



Congratulations on your acceptance in the CTE Dental Assisting program for the 2022-2023 school year!

Kalamazoo RESA Career and Technical Education (CTE) invite you and your parent/guardian to attend an orientation highlighting next year's CTE Dental Assisting experience. This is a **mandatory** orientation to help prepare students for their KVCC dual enrolled class in the fall and to review this program packet. We strongly encourage a parent/guardian to attend with the students. Please join us on **Wednesday, May 11, 2022, at 6:00 p.m. on KVCC's Texas Township's Campus, room 4240** (see map on next page). At the time of the printing of this packet, masks are required at KVCC.

In this meeting, you will have the opportunity to:

- Tour the program
- Learn how to register for your KVCC course(s)
- Learn how to schedule and take the **required** KVCC placement testing or submit SAT scores
- Learn about the program's year-long expectations and logistics
- Learn how successful completion of the course can lead to future opportunities
- Learn about the program's dress code
- Ask questions

The attached program guidelines will be discussed in detail during the orientation. *Please review this packet thoroughly prior to and have it with you.* If you have questions or need further information, please contact Diane Fort, CTE Program Coordinator at diane.fort@kresa.org or 269-250-9316.

Special Note:

You are receiving this mailing because your name was provided to us by your school counselor as enrolling in an CTE program. If in doubt, check with your counselor. We apologize if this mailing was sent to you in error.

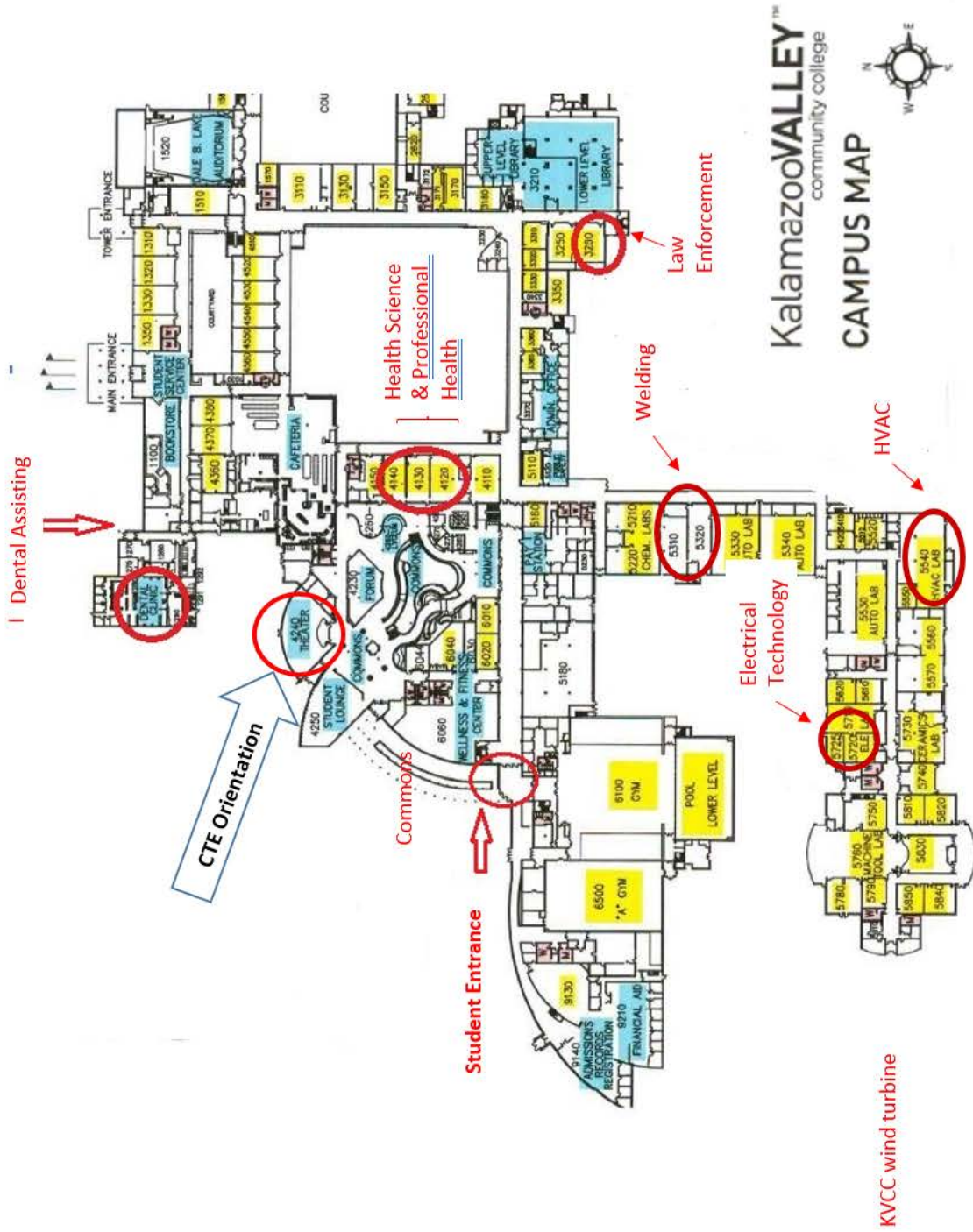
Notice of Non-discrimination:

It is the policy of Kalamazoo Regional Educational Service Agency that no discriminating practices based on race, color, national origin, sex (including sexual orientation or sexual identity), disability, age, religion, height, weight, marital or family status, military status, ancestry, genetic information or any other legally protected category be allowed during any program, activity, service or in employment. The following positions at Kalamazoo RESA have been designated to handle inquiries regarding the nondiscrimination policy: Assistant Superintendents — Tom Zahrt and Mindy Miller. Contact information: (269) 250-9200, 1819 E. Milham Ave, Portage, MI 49002.

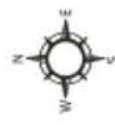
8th Street

O Avenue

I 94



KalamazooVALLEY™
community college
CAMPUS MAP



KALAMAZOO VALLEY COMMUNITY COLLEGE

GUEST/VISITOR EXPECTATIONS

Before you visit, take the self-health screening questionnaire.

