

HCI College  
1764 N. Congress Ave. 203  
West Palm Beach, FL 33409  
561.586.0121  
www.HCI.edu



HCI College  
1201 W Cypress Creek Rd. 101  
Fort Lauderdale, FL 33309  
954.626-0255  
www.HCI.edu

### APPLICATION FEES

**ASN, Paramedic, Medical Assisting, Veterinary Assisting, RN-BSN - \$50.00**

**EMT, ASEMS, - \$150.00**

#### Please Choose Program:

- Emergency Medical Technician** (Diploma, 4 Months, 300 Clock Hours, 12 Credits) WEST PALM BEACH & FORT LAUDERDALE
- Paramedic** (Diploma, 12 Months, 1,112 Clock Hours, 45 Credits) WEST PALM BEACH & FORT LAUDERDALE
- Emergency Medical Services** (AS Degree, 24 Months, 60 Credits) WEST PALM BEACH
- Veterinary Assisting** (Diploma, 10 Months, 720 Clock Hours, 36 Credits) WEST PALM BEACH & FORT LAUDERDALE
- Nursing** (ASN Degree, 24 Months, 72 Credits) WEST PALM BEACH & FORT LAUDERDALE
- RN to BSN** (BSN Degree, 12-24 Months, 120 Credits) WEST PALM BEACH
- Medical Assisting** (Diploma, 10 Months, 855 Clock Hours, 36 Credits) FORT LAUDERDALE

### Applicant Information

**Name:** \_\_\_\_\_  
LAST FIRST MIDDLE

**Address:** \_\_\_\_\_  
NO. & STREET CITY STATE ZIP

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
AREA CODE

**Social Security #:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ **Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
MONTH DAY YEAR

**Citizenship:**  
 U.S Citizen  Permanent Resident  M-Visa Student  Other - Home Country: \_\_\_\_\_

**Race (Optional)**  
 American Indian/Alaska Native  Asian  Black/African-American  Hispanic/Latino  
 Native Hawaiian/Pacific Islander  White  Other/two or more  Race Ethnicity Unknown  
**Gender:**  Male  Female

### Education

**Highest Education Level Completed:**  
 General Education Diploma (GED)  2 Year College  
 High School Diploma  Bachelor's Degree or Higher  
 Some College

**Name of High School:** \_\_\_\_\_ **County:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
NO. & STREET CITY STATE ZIP

## Education (cont'd)

Will you be requesting a review of transfer credits?  Yes  No

Name of College 1: \_\_\_\_\_ County/State: \_\_\_\_\_

Name of College 2: \_\_\_\_\_ County/State: \_\_\_\_\_

## Work History

### Certifications in State of Florida:

Fire Certification #: \_\_\_\_\_  EMT Certification #: \_\_\_\_\_

Paramedic Certification #: \_\_\_\_\_  LPN #: \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor?  Yes  No

If yes, please explain: \_\_\_\_\_

Have you ever been **enrolled** in a healthcare program? (EMT, Paramedic, Nurse, CNA, Fire Fighter, Medical Assistant, Home Health Aide, etc.)  Yes  No

Program Name: \_\_\_\_\_ School Name: \_\_\_\_\_

Have you ever **worked** in healthcare? (EMT, Paramedic, Nurse, CNA, Fire Fighter, Medical Assistant, Home Health Aide, etc.)  Yes  No

Job Title: \_\_\_\_\_

Present Employer: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

## Program Goal

### Why are you interested in attending HCI College? (Check all that apply)

Career Advancement  Personal Enrichment  Better Pay  In Demand Job

Other: \_\_\_\_\_

## Media Release

Help us to promote your school. I authorize HCI College, to use the following information: (1) My picture - including photographic, motion picture, and electronic (video) images. (2) My voice - including sound and video recordings in print and online media and waive the right to receive any payment.

OPT-OUT

Applicant Printed Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## HCI Administrative Use Only

Admissions Signature: \_\_\_\_\_ Date: \_\_\_\_\_