

# **Eye Care Assistant Program Application**

Application Deadline: June 11, 2021

#### Dear Prospective Student:

Thank you for your interest in the Eye Care Assistant program at Wallace Community College-Dothan. Please read all information carefully.

A checklist is included in this packet to help ensure that you have met all admission requirements and have submitted all required documentation. Application packets must be complete at the time of submission. Incomplete application packets will be disqualified.

For questions regarding the program, please contact the Workforce Development Office at (334) 556-2414 or via email <a href="mailto:sblackmon@wallace.edu">sblackmon@wallace.edu</a>.

#### **General Information**

- 14-week program
- Classes meet Monday and Wednesday from 6:00 p.m. to 8:30 p.m. at Eye Center South.
- The cost of the course is \$1,675 due at time of acceptance into program.
- The course fee is inclusive of all materials, supplies, and textbooks.
- **WIOA approved** students should apply at their local Career Center to determine eligibility.
- The maximum class capacity is 16 with a minimum class size of 6.
- This is a certificate course. Students may apply for the Certified Ophthalmic Assistant (COA) Exam after completing this course <u>and</u> after working with a physician for a total of six months.
- We do **not** provide job placement services.
- Students will receive a certificate upon successful completion (skills check-off portion) of the program.



## **Eye Care Assistant Program Application Checklist**

Last Name	First Name
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All required documents must be submitted with a completed application packet. <u>Incomplete application packets will not be considered in the application process.</u>

Application deadline: June 11, 2021

<b>~</b>	Application Requirements	
	<b>Completed</b> application form for the Eye Care Assistant program. All forms must be complete and signed, where requested.	
	Attached copy of a photo IDcan be driver's license, military ID, or school ID.	
	Attached copy of proof of High School Diploma or High School Equivalency (GED).	

Classes for the Eye Care Assistant program are only offered in Dothan; however, applications may be submitted via:

Mail: Wallace Community College

Workforce Development Office Attn: Eye Care Assistant Program

1141 Wallace Drive Dothan, AL 36303

In Person: Wallace Community College

Workforce Development Office

Gary Hall Bldg. 401

S. Barnes-Blackmon - Office 140-F



acceptance.

### Eye Care Assistant Program Application

Received By:		
and submission location	the applicant to submit a <b>compl</b> os are listed on the Application	eted application packet. Mailing information Checklist for this application. Applications 11, 2021. No applications will be accepted
I. PERSONAL DATA		
Last Name:	First:	MI: Maiden: Maiden:
Social Security Number:	Email:	
Mailing Address:		
City:	State:	Zip Code:
Home Phone:	Work Phone:	Cellular Phone:
Male: Female	: Race:	Date of Birth:
II. EDUCATION		
High School Graduation Yea	ar: High School Name:	
GED or Equivalent (if application	able): Yes No	Date Completed:
Are you currently taking college courses? Yes No If yes, what college?		
does not in itself guarar this application must be class. I certify that the i that providing false info	ntee admission to the Eye Care e resubmitted if I am not select information given in this applic	omponent of the student profile and e Assistant program. I also understand ted for the <u>September 2021</u> cation is true and correct. I understand cient reason to dismiss a student and/or
Signature		Date
**Admission to the eye	care assistant program is com	petitive, and the number of students is

limited by the number of faculty available. Meeting minimal requirements does not guarantee