Self-health screening questionnaire

- Do you now or have you had a fever in the last 24 hours?
- Do you have a sore throat?
- Have you had a recent onset of a cough?
- Are you experiencing shortness of breath or chest tightness?
- Do you have nasal congestion or a runny nose?
- Are you experiencing sudden body aches without recognized cause?
- Have you recently lost your sense of smell or taste?
- Are you experiencing nausea or vomiting?
- Are you experiencing fever, chills, or sweats?
- Have you had close contact with someone who was diagnosed with COVID-19 in the last two weeks?
- Have you been diagnosed with COVID-19 in the past two weeks?

If you answered “yes” to any of these questions or are suffering from other symptoms which are not listed above, please do not come to campus or enter the building(s).

During your visit, we ask that you

- Wear a face covering at all times, regardless of vaccination status;
- Maintain 3 ft. social distance whenever possible and do not congregate;
- Wash your hands or use hand sanitizer frequently and at least upon entering and exiting the facility;
- Keep furniture in its location and only use designated seats;
- Follow directions on posted signage;
- Adhere to current occupancies.

For questions, please contact the Event Services Office at 269.488.4204

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DENTAL ASSISTING DUAL ENROLLMENT 2022-23

WELCOME TO THE DENTAL ASSISTING PROGRAM!

Please note that there are steps you must take before next school year to prepare for this course.

See pages 2-4 for a detailed checklist.

It is extremely important to read this student guidelines packet in its entirety.

ASAP	<input type="checkbox"/> Apply to KVCC prior to orientation (see page 2)
May 11, 2022	<input type="checkbox"/> Attend the mandatory orientation (see details on cover page)
By June 1, 2022	<input type="checkbox"/> Complete KVCC's Health Careers application online at: https://p2.kvcc.edu/utilities/CTE_Health <input type="checkbox"/> Complete pages 17-20 of this packet to CTE <small>(Guidelines Acceptance form, PSEO, KVCC Authorization for Release of Information form)</small>
By July 1, 2022	<input type="checkbox"/> Provide placement test scores and meet KVCC's minimum benchmarks (see page 3)
By August 1, 2022	<input type="checkbox"/> ALL required KVCC health/immunization paperwork on pages 10-16 must be completed and turned in to the KRESA CTE office
By August 15, 2022	<input type="checkbox"/> Register for fall KVCC course(s) once approved <input type="checkbox"/> Complete Live Scan Fingerprint process (form will be provided with KVCC's approval to register)
September 7, 2022	<input type="checkbox"/> Attend class. Dental Assisting classes take place on the KVCC Texas Township campus. Transportation is the responsibility of the student.

****Student may be dropped if deadlines are not met by August 15.***

For more information, contact:

Diane Fort

Program Coordinator

diane.fort@kresa.org

269-250-9316

KRESA's Career & Technical Education

Amy Murray

Health Careers Admissions Coordinator

healthcareers@kvcc.edu

269-488-4144

Kalamazoo Valley Community College

Dental Assisting Student Checklist

For CTE Dual Enrolled Programs

It is extremely important to read this packet in its entirety.

<p>Complete prior to orientation (May 11)</p>	<p><input type="checkbox"/> KVCC ADMITTANCE</p> <p>As a high school student entering a dual enrollment program, you must apply and be accepted to KVCC. The KVCC application is available online at www.kvcc.edu/apply. Follow the online directions to create an account and apply. There is no cost to apply. You should receive your acceptance letter in the mail within one week which contains your Valley ID number and KVCC email. <u>Students should keep their Valley ID number in a safe place for future access.</u></p> <p>You should begin to monitor your KVCC email on a <u>regular</u> basis. CTE and KVCC will communicate with you via email during the summer.</p>
<p>May 11</p>	<p><input type="checkbox"/> ATTEND MANDATORY ORIENTATION</p> <p>See details on cover page.</p>
<p>By June 1</p>	<p><input type="checkbox"/> COMPLETE KVCC HEALTH CAREERS ONLINE APPLICATION</p> <p>Student will need your Valley ID number to complete the online application. Therefore, students must apply to KVCC prior to completing the health careers online application.</p> <p><input type="checkbox"/> Health Careers Application Link: https://p2.kvcc.edu/utilities/CTE_Health</p>
<p>By June 1</p>	<p><input type="checkbox"/> SUBMIT THE FOLLOWING FORMS TO CTE (see below)</p> <p><i>Please convert documents to pdf prior to sending.</i></p> <p><input type="checkbox"/> Page 17: Dual Enrollment Guidelines Acceptance Form</p> <p><input type="checkbox"/> Page 18: Postsecondary Enrollment Options (PSEO) Form</p> <p>The Postsecondary Enrollment Options form <u>will need to be signed by CTE staff, in lieu of your high school counselor and principal, to ensure dual enrollment payment is made through CTE. You must have a PSEO form on file with the CTE office.</u></p> <p><input type="checkbox"/> Page 19-20: KVCC's Authorization for Release of Information High School Dual Enrollment Form</p> <p><u>You must have a KVCC Authorization for Release of Information High School Dual Enrollment form on file with the CTE office.</u> Please email the form with the above paperwork.</p> <p style="text-align: center;">Please email paperwork by June 1 to: Diane Fort diane.fort@kresa.org</p>

By
July 1

KVCC PLACEMENT TESTING

Students must apply to KVCC before this step can begin.

Students are required to demonstrate that they have met the minimum benchmarks in Reading, Writing, and Math. Placement test scores must be on file prior to KVCC allowing dual enrollment. (see table below)

If you meet the SAT minimum scores below for any or all (reading, writing and math), **send SAT scores to KVCC through your CollegeBoard account at: <https://www.collegeboard.org/>.**

If you do not meet the minimum scores you will need to complete placement testing with KVCC. To schedule an appointment, please follow this link to the KVCC Testing Center: <https://www.kvcc.edu/services/testing/>

	ACT	Accuplacer	Aleks	NG Accuplacer	SAT
Writing	13	50		230	17
Reading	14	53		248	22
Math	18	80	14	260 Arithmetic OR 200 Quantitative Reasoning	23.5

As an alternative, you can email your official SAT score report, with full name displayed, to KRESA's CTE office, Diane Fort, diane.fort@kresa.org.

