



Great Bay
Community College

Application for Admission
to the
Medical Office Specialist Certificate Training Program

Application Purpose and Guidelines:

The purpose of this application is to document the skill set of the Medical Office Specialist Certificate Training candidate. This enables the Selection Committee to properly assess each candidate's skills, abilities, background and motivation to succeed. Our goal is to select candidates who will be successful in the program and become competitive for employment.

Submit the Completed application and supporting documents* to:

Kim Hashem-Dugal
Great Bay Community College
Business & Training Center
320 Corporate Drive
Portsmouth, NH 03801

Required documentation:

1. High School Diploma, GED or HiSet
2. Resume

The Selection Committee will review the completed application and supporting documentation and interview the candidates. Interviews will be conducted when all required documentation has been received.

The selection process will consider:

- Candidates who are 18 years or older.
- Candidates who have a desire to work in the medical field
- Candidates who will commit to an intense twelve-week/240-hour program of instruction.

Application Information: MOS

Please indicate the class for which you are applying (start date):

Name: _____
First Middle Last

Address: _____
Street Town State Zip Code

Telephone: _____
Primary: _____ ☐ Cell ☐ Home ☐ Work

Secondary: _____ ☐ Cell ☐ Home ☐ Work

Preferred Email: _____ @ _____

Date of Birth: _____ Are you a US Citizen/Permanent Resident: ☐ Yes ☐ No

Social Security # _____

Workforce Opportunity Act, a Federal grant, requires that we obtain information from students. The use of your social security number is requested in order to access wage and employment information through the state Unemployment Insurance wage information database. You cannot be denied service for failure to provide your social security number although we strongly encourage you to do so in order to enable the program to determine employment-related outcomes. Your personal information will be kept confidential and secure and will not be shared with any outside agencies other than New Hampshire Employment Security. By signed, you agree to participate in this initiative.

In a medical emergency please contact:

Name: _____
First Middle Last

Address: _____
Street State Zip Code

Educational History

High School Last Attended: LAST NAME while at school _____

School Name _____ City _____ State _____ Zip _____

Year of High School Graduation _____ or Year G.E.D./HiSet Awarded _____

Post-Secondary Education:

School Name _____ City _____ State _____ Zip _____

Year of Graduation _____ or Dates of Attendance _____

Last Name While in High School (or GED/HiSet) _____

Employment History

1. Employer _____ City _____ State _____ Zip _____

Dates of employment _____

Summary of Responsibilities:

2. Employer _____ City _____ State _____ Zip _____

Dates of employment _____

Summary of Responsibilities:

Reference

Name:

_____ First _____ Last _____

Organization _____ Relationship: _____

Address:

_____ Street _____ State _____ Zip Code _____

Telephone _____ Email _____

Signature of Applicant:

_____ Date _____

Notice of Non-Discrimination

Great Bay Community College does not discriminate in the administration of its admissions and educational programs, activities, or employment practices on the basis of race, color, religion, national origin, age, sex, disability, genetic information, veteran status, sexual orientation, political affiliation or marital status. This statement is a reflection of the mission of the Community College System and Great Bay Community College and refers to, but is not limited to, the provisions of the following laws: Title VI and Title VII of the Civil Rights Act of 1964, as amended, the ~ The Age Discrimination Act of 1967 (ADEA) ~ Title IX of the Education Amendment of 1972 ~ Section 504 of the Rehabilitation Act of 1973 ~ The Americans with Disabilities Act of 1990 (ADA) ~ Section 402 of the Vietnam Era Veterans' Readjustment Assistance Act of 1974 ~ Genetic Information Nondiscrimination Act of 2008.