maintained that are appropriate to standards in the field. Furthermore, a State licensing examination or professional certification examination passage rate of at least 50% of the average passage rate for schools within the industry for any State licensing examination or professional certification examination must be maintained.

} In the event that the school fails to meet the minimum standards, that school shall be placed on probation.
} If that school's passage rate in its next reporting period does not exceed 50% of the average passage rate of that class of schools as a whole, then the Board shall revoke the school's approval for that program to operate in this State. Such revocation also shall be grounds for reviewing the approval to operate as an institution.

Institutional Disclosures Reporting Table
Reporting Period: July 1, 2013 - June 30, 2014

Click here to
return to the
Table of
Contents



INSTITUTION NAME:
ELIM OUTREACH TRAINING CENTER

Indicate all ways the disclosure information is distributed or made available to students at this institution:

X Attached to Enrollment Agreement
X Provided in Current Academic Catalog
X Reported on School Website
Other:

Per Section 1095.200 of 23 Ill. Adm. Code 1095:

The following information must be submitted to the Board annually; failure to do so is grounds for immediate revocation of the permit of approval.

DISCLOSURE REPORTING CATEGORY		Physical Therapy Aide.				
A) For each program of study, report:						
1) The number of students who were admitted in the program or course of instruction* as of July 1 of this reporting period.		0				
2) The number of additional students who were admitted in the program or course of instruction during the next 12 months and classified in one of the following categories:						
	a) New starts	4				
	b) Re-enrollments	0				
	c) Transfers into the program from other programs at the school	0				
3) The total number of students admitted in the program or course of instruction during the 12-month reporting period (the number of students reported under subsection A1 plus the total number of students reported under subsection A2).		4				
4) The number of students enrolled in the program or course of instruction during the 12-month reporting period who:						
	a) Transferred out of the program or course and into another program or course at the school	0	0	0	0	0
	b) Completed or graduated from a program or course of instruction	0				
	c) Withdrew from the school	0				
	d) Are still enrolled	4				
5) The number of students enrolled in the program or course of instruction who were:						
	a) Placed in their field of study	0				
	b) Placed in a related field	0				
	c) Placed out of the field	0				
	d) Not available for placement due to personal reasons	0				
	e) Not employed					
B1) The number of students who took a State licensing examination or professional certification examination, if any, during the reporting period.		0				
B2) The number of students who took and passed a State licensing examination or professional certification examination, if any, during the reporting period.		0				
C) The number of graduates who obtained employment in the field who did not use the school's placement assistance during the reporting period; such information may be compiled by reasonable efforts of the school to contact graduates by written correspondence.		2				
D) The average starting salary for all school graduates employed during the reporting period; this information may be compiled by reasonable efforts of the school to contact graduates by written correspondence.		\$11.75				

*A course of instruction is a standalone course that meets for an extended period of time and provides instruction that may or may not be related to a program of study, but is either not part of the sequence or can be taken independent of the full sequence as a stand-alone option. A Course of Instruction may directly prepare students for a certificate or other completion credential or it can stand alone as an optional preparation or, in the case of students requiring catch-up work, a prerequisite for a program. A stand-alone course might lead to a credential to be used toward preparing individuals for a trade, occupation, vocation, profession; or it might improve, enhance or add to skills and abilities related to occupational/career opportunities.

Note: As indicated in the PBVS Administrative Rules, Section 1095.200, student retention and graduation rates must be maintained that are appropriate to standards in the field. Furthermore, a State licensing examination or professional certification examination passage rate of at least 50% of the average passage rate for schools within the industry for any State licensing examination or professional certification examination must be maintained.

} In the event that the school fails to meet the minimum standards, that school shall be placed on probation.
} If that school's passage rate in its next reporting period does not exceed 50% of the average passage rate of that class of schools as a whole, then the Board shall revoke the school's approval for that program to operate in this State. Such revocation also shall be grounds for reviewing the approval to operate as an institution.



STATEMENT OF UNDERSTANDING

I understand that the use of universal precautions is essential to protect myself, my significant other, my family members, patients/clients, and other health care workers from communicable disease. By participating in care giving activities, I understand that I may be exposed to communicable diseases, including Hepatitis B (HBV), Tuberculosis (TB), and Human Immunodeficiency Syndrome (AIDS). I also understand there is no known cure for AIDS at this time.