Example of CollegeBoard's SAT Score Report:
Get your full report online: studentscores.collegeboard.org



Your Total Score

1180 | 400 to 1600

78th
Nationally Representative
Sample Percentile

69th
SAT User Percentile —
National

Essay Scores

4 | 2 to 8
Reading

3 | 2 to 8
Analysis

2 | 2 to 8
Writing

Section Scores

670 | 200 to 800
Your Evidence-Based
Reading and Writing
Score

93rd Nationally Representative
Sample Percentile
89th SAT User Percentile —
National



510 | 200 to 800
Your Math Score

52nd Nationally Representative
Sample Percentile
40th SAT User Percentile —
National



Test Scores

33 | 10 to 40
Reading

34 | 10 to 40
Writing and Language

25.5 | 10 to 40
Math

<p align="center">By August 1</p>	<p><input type="checkbox"/> KVCC HEALTH CAREERS IMMUNIZATION AND PHYSICAL FORMS (pages 10-16) MUST BE COMPLETED</p> <p><input type="checkbox"/> COVID-19 form</p> <p><input type="checkbox"/> Immunization record – provide a copy of your MCIR – Michigan Care Improvement Registry record (mdhhs.mimmsportal.state.mi.us) or physician’s office completes pages 10-11</p> <p><input type="checkbox"/> Influenza (flu) form</p> <p><input type="checkbox"/> Physical must be good for the entire next school year (cannot receive any earlier than March of current year.)</p> <p><input type="checkbox"/> TB form</p> <p>Students must complete this required paperwork to be eligible for DHY 278. Do not wait until the last minute, as it takes time to get into the doctor. <u>Students may be dropped if this deadline and all others are not met.</u></p> <p>COVID-19 is a fluid situation and requirements may change prior to next school year. Currently, KVCC highly recommends students receive the COVID-19 vaccine in order to participate in the clinical portion of the course. Please see the attached COVID-19 vaccination form for acceptable proof of your vaccine.</p>
<p align="center">By August 15</p>	<p><input type="checkbox"/> REGISTER FOR FALL KVCC COURSE(S) ONCE APPROVED</p> <p>Once placement scores have been received and audited for successfully meeting minimum benchmarks, KVCC will email approval to register for your course(s). Please check your <u>KVCC email regularly</u> for this important information. If you do not register for your KVCC course, you will not be able to begin the class.</p> <p><input type="checkbox"/> KVCC LIVE SCAN FINGERPRINTING MUST BE COMPLETED</p> <ul style="list-style-type: none"> • This form will be emailed to you from KVCC with your approval to register. • The day of fingerprinting take the completed Live Scan form and a <u>driver’s license</u> or <u>state ID</u> (your school/Valley ID is not sufficient) to room 5120. • The cost for the scan is approximately \$60. CTE will cover this expense, however for CTE to pay; the student MUST identify himself or herself as an CTE Dental Assisting student at the time of testing.
<p align="center">Late August</p>	<p><input type="checkbox"/> STUDENT ID</p> <p>As a college student, students should obtain their student ID. Visit their website at: https://www.kvcc.edu/admissions/student-service.php for more details. Students will not be able to obtain their ID until the steps above are completed and approved by KVCC.</p>
<p align="center">September 7</p>	<p><input type="checkbox"/> ATTEND CLASS - Welcome, Kalamazoo Valley Cougar!</p>
<p align="center">October</p>	<p><input type="checkbox"/> SUBMIT PROOF OF FLU VACCINE TO AMY MURRAY, KVCC</p> <p>See form provided on page 14</p>

CTE Dental Assisting Dual Enrollment Guidelines for High School Students

The Dental Assisting classes take place on the KVCC Texas Township campus. **Transportation is the responsibility of the student.** Taking dual enrolled classes as a high school student is a wonderful way to begin your college career. Students who choose to dual enroll need to be fully aware of the extra duties and responsibilities that high school students face as new college students. These guidelines are meant to introduce students to some of these responsibilities. This document is not meant to be inclusive of all the guidelines and policies imposed by your high school, CTE, and/or KVCC. Consequently, CTE strongly suggests students also read the KVCC Student Handbook prior to the beginning of the fall term. A copy of the handbook can be found on the KVCC website (www.kvcc.edu) and searching for *student handbook*.

KRESA Career & Technical Education (CTE) is fortunate to partner with KVCC in the offering of a Dental Assisting program. This course will prepare students to become Dental Assistants where they will learn the fundamental knowledge and skills of dental anatomy, physiology, terminology, dental materials, chairside assisting, sterilization, radiology, and laboratory and clinical procedures. Second semester includes an internship held in KVCC's dental clinic and/or local dental offices.

Detailed course descriptions can be found on the KVCC website (<https://www.kvcc.edu/academics/schedcat/catchoose.php>). Upon successful completion of KVCC's DHY 105, 106, 113, 278 and WPE 112 courses:

- Students will earn their Radiography certification (DHY 113)
- Students will have skills that are readily recognized within a dental office.
- Students will have exposure to career opportunities found within the dental field and begin a preferred relationship with the KVCC Dental Hygiene program.

ACADEMIC CALENDAR AND PROGRAM SCHEDULE

Student schedules require being open to extended class time and the college's calendar. Students are expected to attend every scheduled KVCC session, even when their high school is closed. This includes high school breaks that are different than KVCC's recesses listed below. The academic calendar can be found on the KVCC's website (<https://www.kvcc.edu/academics/calendar/>).

