

Burlington County College Health Information Technology

Electronic Health Record (EHR) Certificate Program



**BURLINGTON
COUNTY COLLEGE**

We Can Get You There.

Application Packet

**Burlington County College
EHR Certificate Program/HIT
Parker Center Room 313
601 Pemberton Browns Mills Road
Pemberton, NJ 08068**

Contact: Lisa Ferrante at 609-894-9311 ext. 1093

Email Address: lferrant@bcc.edu

Fax: 609-894-4712

Program Admission Requirements include but are not limited to:

- Background, Education and/or Experience in Healthcare, Health IT and/or Information Technology Professions.
- Priority of Admission will be given to applicants with the aforementioned background and at least 6 months of existing experience.
- Current Resume detailing education and experience.
- Complete essay answering all three questions with proper grammar, spelling and punctuation.
- Basic computer skills, internet access and familiarity with Microsoft Office are required.
- Attendance at an Electronic Health Record Information Session is required.
- Attendance at the mandatory New Electronic Health Record Student Orientation on August 15, 2012 at 4pm, Parker Center, Pemberton Campus of Burlington County College is required if accepted into the program. Room location to be announced.
- Ability to attend all hybrid classes on the Pemberton Campus of Burlington County College during weekdays in the evening is required if accepted into the program.
- Applications are not complete and will not be reviewed if all items requested on the checklist (page 5) are not submitted
- **All complete applications must be submitted by July 24, 2012.**

EHR Certificate Program Application

Check which certificate you are interested in:

- Clinician/Practitioner Consultant or Implementation Manager
- Trainer

Name: _____
(Print) First Name MI Last Name

Address: _____

City: _____ ST _____ Zip _____

(Home) Phone Number: () _____

(Work) Phone Number: () _____

(Cell) Phone Number: () _____

Email Address: _____

BCC Student I.D. # (required): _____

BCC GroupWise Email Address (required): _____

***All communication with the HIT Department will be through BCC GroupWise email.**

Academic Data: *Please Note: Official transcripts must be sent to the Registrar*

College Name: _____ Degree _____

Major _____ Year of Graduation _____

Employment Data: *(Please do not provide any information above that you do not wish us to use.)*

Current Employer: _____

Address: _____

Job Title: _____

Job Responsibilities: _____

Dates of Employment _____

Work Telephone # _____ (Optional)

Previous Employer: _____

Address: _____

Job Title: _____

Dates of Employment _____

Job Responsibilities: _____

Burlington County College

Yes **No**

Have you ever been a BCC student?
 If yes, what program? _____

If accepted into this program will you be able to attend evening
 classes beginning as early at 5:00pm on the Pemberton Campus?

Information Session Attendance: (choose one)

<u>Date</u>	<u>Attended</u>	<u>Will Attend</u>
February 8, 2012	<input type="checkbox"/>	<input type="checkbox"/>
March 21, 2012	<input type="checkbox"/>	<input type="checkbox"/>
April 18, 2012	<input type="checkbox"/>	<input type="checkbox"/>
May 16, 2012	<input type="checkbox"/>	<input type="checkbox"/>
June 13, 2012	<input type="checkbox"/>	<input type="checkbox"/>
July 11, 2012	<input type="checkbox"/>	<input type="checkbox"/>

Resume

Yes **No**

Current resume detailing education and experience enclosed

Essay Questions:

IN ADDITION TO YOUR ADMISSION APPLICATION, PLEASE ATTACH RESPONSES TO ALL OF THE FOLLOWING QUESTIONS IN (TYPEWRITTEN) ESSAY FORMAT: Your Application will not be complete until received. Please limit your essay to no more than one typed page, 12 point font, and single spaced.

1. Why have you chosen to pursue a career in the Electronic Health Record Certificate Program and what have you identified as your career goals?
2. What is it about yourself that makes you an outstanding candidate for the Electronic Health Record Certificate program at Burlington County College?
3. What experience do you have that would relate to successful employment in Health IT?

Certification: I certify that the statements on this application are true and accurate to the best of my knowledge:

Applicant Signature: _____

Date: _____

Application Checklist

- Completed BCC application online
<https://www.bcc.edu/forms/adm/form.asp>
- Completed pages 3 and 4 of the E.H.R. Certificate Program Application
- Received BCC Student I.D. and BCC e-mail address after applying to Burlington County College (please note this BCC I.D.# and BCC e-mail address on your *EHR Application* in the space provided on pg. 3)
- Current Resume detailing education and experience
- Essay Attached
- Official copy of high school transcript or General Education Diploma (GED) sent to the Registrar's Office (not necessary if you have an advanced degree and are sending college transcripts)
- Official copy of college transcript from any college previously attended

Official Transcripts should be submitted to:

*Registrar's Office
Burlington County College
601 Pemberton Browns Mills Road
Pemberton, NJ 08068*

- Completed EHR Certificate Program Application submitted:

Faxed to: Lisa Ferrante at 609-894-4712

Scanned and emailed to: Lisa Ferrante at LFerrant@BCC.edu (note there is no "E" at end)

Hand delivered to: Lisa Ferrante at address below:

Mailed to: (least preferred method)
Burlington County College
EHR Certificate Program/HIT
Parker Center Room 313
601 Pemberton Browns Mills Road
Pemberton, NJ 08068