It is understood testing, diagnosis and treatment of any communicable diseases, including those that I may contract while acting as a caregiver in my clinical/classroom experiences, will be paid at my own expense. ELIM recommends that I obtain a HBV vaccine prior to beginning my clinical/classroom experience. If I refuse to be immunized, I agree to sign a statement* documenting my refusal and releasing ELIM OUTREACH TRAINING CENTER, INC. and affiliated facilities from all liability.

Signature of Student

Date

Printed Name

Social Security # (last 4 numbers)

*Please see your instructor for the form.



STATEMENT OF UNDERSTANDING

ELIM has provided me with their Student Handbook which outlines their policies and procedures. Information in the student handbook has been explain to me on _____ by _____. I agree to follow all policies and procedures stated in the Student Handbook. I understand that if I fail to follow stated policies and procedures, I can be terminated immediately from the program.

Date Handbook given

Instructor's Name

Student Signature

Date



STATEMENT OF UNDERSTANDING

ELIM Outreach Training Center, Inc. students must read and sign their acknowledgment of the following statement:

By accepting enrollment in ELIM Outreach Training Center, Inc., I agree to cautiously cease from discussing any patient's situation or personal affairs with anyone outside the classroom and clinical setting, unless specifically allowed to do so. I will not disclose any medical information with other patients or visitor without obvious instruction provided to the school. I acknowledge that ALL information seen or heard regarding patients, directly or indirectly, is completely confidential and is not to be discussed, even with my family or others.

As a student, ELIM requires that I manage myself by high ethical standards.

Failure to recognize the importance of confidentiality is not only a breach of professional ethics, but can also involve a student in legal proceedings.

I will not share any information about patients or clinical site with the media.

This is vital for protection of both the patient and ELIM.

I have read and understand the above statement and agree to abide by these policies. I understand that a breach of policy will result in immediate disciplinary action and possible dismissal from ELIM Outreach Training Center, Inc.

Student Signature

Date

Witness Signature

Date

© ELIM Outreach Training Center, Inc
1820 Ridge Rd. Suite 300-301
Homewood, Ill 60430
708-922-9547 Fax: 708-922-9568
E-Mail elim1820@comcast.net
Website: elimotc.com



PHYSICAL RISK STATEMENT

Pregnant students and students with a temporary physical condition are eligible for admission into the program and continuation if already a student, if they so choose. If a student elects to remain active in the program s/he understands and agrees that excessive absenteeism or inability to perform necessary criteria to master the learning objectives and health care delivery may result in the necessity to discontinue their participation in the Course.

It is the student's responsibility to provide a physical indicating an ability to participate in all required work, including the externship or clinical. If there are limitations for continued participation, the physical must put in writing the physical restrictions. ELIM Outreach Training Center, Inc, assumes no responsibility of liability for exacerbating a known health condition when the student chooses to continue participation in the program.

Contact with patients carry inherent risk to health care workers as well the patient including, but not limited to, communicable diseases. In this document, as well throughout the curriculum, particular attention is given to provide the necessary skills required to minimize physical risk. During clinical, mock clinical and externship ELIM students are expected to provide appropriate care to patients, and without discrimination of patient diagnosis: such diagnosis may include tuberculosis, hepatitis, HIV/AIDS, or other infectious diseases.

All students are required to sign a Statement of Understanding acknowledging their awareness of risks of illness, injury, or infectious disease by patient contact. ELIM Outreach Training Center, Inc. assumes no responsibility for any illnesses or injury contracted by participation in the program and strongly encourages their students to follow safety guidelines taught throughout the coursework.



ELIM Outreach Training Center
1820 Ridge Road, Suite 300-301
Homewood, Illinois 60430
708-922-9547 Fax: 708-922-9568
E-Mail elim1820@comcast.net
Website: elimotc.com

STUDENT WITHDRAWAL FORM

I understand that by completing this form I am withdrawing from a class at the ELIM Outreach Training Center,

_____ as of _____.

Students Name _____ Students ID # _____

Students Address _____ City _____ State _____ Zip _____
Last 4 SS#

Students Phone Number _____ Cell Number _____

Students Date of Enrollment _____ Expected End Date _____

Tuition Cost _____ Tuition paid to date _____ Registration Fee _____

Book(s) Fee _____ Lab Fees _____

Total number of days in class and clinical _____ Amount due to student \$ _____

Amount due school _____

N. B. Triplett, RN, School Official Officer

Please see your student catalog under Refund Policy.