Fall 2022 Semester

Semester Begins: **Wednesday, September 7 (with WPE 112)**

Thanksgiving Recess: **Wednesday, November 23 – Sunday, November 27**

Semester Ends: **Saturday, December 17**

Winter 2023 Semester

Semester Begins: **Monday, January 9 (with DHY 113)**

MLK, Jr. Recess: **Monday, January 16**

Spring Recess: **Monday, March 13 – Sunday, March 19**

Semester Ends: **Monday, April 24**

FALL SEMESTER (September – December)					
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	Credits
DHY 105 CRN: 10238 Dental Assisting I 1:00 p.m.–3:40 p.m. Room: 1280 & 1290 2 credits		WPE 112 CRN: 10627 Safety and First Aid 1:00 p.m.–2:55 p.m. Room: 5110 2 credits	DHY 105 CRN: 10238 Dental Assisting I 1:00 p.m.–3:40 p.m.		4 credits
WINTER SEMESTER (January – April)					
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	Credits
DHY 113 CRN: TBD Dental Imaging Techniques 1:00 p.m.–3:40 p.m. Room: 1280 & 1290 1 credit	DHY 106 (weeks 1-8) CRN: TBD Dental Assisting II 1:00 p.m.–3:40 p.m. Room: 1280 & 1290 1 credits		DHY 106 (weeks 1-8) CRN: TBD Dental Assisting II 1:00 p.m.–3:40 p.m.		3 credits
	DHY 278 Internship (weeks 9-15; total of 48 hours) CRN: TBD – 1 credit To be eligible for the internship, students must be passing all preceding coursework with a "C" or above. Days and times TBD				

ATTENDANCE

Attendance requirements are determined by the Kalamazoo Valley course instructor. At the beginning of each course, the instructor will provide students with written attendance requirements. Pay close attention to these requirements as they may differ from attendance policies in high school. Failure to follow attendance requirements will negatively affect a student's grade. Students who do not meet the attendance requirements as determined by the instructor may be involuntarily removed from the course. Students who fail to attend the first scheduled class meeting or who fail to contact the instructor regarding absence before the first scheduled class meeting, may, at the option of the instructor, be removed from the course. A dual enrollment student follows the KVCC academic school calendar and is expected to be at every scheduled class session. This includes attendance during high school spring break and other high school closure dates.

CANVAS

Canvas is the course management system where faculty can place course materials and record grades. Each student will have a Kalamazoo Valley login which will give access to all courses through Canvas. Here KVCC students should be able to monitor grades, find instructional materials, take assigned quizzes and upload required work. Faculty use of Canvas may vary from course to course. CTE students are encouraged to log in weekly to keep track of his or her progress, however more frequent log in times may be required for certain classes.

FERPA

Family Educational Rights to Privacy Act (FERPA) grants an eligible student the right of privacy for all education records. An eligible student is someone who has reached 18 years of age or who is attending an institution of post-secondary education. At Kalamazoo Valley Community College, FERPA rights for a dual enrolled student begin the day the student is first admitted and enrolled in a class at Kalamazoo Valley (regardless of age). FERPA rights do not apply to prospects or students who have been admitted but have not enrolled at Kalamazoo Valley. Under these rules, parent/guardians may attend a student's orientation and initial academic counseling session. Kalamazoo Valley instructors will only communicate with the student. Students should check their Kalamazoo Valley email account daily for important messages from instructors. Consequently, it is the student's responsibility, not the parent/guardian, to consult with the instructor regarding assignments, tests, and grades.

INCLEMENT WEATHER

Students follow KVCC, NOT local high school, weather related closures. Listen to local news outlets for information about Texas Township campus closures. The KVCC website provides information on how to receive campus closures through text messaging.

KVCC COMMUNICATION

Due to FERPA, KVCC instructors will communicate student progress only to the student. Postsecondary instructors do not initiate communication with parents or other third parties such as school counselors, principals, etc. Parents, counselors, and principals should call Diane Fort at 250-9316 with any questions. Students are asked to complete an authorization for release form to release limited information to an organization or individual (i.e. parent). The form can be found in this packet.

OPT-OUT OF RELEASING STUDENT INFORMATION

Kalamazoo RESA Career and Technical Education (CTE), occasionally showcase student achievements, successes and event participation through news articles and photo opportunities in school newspapers, local newspapers, course catalogs, Kalamazoo RESA websites, as well as other educational and promotional efforts. Information used may include student's name, photo, home school, grade level, activities/awards and enrolled program. Kalamazoo RESA CTE may ask students to participate in written surveys to evaluate and improve CTE programming. Surveys are voluntary and anonymous. Also, Kalamazoo RESA CTE provide student directories to colleges for articulation (college credit) purposes. This information may include student's name, address, telephone number, date of birth, home school, CTE enrolled program and grade. Parents wishing to opt a student out of news articles, photo opportunities, surveys and/or directory listings should contact Kalamazoo RESA EFA and/or CTE in writing to request omission by the 4th Friday of the class. Cameron Buck, Career & Technical Education Director, 1819 E Milham, Portage, MI 49002, cameron.buck@kresa.org.

STUDENT SUCCESS CENTER AND SPECIAL SERVICES

As a new college student, you will be responsible for advocating for yourself to access special services and college resources that may be needed to be successful at KVCC. Neither your high school, nor your parents, can initiate this communication for you. **The Student Success Center**, located in room 9300 (Texas Township Campus), brings together campus services to help students navigate through the college experience. From academic and career counseling to tutoring, mentoring and more than 20 different clubs and activities, the Student Success Center has something for everyone. Special Education and 504 plans are not applicable at the college level,

however other services may still be available. Students currently eligible for accommodations and services in high school must register with Kalamazoo Valley's Office for Student Access in Room 2220 on the Texas Township Campus to receive academic support in college-level courses. For more information, call 269-488-4397, TTD 269-488-4358.

TEXTBOOKS

CTE will purchase the required textbook(s) and loan them out for student use. All textbooks, not purchased by students, are to be returned to the instructor on the last day of each semester in useable condition. Students are liable for lost or unusable textbooks. High schools will be notified to place a HOLD on diplomas until any liability is cleared. If you need to replace a textbook, used textbooks, deemed as in reasonable condition, by CTE, are acceptable, provided the textbook is the same publisher's edition issued to you.

