



SAAD CNA SCHOOL

## WELCOME TO SAAD CNA SCHOOL PHLEBOTOMY CLASS

### GENERAL RULES AND GUIDELINES

- Tuition & Fees:** Unless sponsored by your employer or an agency, **tuition is \$515.00**, which includes a \$20 CPR fee. Tuition and CPR fees can be paid by cash, money order or credit card (Visa, MC, Discover, Amex) and **must be paid in full at the time of registration**. The **Certification Exam fee is \$140** and must also be **paid in full**, by all students, at the time of Registration. Students must purchase the class textbook, **Phlebotomy Handbook, 9<sup>th</sup> Edition by Diana Garza and Kathleen Becan-McBride**. This publication can be purchased here at Saad Healthcare. **New books are \$80.00. (Total due at Registration \$735).**
- Class Schedule:** Each class is for three (3) weeks (15 days), Monday through Friday from 8:00 a.m. to 5:00 p.m.
- Late Policy:** You must be on time each day and not miss a day. If you miss a day of class or if you are more than 15 minutes late on any day, you may make it up in the next cycle (usually the next month). Your Certificate of Completion will be issued when the class is completed.
- School Refund Policy:** If you decide to cancel your enrollment within 72 hours after enrollment, all money paid will be refunded to you. If you decide to cancel from a class after 72 hours of enrollment date, but before classes begin, we will refund your monies except for a **\$30.00** processing fee. If you cancel after classes begin, you will have the option to enroll in the next available class without penalty, should space allow. If you request a refund and you have not attended any classes, you may receive a refund except for the \$30.00 processing fee. If you decide to withdraw after attending classes, you will be afforded a prorated refund of the prepaid fees except for the \$30.00 processing fee. A full refund is only available as defined in Ala. Code #16-46-1(7) and (8) (1975).
- Certification Exam:** Satisfactory completion of the Saad Phlebotomy Course will qualify you to apply to take the Certification Exam. Upon completion of the Phlebotomy Course, you will be given an examination application to complete. **To take the exam, you must be at least 18 years of age. The cost of the exam is \$140 and must be paid in full at the time of Registration.** **NOTE: If you have ever been convicted of a FELONY you are automatically ineligible to take the Certification Exam and you may want to reconsider taking the Phlebotomy Course.**
- Physical Requirements:** Listed below are the physical requirements for the course. You must be able to meet these physical requirements to take the course. Please review these requirements and, if you have any questions or know of anything that would prevent you from meeting these requirements, please speak with the school representative when you register. Physical demands are as follows:
  - Physical Activity** – Physical activity involves walking, standing, carrying, crawling, bending, lifting, sitting, crouching, reaching, pushing, pulling, fingering, grasping, feeling, talking, hearing, all resulting in heavy work.
  - Exertion Requirements** – You must be able to lift and carry from 20 to 50 pounds of weight up to 10 feet occasionally (up to 1/3 of the time), lift and carry from 10 – 25 pounds of weight up to 10 feet frequently (from 1/3 to 2/3 of the time), and lift and carry up to 10 pounds of weight regularly.
- Supplies:** Please bring your own supplies (pen/pencil and notebook).
- Lunch & Parking:** Lunch is to be taken off premises or out back at the picnic table. There is absolutely no smoking or eating allowed on the side stairs. Reserved student parking is on the **South** side of the building, in the farthest two lanes.
- Cell Phone Usage:** **POSITIVELY NO CELL PHONES OR PAGERS MAY BE USED INSIDE THE BUILDING.**
- Dress Code:** Dress Code for the Phlebotomy classroom will be **solid color scrubs with matched top and bottom**. Tennis shoes or crocs are acceptable footwear. (See additional information about **Dress Code** attached)



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**PHLEBOTOMY CLASS  
INDIVIDUAL REGISTRATION INFORMATION**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_

YEAR OF HIGH SCHOOL GRADUATION OR GED: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_

EMERGENCY CONTACT PHONE NUMBER \_\_\_\_\_

ANY MEDICAL DIAGNOSIS THAT MAY HINDER YOUR FULL PARTICIPATION IN CLASS  
YES \_\_\_\_\_ No \_\_\_\_\_ (*IF YES, MEDICAL RELEASE IS REQUIRED*).

LIST ANY MEDICATIONS CURRENTLY TAKING \_\_\_\_\_  
\_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_



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## PHLEBOTOMY CLASS

### DRESS CODE FOR CLASS PARTICIPATION

1. Clean, solid color scrubs are required for all classes.
2. Crocs or tennis shoes are acceptable footwear.
3. No Perfume is allowed in the classroom or in the clinical setting.
4. All clothing must fit properly. Overly tight scrubs, or scrubs that are too loose, are not permitted.
5. Nails should be short, smooth and clean with no polish. Hair should be one color and must not be dyed in conspicuously unnatural colors (ex: rainbow colors, blue, pink, green, etc.). Hair style should be professional, worn pulled back or pinned up. Jewelry is limited to your wedding band, a clinical watch with second hand, and earrings (limited to **one pair of stud (post) earrings** no larger than 3mm).
6. No visible body piercings or tattoos are allowed, including but not limited to nose rings, eyebrow rings, tongue studs and earlobe spacers. Tattoos on the face, scalp, legs, feet, arms, torso and neck must be covered.
7. If in doubt, DON'T.

### GENERAL CODE OF CONDUCT

1. I understand that I must attend the entire three (3) week school.
2. I further understand that I can not be absent from any class time or clinical experience time.
3. I understand that all personal electronics, such as cell phones and pagers, must be turned off in the building.
4. I further understand that personal electronics are not to be taken to the clinical experience facility.
5. I understand that I must have a watch with a sweep second hand.
6. I understand that if I wear or need eyeglasses, I will bring same to class and the clinical experience setting so that I may fully participate.



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## PHLEBOTOMY CLASS

### STUDENT ACKNOWLEDGEMENT SIGNATURE SHEET

By my signature below, I acknowledge that I have received a copy of **Saad CNA School Phlebotomy Class Welcome Packet** which includes the **General Information Sheet, Dress Code for Classroom Participation and General Code of Conduct**. I will familiarize myself with this information and attest that I **understand** and that I **agree to comply with these policies**.

I also understand that, if I have any questions or do not understand any provisions of this Welcome Packet, I should consult my instructor for answers or clarification.

By signing this statement, I acknowledge my complete understanding and acceptance of these terms.

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**STUDENT SIGNATURE**

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**DATE**

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**WITNESS**

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**DATE**



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## PHLEBOTOMY CLASS

### EMERGENCY INFORMATION

The information contained herein is confidential, will be used in case of an emergency situation and will only be maintained until conclusion of the Phlebotomy Class.

Student Name		Social Security Number	
Emergency Contact Name	Emergency Contact Phone Number	Relationship	
Emergency Contact Name	Emergency Contact Phone Number	Relationship	
<b>List Medications Currently Taking</b>			
Medication	Dosage	When take	
Medication	Dosage	When take	
Medication	Dosage	When take	
Medication	Dosage	When take	
<b>List any Illnesses (Asthma, Diabetes, Epilepsy, etc.) and the doctor's name treating you .</b>			
Illness	Dr. Name	Phone Number	
Illness	Dr. Name	Phone Number	
Illness	Dr. Name	Phone Number	
Illness	Dr. Name	Phone Number	