Please complete the questionnaire:

Do you plan to re-enroll at ELIM? _____ Yes _____ No

If yes when: Term _____ Fall _____ Spring _____ Summer _____ Year

Please indicate the major reason for your withdrawal: check only one

_____ Academic failure or not doing as well academically as you wanted

_____ Because schoolwork is interfering with work schedule

_____ Change in career objectives

_____ Financial difficulties

_____ Illness

_____ Other (explain) _____

Student's Signature _____ Staff Signature _____ Date _____

ELIM Outreach Training Center is an equal opportunity and non-discriminatory employer and educational institution.

Form SWF-A

ELIM OUTREACH TRAINING CENTER REFUND POLICY

Click here to
return to the
Table of
Contents



IF you cancel your classes or withdraw from the school, you may be eligible for a tuition and fee refund according to the following:

1. If an applicant never attends class (no-show) or cancels the contract prior to the class start date, all tuition paid will be refunded within forty-five (45) calendar days. **REGISTRATION FEE IN NON REFUNDABLE.**
2. Student already enrolled: the refund due will be calculated using the last day of attendance and be paid within forty-five (45) calendar days from the documented date of attendance. The date of determination is the date the student gives written notice of withdrawal to the institution or the date the school terminates the student due to the student's **failure to adhere to the school's attendance, conduct or academic policy.**(Please see the **Academic Statement**)
3. Deposits or down payments shall become part of the tuition

Cancellations:

1. Rejection of Applicant: If an applicant is rejected for enrollment by the school a full refund of all monies paid, less the non-refundable registration fee, will be made.
2. Program Cancellation: **If the school cancels a program subsequent to a student's** enrollment, the school will refund all monies paid by the student.
3. Cancellation Prior to the Start of Class or No Show: If an applicant accepted by the school cancels prior to the start of scheduled classes or never attends class (no show), the school will refund all monies paid **Registration fee is non-refundable**

Withdrawal or Termination After Start of Class:

Withdrawing from the school may have both academic and financial consequences. You are encouraged to understand the consequences before you decide to withdraw. If you decide to withdraw, you must follow the established withdrawal procedure for the school:

A student may withdrawal (drop) a course by submitting a withdrawal notification to ELIM. The notification form must contain an effective (determination) date. Authorize withdrawal by a student must be done in writing to the admission office within 10 days after the withdrawal date

You may mail the form to: ELIM, 1820 Ridge Rd. Suite 300, Homewood, Illinois, 60430.

A withdrawal form is located in the student handbook and the office.

1. The school is not obligated to make refunds to students who are terminated due to **Violation of the school written academic policy** and or attendance policy



2. Program less than 11 weeks: Students who withdraw at any point up to midpoint, the school may retain a prorated amount of the tuition/fees. For students who withdraw after the midpoint, the school may retain all tuition/fees paid.
3. Students who registered for more than one session (class) and withdraw after completing the first term/session but before midpoint of any subsequent session, the school may retain a prorated amount up to midpoint. For students who withdraw after the midpoint of any subsequent session, the school may retain all of the tuition and fees for that session.
4. Prorated refunds will be calculated on a daily basis.
5. **Other Charges and Fees:**
All extra cost, such as books and laboratory fees not included in the tuition are Non refundable.

The school may return a book fee when (a) the book(s) are returned to the school unmarked and not used and (b) the student has provided the school with a notice of cancellation (withdrawal).

6. **Suggested Components for a Refund Policy:**
The following is a sample Refund Percentage table (calculating the percentage of cancellation of charges for tuition and fees) based on a session less than 11 weeks.

Basic Nurse Assistant: Cost: \$850.00 (Tuition, Book, Lab Fee) Registration Fee-Non Refundable

Week Withdrawal Occurred	% of Term Enrolled (days)	ELIM's Refund
1	3 Days	\$648.00
2	6 Days	\$546.00
3	9 Days	\$444.00
4	12 Days	\$342.00
5 Midpoint of class /session	15 Days	No Tuition Refunded
6	18 Days	No Tuition Refunded
7	21 Days	No Tuition Refunded
8	22 Days	No Tuition Refunded

Calculations are based upon the full tuition paid. Students entering a payment plan agreement, refund will be based on payments made.