TRANSCRIPTS, GRADES and CREDITS

Students have the option of earning both high school and college credit for successfully passing dual enrolled courses. Local high schools set the number of high school credits awarded for each class. For each course, the KVCC transcript grade will be reported to the high school at the end of the corresponding KVCC semester. **It is extremely important to take your dual enrolled course seriously. CTE dual enrolled course grade(s) will go on your official college transcript! If you do not pass fall term, you are not eligible to continue for winter term.**

Dental Assisting Grading Scale

A	4.0	Outstanding	100-96
A/B	3.5	Much better than average	95-92
B	3.0	Better than average	91-88
B/C	2.5	Slightly better than average	87-84
C	*2.0	Average	83-80
F	0	Failing	79 or below
*Students need to earn a grade of 2.0 GPA, or higher, to continue with dual enrollment through the Dental Assisting program.			

Changing or Dropping an CTE dual enrolled course

Dual enrolled CTE students are enrolled in their program through the high school and through KVCC. To register, withdraw, or DROP a course, a student needs to communicate enrollment change with the high school AND KVCC Admissions, Registration and Records Office (My Valley Account on the KVCC website). **A student who does not properly drop or withdraw from KVCC will have a failing grade of 0.00 entered on his/her permanent college record.**

TUITION and CLASS FEES

CTE covers tuition and class fees associated with enrollment in this program. If you receive communication from KVCC that your tuition and/or fees are due, please contact Diane Fort in the CTE office at 269-250-9316. **If at any time you decide not to enroll in this program, immediately notify your high school and CTE. You will need to drop the college course correctly through KVCC.**

<i>Tentative out of pocket student expenses</i>	
Scrubs (<i>maroon</i>)	White shoes
<i>Expenses CTE covers</i>	
Tuition AND fees (approx. \$1800)	Textbooks (approx. \$200)
Live Scan Fingerprinting (\$60)	Name tag approx. \$10
Drug testing (date TBD) approx. \$25	

The instructor will go over program expectations, in detail, during the first week of class.

PSEO FORM

Students need to complete a Postsecondary Enrollment Options (PSEO) Tuition, Transcript, and Authorization form allowing a high school student to take classes at KVCC. The PSEO form also directs KVCC to invoice CTE for the student's dual enrolled credits. Further explanation about this document will take place during the program orientation.

KVCC REGISTRATION INSTRUCTIONS

Login to System

1. **My Valley**
2. **Username** (example: jsmith1234) 1st initial, max 11 letters of last name, last 4-digits of your Valley Number
3. **Password**
4. **Login**

Account Setup

The first time you log into My Valley you must set up a new account and establish a password. To set up your KVCC account, please visit www.kvcc.edu/new or click on the New Account Setup link in the My Valley login box. You will be asked to enter the single-use New Account Code (NAC) and Username provided in your acceptance letter. (Note: Alternate options may be available to you on the new account setup page if you do not have your NAC.) If you need assistance, please bring a photo ID (Driver's License, State ID card or Valley ID card) to the Admissions, Registration and Records office, RM 9140 or the Student Service Center at Anna Whitten Hall.

Register or Add a Class

Note: Some courses have required or recommended prerequisites. Please review the course description before registering to see if your course has a prerequisite.

1. My Links: Register or Drop Classes
2. Select a term from drop down menu
3. **Submit Term**
4. There are three ways to register:
 - Specific course: Enter a CRN in any of the fields provided in the Add Class worksheet. (Entering a CRN on the worksheet does not reserve a seat until you submit them).
 - Search for a course: See instructions below.
 - Waitlist: Select Register from the Action Menu available next to the waitlisted course.
5. **Submit Changes** After reviewing course availability, the system will post courses you successfully registered for on your **Current Schedule**. Error messages for courses that cannot be added will show below the current schedule. For example, cancelled classes will show the error "Course is not available for registration at this time."
6. **Tuition Bill** at bottom of page Note: Print this screen for your tuition bill.
7. **Concise Schedule** to print a copy of your class schedule.
8. Exit and Close to return to My Valley where you can continue or Logout.



MARIJUANA (THC) IS
LEGAL IN MICHIGAN
**BUT NOT IN KALAMAZOO
VALLEY COMMUNITY COLLEGE'S
HEALTH CAREERS PROGRAMS.**

Students will be drug tested periodically throughout their program. Marijuana or THC, **in any form**, is not acceptable in any Health Careers program. If the drug screen panel is positive for THC, the student will be required to withdraw immediately from their Health Careers program for at least one full semester. A medical marijuana card does NOT constitute a legitimate prescription.

If you have questions about the policy, please contact the Health Careers Admissions Coordinator at healthcareers@kvcc.edu.

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IMMUNIZATION / DIAGNOSTIC FORM – Required after program acceptance

(To be completed by the Examining Provider)

Name: _____
Last
First
Middle

Valley ID #: V00 _____ Program: _____

Address: _____

Phone: _____ Birthdate: _____

Healthcare Provider: _____ Address: _____

Immunizations

Documentation of adequate immunity to Rubeola, Mumps, Rubella, Tetanus/Diphtheria/Pertussis, Chicken Pox, TB, Flu and Hepatitis B is required. This documentation must be verified. Acceptance into the program may be denied on the basis of incomplete immunizations, information or findings.

1. MMR* (Measles/Mumps/Rubella): Full immunity must be demonstrated in one of two ways.

Check appropriate box and specify date(s):

A. Immunized **twice** with MMR vaccine: **First** _____ / _____ / _____ **Second** _____ / _____ / _____
Month Day Year
Month Day Year

B. **Attach** lab report documenting adequate immune titer.
 Specify date of titer:

Measles (Rubeola) _____ / _____ / _____
Month Day Year

Mumps _____ / _____ / _____
Month Day Year

Rubella (German measles) _____ / _____ / _____
Month Day Year

2. CHICKEN POX* (Varicella): Full immunity must be demonstrated in one of three ways.

Check appropriate box and specify date(s).