School Tuition Refund Policy (EXAMPLE)

If you cancel your class or withdraw from the school, you may be eligible for a tuition and fee refund based on the following refund table:

ELIM may retain an amount computed prorate by days in class plus 10% of tuition and other instructional charges up to the completion of 50% of the course of instruction. When the student has completed in excess of 50% of the course of instruction, the school may retain the application/registration fee and the entire tuition and other charges.

Electrocardiogram: \$955.00 (Tuition, Book, Lab Fee Registration Fee- Non Refundable)

Week Withdrawal Occurred	% of Term Enrolled (days)	ELIM's Refund Policy
1	2 Days	\$864.00
2	4 Days	\$778.00
3	6 Days	\$692.00
4	8 Days	\$606.00
5	10 Days	\$520.00
6	12 Days	\$434.00
7*50% of class completed	14 Days	No Tuition Refunded
8	16 Days	No Tuition Refunded
9	18 Days	No Tuition Refunded
10	20 Days	No Tuition Refunded
11	22 Days	No Tuition Refunded
12 End of class	24 Days	No Tuition Refunded

Calculations based upon paid tuition of \$955.00 divided by the number of days attended (22) =cost per day



School Tuition Refund Policy (EXAMPLE)

If you cancel your class or withdraw from the school, you may be eligible for a tuition and fee refund based on the following refund table:

ELIM may retain an amount computed prorate by days in class plus 10% of tuition and other instructional charges up to the completion of 50% of the course of instruction. When the student has completed in excess of 50% of the course of instruction, the school may retain the application/registration fee and the entire tuition and other charges.

Pharmacy Cost: \$980.00 (Tuition, Book, and Lab Fee) Registration Fee- Non Refundable

Week Withdrawal Occurred	% of Term Enrolled (days)	ELIM's Refund Policy
1	1 Day	\$891.00
2	2 Days	\$802.00
3	3 Days	\$713.00
4	4 Days	\$624.00
5	5 Days	\$535.00
6	6 Days	\$446.00
7*50% of class completed	7 Days	No Tuition Refunded
8	8 Days	No Tuition Refunded
9	9 Days	No Tuition Refunded
10	10 Days	No Tuition Refunded
11	11 Days	No Tuition Refunded
12 End of class		No Tuition Refunded

Calculations based upon paid tuition of \$980.00 divided by the number of days attended (11) =cost per day

School Tuition Refund Policy (EXAMPLE)

If you cancel your class or withdraw from the school, you may be eligible for a tuition and fee refund based on the following refund table:

ELIM may retain an amount computed prorate by days in class plus 10% of tuition and other instructional charges up to the completion of 50% of the course of instruction. When the student has completed in excess of 50% of the course of instruction, the school may retain the application/registration fee and the entire tuition and other charges.

Dialysis Cost: \$950.00 (Tuition, Book, Lab Fee)
Registration Fee- Non Refundable

Week Withdrawal Occurred % of Term Enrolled (days) ELIM's Refund Policy

1	1 Day	\$864.00
2	2 Days	\$778.00
3	3 Days	\$692.00
4	4 Days	\$606.00
5	5 Days	\$520.00
6	6 Days	\$434.00
7*50% of class completed	7 Days	No Tuition Refunded
8	8 Days	No Tuition Refunded
9	9 Days	No Tuition Refunded
10	10 Days	No Tuition Refunded
11	11 Days	No Tuition Refunded
12 End of class		No Tuition Refunded

Calculations based upon paid tuition of \$950.00 divided by the number of days attended (11) =cost per day



School Tuition Refund Policy (EXAMPLE)

If you cancel your class or withdraw from the school, you may be eligible for a tuition and fee refund based on the following refund table:

ELIM may retain an amount computed prorate by days in class plus 10% of tuition and other instructional charges up to the completion of 50% of the course of instruction. When the student has completed in excess of 50% of the course of instruction, the school may retain the application/registration fee and the entire tuition and other charges.

Clinical Laboratory/Phlebotomy Cost: \$2010.00 (Tuition, Book, and Lab Fee)
Registration Fee- Non Refundable

Week Withdrawal Occurred	% of Term Enrolled (days)	ELIM's Refund Policy
1	2 Days	\$ 1844.00
2	4 Days	\$ 1678.00
3	6 Days	\$ 1512.00
4	8 Days	\$ 1346.00
5	10 Days	\$ 1180.00
6	12 Days	\$ 1014.00
7*50% of class completed	14 Days	No Tuition Refunded
8	16 Days	No Tuition Refunded
9	18 Days	No Tuition Refunded
10	20 Days	No Tuition Refunded
11	22 Days	No Tuition Refunded
12	24 Days	No Tuition Refunded

Calculations based upon paid tuition of \$2010.00 divided by the number of days attended (24) =cost per day

School Tuition Refund Policy (EXAMPLE)

If you cancel your class or withdraw from the school, you may be eligible for a tuition and fee refund based on the following refund table:

ELIM may retain an amount computed prorate by days in class plus 10% of tuition and other instructional charges up to the completion of 50% of the course of instruction. When the student has completed in excess of 50% of the course of instruction, the school may retain the application/registration fee and the entire tuition and other charges.

Medical Billing & Coding Cost: \$1760.00 (Tuition, Book and Lab Fee) Registration Fee- Non Refundable

Week Withdrawal Occurred	% of Term Enrolled (days)	ELIM's Refund Policy
1	2 Days	\$1613.40
2	4 Days	\$1466.80
3	6 Days	\$1320.20
4	8 Days	\$1173.60
5	10 Days	\$1027.00
6	12 Days	\$880.40
7*50% of class completed	14 Days	No Tuition Refunded
8	16 Days	No Tuition Refunded
9	18 Days	No Tuition Refunded
10	20 Days	No Tuition Refunded
11	22 Days	No Tuition Refunded
12	24 Days	No Tuition Refunded

Calculations based upon paid tuition of \$1760.00 divided by the number of days attended (24) =cost per day



School Tuition Refund Policy (EXAMPLE)

If you cancel your class or withdraw from the school, you may be eligible for a tuition and fee refund based on the following refund table:

ELIM may retain an amount computed prorate by days in class plus 10% of tuition and other instructional charges up to the completion of 50% of the course of instruction. When the student has completed in excess of 50% of the course of instruction, the school may retain the application/registration fee and the entire tuition and other charges.

Mental Health Worker: \$945.00 (Tuition, Book and Lab Fee) Registration Fee- Non Refundable

Week Withdrawal Occurred	% of Term Enrolled (days)	ELIM's Refund Policy
1	1 Day	\$866.00
2	2 Days	\$787.00
3	3 Days	\$678.00
4	4 Days	\$589.00
5	5 Days	\$500.00
6	6 Days	\$411.00
7*50% of class completed	7 Days	No Tuition Refunded
8	8 Day	No Tuition Refunded
9	9 Days	No Tuition Refunded
10	10 Days	No Tuition Refunded
11	11 Days	No Tuition Refunded
12 End of class	12 Days	No Tuition Refunded

Calculations based upon paid tuition of \$945.00 divided by the number of days attended (12) =cost per day



School Tuition Refund Policy (EXAMPLE)

If you cancel your class or withdraw from the school, you may be eligible for a tuition and fee refund based on the following refund table:

ELIM may retain an amount computed prorate by days in class plus 10% of tuition and other instructional charges up to the completion of 50% of the course of instruction. When the student has completed in excess of 50% of the course of instruction, the school may retain the application/registration fee and the entire tuition and other charges.

Physical Therapy Aide: Cost \$1000.00 (Tuition, Book, Lab Fee) Registration Fee-Non Refundable

Week Withdrawal Occurred	% of Term Enrolled (days)	ELIM's Refund Policy
1	3 Days	\$ 865.00
2	6 Days	\$ 730.00
3	9 Days	\$ 595.00
4	12 Days	\$ 460.00
5 *50% of class completed	15 Days	No Tuition Refunded
6	18 Days	No Tuition Refunded
7	21 Days	No Tuition Refunded
8 End of class	22 Days	No Tuition Refunded

Calculations based upon paid tuition of \$1000.00 divided by the number of days attended (22) =cost per day.