A. Immunized **twice** with chicken pox: **First** _____ / _____ / _____ **Second** _____ / _____ / _____
Month Day Year
Month Day Year

B. **Attach** lab report documenting adequate immune titer. Date of titer: _____ / _____ / _____
Month Day Year

C. Had Chicken Pox **confirmed by physician record:** _____ / _____ / _____
Month Day Year

*The TB test may be given on the same day as live virus vaccines (Chicken Pox and MMR).
 Otherwise, the TB skin test should be delayed for **30 days** after receiving either of these vaccines

Name: _____ Program: _____ Valley ID #: V00 _____

3. TDAP - TETANUS/DIPHtherIA/PERTUSSIS: Full immunity to Tetanus/Diphtheria/Pertussis must be demonstrated.

- Tetanus/Diphtheria/Pertussis immunization has been administered within the last **10 years**. Indicate date of immunization:

_____/_____/_____
Month Day Year

4. HEPATITIS B: Full immunity must be demonstrated in one of two ways.

Check appropriate box and specify date(s).

- A. Has begun/completed the series of three immunizations:
(Attach documentation for each immunization)

First ____/____/_____
Month Day Year

Second ____/____/_____
Month Day Year

Third ____/____/_____
Month Day Year

- B. **Attach** lab report documenting adequate immune titer.
Specify date of titer:

_____/_____/_____
Month Day Year

6. INFLUENZA VACCINE (Sept.- May): All Health Careers Students are required to receive an **annual** flu vaccination.

- Indicate date of last immunization:

_____/_____/_____
Month Day Year

Provider completed, conducted, reviewed and/or verified all sections of the immunization form:

Signature of Provider

Date

Provider's Name

Provider's Office Phone

2-STEP TB FAQ's

What is a 2-step TB skin test (TST)?

- Tuberculin Skin Test (TST) is a screening method developed to evaluate an individual's status for active Tuberculosis (TB) or Latent TB infection.
- A 2-Step TST is recommended for initial skin testing of adults who will be periodically retested, such as healthcare workers.
- A 2 step is defined as two TST's done within 1 month of each other.

What is the procedure for 2-step TB skin test?

Both step 1 and step 2 of the 2 step TB skin test must be completed within 28 days. See the description below.

STEP 1

Visit 1, Day 1

- Administer first TST following proper protocol
- A dose of PPD antigen is applied under the skin

Visit 2, Day 3 (or 48-72 hours after placement of PPD)

- The TST test is read
- Negative - a second TST is needed. Retest in 1 to 3 weeks after first TST result is read.
- Positive - consider TB infected, no second TST needed; the following is needed:
 - A chest X-ray and medical evaluation by a physician is necessary.
 - If the individual is asymptomatic and the chest X-ray indicates no active disease, the individual will be referred to the health department.

STEP 2

Visit 3, Day 7-21 (TST may be repeated 7-21 days after first TB skin test is read)

- A second TST is performed - another dose of PPD antigen is applied under the skin

Visit 4, 48-72 hours after the second TST placement

- The second test is read.
- Negative - consider person not infected.
- Positive - consider TB infection in the distant past.
 - The individual is referred for a chest X-ray and evaluation by a physician. An asymptomatic individual whose chest X-ray indicates no active disease will be referred to the health department.

INFLUENZA VACCINE FORM
(To be completed by the Examining Provider)

Name: _____
Last First Middle

Valley ID #: V00 _____ Program: _____

INFLUENZA VACCINE: All Health Careers students are required to receive annual flu vaccination. Flu vaccination must be demonstrated by:

1. The completion of this form by your health care provider
OR
2. A copy of the flu vaccination pharmacy receipt showing the student name, vaccine and date
OR
3. By providing a copy of your [MCIR – Michigan Care Improvement Registry](https://mdhhs.mimmsportal.state.mi.us) (mdhhs.mimmsportal.state.mi.us):

1. **Influenza Vaccine received:** _____ / _____ / _____
Month Day Year

Provider completed, conducted, reviewed and/or verified all sections of the Influenza Vaccine Form:

Signature of Provider

Date

Print Provider's Name

Provider's Office Phone

02/22/22

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COVID-19 VACCINE FORM
(To be completed by the Examining Provider)

Name: _____
Last First Middle

Valley ID #: V00 _____ Program: _____

COVID 19 VACCINE: Full vaccination series for COVID-19 must be demonstrated one of three ways or by providing a copy of your [MCIR – Michigan Care Improvement Registry](https://mdhhs.mimmsportal.state.mi.us) (mdhhs.mimmsportal.state.mi.us):

A. **Pfizer Vaccine**

Directions: Two vaccines given 3 weeks (21 days) apart.

First _____
Month / Day / Year

Second _____
Month / Day / Year

Booster (if received) _____
Month / Day / Year

B. **Moderna Vaccine**

Directions: Two vaccines given 4 weeks (28 days) apart.

First _____
Month / Day / Year

Second _____
Month / Day / Year

Booster (if received) _____
Month / Day / Year

C. **Johnson & Johnson's Janssen Vaccine**

Directions: One vaccine.

First _____
Month / Day / Year

Booster (if received) _____
Month / Day / Year

Provider completed, conducted, reviewed and/or verified all sections of the COVID 19 Vaccine Form:

Signature of Provider

Date

Print Provider's Name

Provider's Office Phone

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PHYSICAL EXAMINATION FORM

(To be completed by the Examining Provider)

Name: _____
Last First Middle

Valley ID #: V00 _____ Program: _____

Physical Examination - Describe All Abnormalities:

THE TYPICAL DEMANDS PLACED ON A HEALTH CAREER STUDENT AND PRACTITIONER ARE:

- **STRENGTH** - Frequently and repetitively perform physical activities requiring ability to push/pull objects of more than 50 pounds and to transfer objects of more than 100 pounds.
- **MANUAL DEXTERITY** - Constantly perform simple gross motor skills such as standing, walking, handshaking, writing, and typing; and complex fine motor manipulative skills such as insertion of IV lines, calibration of equipment, drawing blood, endotracheal intubation, etc.
- **COORDINATION** - Constantly perform gross body coordination such as walking, filing, retrieving equipment; tasks which require eye-hand coordination such as keyboard skills, and tasks which require arm-hand steadiness such as taking B/Ps, calibrating tools and equipment, holding retractors, probing periodontal spaces, etc.
- **MOBILITY** - Constantly perform mobility skills such as walking, standing, prolonged standing or sitting in an uncomfortable position; move quickly in an emergency and maneuver in small spaces; requires frequent twisting and rotating.
- **VISUAL DISCRIMINATION** - Constantly see objects far away, discriminate colors, and see objects closely as in reading faces, dials, monitors, fine small print, etc.
- **HEARING** - Constantly hear normal sounds with background noise and distinguish sounds. Some examples include conversations, monitor alarms, emergency signals, breath sounds, cries for help, heart sounds, etc.
- **CONCENTRATION** - Consistently concentrate on essential details even with interruptions, such as client requests, IVAC's, alarms, telephones ringing, beepers, conversations, etc.
- **ATTENTION SPAN** - Frequently attend to task/functions for periods exceeding 60 minutes in length with interruptions such as those mentioned above.
- **CONCEPTUALIZATION** - Consistently understand, remember, and relate to specific and generalized ideas, concepts, and theories generated and discussed simultaneously.
- **MEMORY** - Remember task/assignments given to self and others over both short and long periods of time as well as significant amount of patient data with interruptions and distractions.
- **CRITICAL THINKING** - Critical thinking skills sufficient for clinical judgment: making generalizations, evaluations, or decisions.
- **COMMUNICATION** - Interact with others in non-verbal, verbal and written form and explain procedures, initiate health teaching, and document care. Must be able to read, write, and understand written English.
- **STRESS** - Perform all above skills and make clinical judgments correctly when confronted with emergency, critical, unusual, or dangerous situations.

Summary Assessment - Circle Appropriate Responses: (Attach a separate sheet if necessary)

Considering this applicant's history and physical examination, are there any conditions, disabilities (including but not limited to communicable diseases which may be transmitted to others as a result of the applicant's participation in the college's Health Career Educational Program), or limitations that could restrict the student's participation in a Health Career educational program or limit subsequent employability?

Yes No Explain: _____

Are there any accommodations necessary for this applicant?

Yes No Explain: _____

Are there any special precautions, restrictions or conditions which might result in an emergency (e.g., allergies, diabetes, seizure disorder, fainting, other) in the classroom or during clinical practice?

Yes No Explain: _____

Provider completed, conducted, reviewed and/or verified all sections of the physical exam form.

Signature of Provider

Date

Print Provider's Name

Provider's Office Phone

11/9/21

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Turn in this page at orientation or at the latest by June 1, 2022 to Diane Fort at diane.fort@kresa.org.

I received a copy of the CTE Dual Enrollment Guidelines and reviewed them. By signing below, I acknowledge understanding the requirements for successful completion of this program. **I understand if I do not pass each sequential course with a 2.0 GPA, I will not be eligible to continue in the Dental Assisting program.**

Student name (printed): _____

Student signature: _____

By signing below, I acknowledge understanding the requirements for successful completion of this program.

Parental/Legal Guardian name (printed): _____

Parental/Legal Guardian signature: _____

Date: _____

Summer Contact Information (please print legibly)

KVCC email: _____ @mail.kvcc.edu Valley ID #: **V00** _____
 (Plan to check this on a regular basis, beginning with your acceptance. KVCC & CTE will communicate with you through this email.)

Student Cell Number: _____ Parent/Guardian Phone Number: _____

Mailing Address: _____

I have applied and been accepted to KVCC: Yes ___ No ___

I have ACT/Accuplacer/Aleks/NG Accuplacer/SAT scores on file with CTE and KVCC, meeting minimum requirements:
 Yes ___ No ___

I have submitted a signed FALL PSEO form to CTE staff: Yes ___ No ___

I have submitted Authorization for Release of Information High School Dual Enrollment: Yes ___ No ___

If you answered NO to any of the above statements, please explain why:

Notice of Non-discrimination:

It is the policy of Kalamazoo Regional Educational Service Agency that no discriminating practices based on race, color, national origin, sex (including sexual orientation or sexual identity), disability, age, religion, height, weight, marital or family status, military status, ancestry, genetic information or any other legally protected category be allowed during any program, activity, service or in employment. The following positions at Kalamazoo RESA have been designated to handle inquiries regarding the nondiscrimination policy: Assistant Superintendents — Tom Zahrt and Mindy Miller. Contact information: (269) 250-9200, 1819 E. Milham Ave, Portage, MI 49002.

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Postsecondary Enrollment Options (PSEO)

Tuition and Transcript Authorization

Student		
Valley number V	Last name	First name

Eligible Courses								
Semester: <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Summer Year: _____					Program: <input type="checkbox"/> Early College <input type="checkbox"/> Dual enrolled			
5-digit CRN	Subject	Course Number	Course Title	Contact Hours	Credit Hours	Earn Credit for:		
						KVCC	High School	Both
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prerequisite courses and SAT or Accuplacer placement test score levels are enforced as listed in course descriptions. Your choice for earning credit is final once the course begins. Courses taken under the PSEO act may not be audited.

High School	
Name	
<div style="display: flex; justify-content: space-between;"> Send invoice to: Send official transcript to: (if different) </div>	
Attention	
Address	
Telephone	
E-mail	
<input type="checkbox"/> Bill Michigan Department of Education (<i>nonpublic school</i>)	Student's UIC (<i>nonpublic school</i>)

Payment Authorization	
<p>The high school will pay Kalamazoo Valley for the cost of tuition and fees for eligible courses, or any remaining balance not paid by the Michigan Department of Education for nonpublic schools.</p>	
Principal/Counselor's signature (CTE to sign)	Date

Transcript Authorization	
<p>I authorize Kalamazoo Valley to send my official transcript to the high school listed above for transfer credit purposes.</p>	
Student's signature	Date

Early College
dcoates@kvcc.edu
269.488.4509 p
269.488.4458 f

Financial Services
accountsreceivable@kvcc.edu
269.488.4162 p
269.488.4555 f
Note: Send completed forms here.

Admissions, Registration & Records
arr@kvcc.edu
269.488.4281 p
269.488.4161 f

Enrollment Management
enrollment@kvcc.edu
269.488.4303

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Authorization for Release of Information High School Dual Enrollment

The Family Educational Rights and Privacy Act (FERPA) is a Federal law that protects the privacy of eligible students' education records. (An "eligible student" under FERPA is a student who is 18 years of age or older or who attends a postsecondary institution.) Directory Information, including a student's name, address, telephone numbers, date of birth, enrollment status, enrollment dates, major and degrees earned, may be shared without consent unless the student has placed a confidential hold on their records.