School Tuition Refund Policy (EXAMPLE)

If you cancel your class or withdraw from the school, you may be eligible for a tuition and fee refund based on the following refund table:

ELIM may retain an amount computed prorate by days in class plus 10% of tuition and other instructional charges up to the completion of 50% of the course of instruction. When the student has completed in excess of 50% of the course of instruction, the school may retain the application/registration fee and the entire tuition and other charges.

Phlebotomy Cost: \$1090.00 (Tuition, book, and Lab fee) Registration Fee Non-Refundable.

Week Withdrawal Occurred	% of Term Enrolled (days)	ELIM's Refund Policy
1	2 Day	\$ 900.00
2	4 Days	\$ 810.00
3	6 Days	\$ 720.00
4	8 Days	\$ 630.00
5	10 Days	\$ 540.00
6	12 Days	\$450.00
7*50% of class completed	14 Days	No Tuition Refunded
8	16 Day	No Tuition Refunded
9	18 Days	No Tuition Refunded
10	20 Days	No Tuition Refunded
11	22 Days	No Tuition Refunded
12		

Calculations based upon paid tuition of \$990.00 divided by the number of days attended (22) =cost per day



School Tuition Refund Policy (EXAMPLE)

If you cancel your class or withdraw from the school, you may be eligible for a tuition and fee refund based on the following refund table:

ELIM may retain an amount computed prorate by days in class plus 10% of tuition and other instructional charges up to the completion of 50% of the course of instruction. When the student has completed in excess of 50% of the course of instruction, the school may retain the application/registration fee and the entire tuition and other charges.

**Computer Technology Cost: \$2675.00 (Tuition, books, and Lab fee)
Registration Fee is Non-Refundable**

Week Withdrawal Occurred	% of Term Enrolled (days)	ELIM's Refund Policy
1	2 Day	\$2446.25
2	4 Days	\$2317.50
3	6 Days	\$2188.75
4	8 Days	\$2060.00
5	10 Days	\$1931.25
6	12 Days	\$1802.50
7	14 Days	\$1673.75
8	16 Days	\$1545.00
9	18 Days	\$1416.26
10 * 50% of class completed	20 Days	\$1287.50
11	22 Days	No Tuition Refund
12	24 Days	No Tuition Refund
13	26 Days	No Tuition Refund
14	28 Days	No Tuition Refund
15	30 Days	No Tuition Refund
16	32 Days	No Tuition Refund
17	34 Days	No Tuition Refund
18	36 Days	No Tuition Refund
19	38 Days	No Tuition Refund
20	40 Days	No Tuition Refund

Calculations based upon paid tuition of \$2575.00 divided by the number of days attended (40) =cost per day



School Tuition Refund Policy (EXAMPLE)

If you cancel your class or withdraw from the school, you may be eligible for a tuition and fee refund based on the following refund table:

ELIM may retain an amount computed prorata by days in class plus 10% of tuition and other instructional charges up to the completion of 50% of the course of instruction. When the student has completed in excess of 50% of the course of instruction, the school may retain the application/registration fee and the entire tuition and other charges.

**Medical Clinical Assistant (Without BNA) Cost: 17724.00
(Tuition, Books, Lab Fee) Registration Fee Non -Refundable**

Week Withdrawal Occurred	% of Term Enrolled (days)	ELIM's Refund Policy
1	3 Days	\$16994.57
2	6 Days	\$16365.14
3	9 Days	\$15735.71
4	12 Days	\$15106.28
5	15 Days	\$14476.85
6	18 Days	\$13847.42
7	21 Days	\$13217.99
8	24 Days	\$12588.56
9	27 Days	\$11959.13
10	30 Days	\$11329.70
11	33 Days	\$10700.27
12	36 Days	\$10070.84
13	39 Days	\$9441.41
14 50% Of class completed	42 Days	No Tuition Refunded
15	45 Days	No Tuition Refunded
16	48 Days	No Tuition Refunded
17	51 Days	No Tuition Refunded
18	54 Days	No Tuition Refunded



19	57 Days	No Tuition Refunded
20	60 Days	No Tuition Refunded
21	63 Days	No Tuition Refunded
22	66 Days	No Tuition Refunded
23	69 Days	No Tuition Refunded
24	72 Days	No Tuition Refunded
25	75 Days	No Tuition Refunded
26	78 Days	No Tuition Refunded
27	81 Days	No Tuition Refunded
28	84 Days	No Tuition Refunded

Calculations based upon paid tuition of \$17624.00 divided by the number of days attended (84) =cost per day



School Tuition Refund Policy (EXAMPLE)

If you cancel your class or withdraw from the school, you may be eligible for a tuition and fee refund based on the following refund table:

ELIM may retain an amount computed prorate by days in class plus 10% of tuition and other instructional charges up to the completion of 50% of the course of instruction. When the student has completed in excess of 50% of the course of instruction, the school may retain the application/registration fee and the entire tuition and other charges.

**Medical Clinical Assistant (With BNA) Cost: \$18654.00
(Tuition, Books, Lab Fee) Registration Fee Non -Refundable**

Week Withdrawal Occurred	% of Term Enrolled (Days)	ELIM's Refund Policy
1	3 Days	\$18008.29
2	6 Days	\$17462.58
3	9 Days	\$16916.87
4	12 Days	\$16371.16
5	15 Days	\$15825.45
6	18 Days	\$15279.74
7	21 Days	\$14734.03
8	24 Days	\$14188.32
9	27 Days	\$13642.61
10	30 Days	\$13096.90
11	33 Days	\$12551.19
12	36 Days	\$12005.48
13	39 Days	\$11459.77
14	42 Days	\$10914.06
15	45 Days	\$10369.35
16	48 Days	\$9822.64
17 50% of class completed	51 Days	No Tuition Refunded
18	54 Days	



		No Tuition Refunded
19	57 Days	No Tuition Refunded
20	60 Days	No Tuition Refunded
21	63 Days	No Tuition Refunded
22	66 Days	No Tuition Refunded
23	69 Days	No Tuition Refunded
24	72 Days	No Tuition Refunded
25	75 Days	No Tuition Refunded
26	78 Days	No Tuition Refunded
27	81 Days	No Tuition Refunded
28	84 Days	No Tuition Refunded
29	87 Days	No Tuition Refunded
30	90 Days	No Tuition Refunded
31	93 Days	No Tuition Refunded
32	96 Days	No Tuition Refunded
33	99 Days	No Tuition Refunded
34	102 Days	No Tuition Refunded

Calculations based upon paid tuition of \$18554.00 divided by the number of days attended (102) =cost per day



STUDENT COMPLAINT POLICY

If you have a suggestion or a complaint against the ELIM Outreach Training Center, or any Instructor, we request that your suggestion **or** complaint be addressed to the appropriate authority at ELIM Outreach Training Center.

You will not, in any way, be retaliated against or punished for making a suggestion **or** complaint. Retaliation is prohibited by federal and state law; any evidence of retaliation will be acted upon immediately.

More importantly we value and need your feedback. Please fill out the **Student Complaint Form** (attached).

Provide specific details of the incident(s), which prompt your **COMPLAINT** and the solution/remedy you recommended.

The chain of command is: **student** and **instructor(s)** will ideally try to reconcile the suggestion/complaint, at which point the issue is resolved.

However, if you are not satisfied you as a student may proceed to the next level of resolution in which the Program Director will be involved to achieve resolution.

If these steps are not successful or satisfactory to you the student, may contact

ILLINOIS BOARD OF HIGHER EDUCATION

1 North Old State Capitol Plaza, Suite 333

Springfield, Illinois 6270-13771.

Additionally complaints may be submitted via the **IBHE** online complaint system at <http://complaints.ibhe.org> or the online system is also accessible through the agency's homepage www.ibhe.org.

I have read and understand the process stated above.

Student's PRINTED name

Date

Student's Signature

Telephone Number

Program Director's Signature

Date

ELIM Outreach Training Center
1820 Ridge Rd. Suite 300-301
Homewood, Illinois 60430
Tel# 708-922-9547 Fax# 708-922-9568
E-mail: elim1820@comcast.net
Website- elimotc.com



STUDENT COMPLAINT FORM

Student's First Name Middle Initial Last Name

Permanent Street Address City State Zip Code

Telephone Number Cell Phone Number

Course of Instruction Dates of Enrollment Student's ID#

Please describe in details your complaint(s)

❖ *If the concern has to do with tuition and fees did you speak with the business office?*

Yes () No () Results _____ Date _____

❖ *If the concern has to do with an instructor, did you speak with the Program Director?*

Yes () No () Results _____ Date _____

❖ *If the concern involves the behavior of an individual student, did you speak with the student and instructor?*

Yes () No () Results _____ Date _____

❖ *Was a notice of this complaint given to the School Administrator?*

Yes () No () Date: _____ to Whom _____

Student's Signature

Date



STUDENT PERMANENT RECORD

Student permanent record shall consist of:

- A. Basic identifying information, including student's name and address, birth date and social security number
- B. Course(s), start date, end date and date graduated
- C. The record may also consist of grade(s) and awards given.