Kalamazoo Valley Community College will not release information, other than directory information, without an Authorization for Release of Information signed by the student, unless it is expressly allowed within the act. Even with this authorization, Kalamazoo Valley is not required to release any information. Upon request of the designated individual or organization, Kalamazoo Valley will use discretion when determining what information may be released.

Information will only be released to authorized parents or individuals in person with photo ID or by written request. Based on established relationships and allowances within FERPA, communication with high school personnel and college coordinators will occur via their identified contact methods or address. Only the most recently signed authorization will be honored. Your authorization will remain effective for the dates you specify up to a maximum of one year or until you submit a written request to terminate this release authorization.

Student's Identification		
Name: _____		
First	Middle Initial	Last
Valley Number: <u> V </u> If Valley Number is unknown, provide your birth date: _____		
Reason for Disclosure		
<input type="checkbox"/> Participation in the Postsecondary Enrollment Options Act (PSEO)		
Information to be Released		
<input type="checkbox"/> All Educational Records (including, but not limited to, the items listed below)		
Or, specify individual records: (check all that apply)		
<u>Enrollment</u>	<u>Grades</u>	<u>Financial</u>
<input type="checkbox"/> Class Schedule	<input type="checkbox"/> Grade Point Average (GPA)	<input type="checkbox"/> Tuition, fees, payment and refunds
<input type="checkbox"/> Number of credit hours enrolled in	<input type="checkbox"/> Grades	<input type="checkbox"/> Tuition Bill (includes class schedule)
<input type="checkbox"/> Program of Study Plan	<input type="checkbox"/> Unofficial Transcript	
<input type="checkbox"/> Other: _____		
Effective Dates of Authorization		
<input type="checkbox"/> Valid for one academic year beginning April 1, 20 <u> 21 </u> and ending with reporting PSEO participation to the State June 30 the following year.		
<input type="checkbox"/> Valid from this date: _____ to this date: _____		
Note: The period cannot exceed one year.		
Student's Authorization		
I authorize Kalamazoo Valley Community College to release the specified information to the individual or organization identified. This release remains in effect for the period defined above or until I provide a signed termination letter to the Kalamazoo Valley Admissions, Registration and Records office prior to that expiration date.		
Signature: _____		Date: _____

Please indicate on the back of this form to whom the information can be released.

High School Authorization

Authorization allows KVCC faculty and staff to communicate with your high school principal, counselor or business/finance office representatives to provide appropriate support services, program evaluation, and grade reporting requirements. E-mail addresses are provided solely for the exchange of information that does not contain personally identifiable information from your education record, unless the message is encrypted or the confidential information is in a secured attachment.

Kalamazoo County Schools:

- | | | |
|---|---|---|
| <input type="checkbox"/> Climax-Scotts High School
Ph: 269-746-2300
@cssschools.net | <input type="checkbox"/> Loy Norrix High School
Ph: 269-337-0200
@kalamazoopublicschools.net | <input type="checkbox"/> Portage Northern High School
269-323-5400
@portageps.org |
| <input type="checkbox"/> Comstock High School
Ph: 269-250-8700
@comstockps.org | <input type="checkbox"/> Kalamazoo Central High School
Ph: 269-337-0300
@kalamazoopublicschools.net | <input type="checkbox"/> Schoolcraft High School
269-488-7350
@schoolcraftschools.org |
| <input type="checkbox"/> Galesburg-Augusta High School
Ph: 269-484-2010
@gacsnet.org | <input type="checkbox"/> Parchment High School
269-488-1100
@parchment.k12.mi.us | <input type="checkbox"/> Vicksburg High School
269-321-1100
@vicksburgschools.org |
| <input type="checkbox"/> Gull Lake Community Schools
Ph: 269-548-3500
@gulllakecs.org | <input type="checkbox"/> Portage Central High School
269-323-5200
@portageps.org | |

Van Buren County Schools:

- | | | |
|--|--|---|
| <input type="checkbox"/> Bangor High School
269-427-6844
@bangorvikings.org | <input type="checkbox"/> Gobles High School
269-628-9347
@gobles.org | <input type="checkbox"/> Mattawan High School
269-668-3361
@mattawanschools.org |
| <input type="checkbox"/> Bloomingdale High School
269-521-3917
@bdalecards.org | <input type="checkbox"/> Hartford High School
269-621-7000
@hpsmi.org | <input type="checkbox"/> Paw Paw High School
269-415-5611
@ppps.org |
| <input type="checkbox"/> Covert High School
269-764-3700
@covertps.org | <input type="checkbox"/> Lawrence High School
269-674-8232
@lawrencetigers.com | <input type="checkbox"/> South Haven High School
269-637-0507
@shps.org |
| <input type="checkbox"/> Decatur High School
269-423-6853
@raiderpride.org | <input type="checkbox"/> Lawton High School
269-624-7806
@lawtoncs.org | |

Other: _____ Ph: _____ E-mail: _____

PSEO College Coordinators

Authorization allows Kalamazoo Valley faculty and staff, school district representatives who coordinate with the high schools, and the high schools to exchange information and communicate with each other to provide appropriate support services and program evaluation.

- | | | |
|--|------------------|--------------------|
| <input type="checkbox"/> Kalamazoo Regional Educational Service Agency (KRESA) | Ph: 269-250-9200 | E-mail: @kresa.org |
| <input type="checkbox"/> Van Buren Intermediate School District (VBISD) | Ph: 269-674-8001 | E-mail: @vbisd.org |
| <input type="checkbox"/> Other: _____ | Ph: _____ | E-mail: _____ |

Parent or Individual Being Authorized

Parent's name(s) _____

FERPA permits Kalamazoo Valley 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.

- I certify that my parent(s) claim me as a dependent for federal income tax purposes.
 I am authorizing my parent(s) even though I am not a dependent for tax purposes, or I do not know if I am.

Individual's name _____

Relationship: _____