The permanent record will be kept for not less than 50 years after the student has graduated or no more than 5 years after a student has finished or otherwise permanently withdrawn from the school.



ADVANCE STANDING

ELIM has not implemented a policy on “Advance Standing” at this time.



“IN RESIDENCE”

All courses of instruction will be initiated at:

ELIM Outreach Training Center
1820 Ridge Road, Suite 300-301
Homewood, Illinois 60430
P: 708-922-9547 F: 708-922-9568
E-Mail: elim1820@comcast.net
Website: elimotc.com

The clinical/externship portion (if applicable) of a course of instruction may be held at a clinical site. The name and address of that location will be given out the week of the student assigned clinical rotation. Please see your instructor for more information.



INCOMPLETE GRADE

This grade indicates that the student did not make up all the required work. The make-up work should be completed as soon as possible, and no longer than the end of the next course. If the work is not done by the time allowed, or within a shorter period of time, a grade of “F” or a failure will be recorded.

When the student fails a course of instruction or part of a course of instruction, the entire course will have to be repeated and full tuition and registration will apply.

POLICY ON JOB ASSISTANCE

ELIM does not offer job placement, however we assist our student with job leads obtained from various employers who are seeking qualified candidates to fill positions at their facilities.

Employment opportunities are obtained from the following:

- A. Referrals
- B. Internet
- C. Health Care Organizations that we are affiliated with.
- D. Job Fairs
- E. Externship programs



STUDENT SERVICES OFFERED AT ELIM

To make certain that our students are prepared for graduation and to take on the challenge of State and National exams, ELIM makes available the following:

- A. State Exam Review
- B. National Certificated Review
- C. Resume Assistance
- D. Group Tutoring *

* Tutoring dates and times are arranged by the instructor .Students must respect and accept dates/times assigned to them.



FAMILY EDUCATION RIGHTS AND PRIVACY ACT (FERPA)

ELIM respects the right to privacy for all of its students. To that end, the school maintains a privacy policy that complies with the Family Education Rights and Privacy Act (FERPA). No information regarding and individual student's record is released to anyone other than the student until a signed release form from the student has been received.



DISCLOSURE TO PARENTS OF DEPENDANT STUDENTS AND CONSENT FORM FOR DISCLOSURE TO PARENTS

To: **ELIM OUTREACH TRAINING CENTER**

FROM:

Student's First Name

Middle Initial

Last Name

Permanent Street Address

City

State

Zip Code

Under the Family Education Rights and Privacy Act (FERPA), the ***ELIM Outreach Training Center*** is permitted to disclose information from your education records to your parents if your parents (or one of your parents) claim you as a dependent for federal tax purposes.

Please indicate whether your parents claim you as a tax dependant.

Please check the appropriate box:

- ☐ Yes I certify that my parents claim me as a dependant for federal income tax purposes.
- ☐ No I certify that my parents do not claim me as a dependent for federal income tax purposes

Signature: _____

Date: _____

If you are not claimed as a dependent or you do not know whether you are claimed as a dependant for federal income taxes purposes, but you agree that ***ELIM Outreach Training Center*** may disclose information from your education records to your parents, please sign the following consent:

I consent to the disclosure of any personally identifiable information from my education records to my parent(s), for the reasons determined by the ***ELIM Outreach Training as*** appropriate. This authorization will remain in effect for the _____ school year.

Signature: _____

Date: _____

If parents live at the same address, please list both in #1

1. Name(s) _____
Address _____
City, State, Zip _____
Telephone _____
2. Name(s) _____
Address _____
City, State, Zip _____
Telephone _____

Students cannot be denied any educational services from ELIM Outreach Training Center if they refuse to provide consent.