

Enrollment Now Going On For:

Nurse Assistant Training Program

Day and Evening Sessions Available

Day Class	Evening Class
November 23, 2026- January 13, 2027	**November 23, 2026- January 13, 2027**
THEORY - - Mon.- Tues.-Wed.- Fri. – 9:00am – 2:30pm	**THEORY -** - Mon.-Tues. – 5:00pm – 10:00pm - Sat. and Sun.- 7:00am – 3:30pm
CLINICAL- - Mon.-Tues. - Wed.-Fri. 7:00am – 3:30pm	**CLINICAL -** - Mon. - Tues. – 5:00pm - 8pm - - Sat. and Sun.-7:00am – 3:30pm

Orientation: **November 17, 2026 – Tuesday:** **Day Class – 10:00 am -12:00pm**
Evening Class - 5:00pm-7:00pm

- Orientation will be done at **PROVIDENCE VOCATIONAL SCHOOL**
- Requirements need to be submitted on or before the orientation date.

Clinical Site: **Pacifica Nursing & Rehab. Center**
385 Esplanade Avenue
Pacifica, Ca 94044

Tuition Fee: **$1,690.00 + ($ 75.00 registration)**

Those who are interested to enroll must pay a reservation/ registration fee of $75.00. Enrollees can register online on our website or in person.
We are accepting checks, money orders, Visa/ MasterCard.

We also offer:

Certified Home Health Aide Training Program
C.E.U. (Continuing Education Unit) Classes
CPR / BLS for Healthcare Provider Classes

For more information:
Please call (650) 991-2309 or (650) 991-2392

website: providencevocationalschool.com
email pvs189@yahoo.com
Fax 650-991-2047

PROVIDENCE VOCATIONAL SCHOOL

390 ASHTON AVENUE, SAN FRANCISCO, CA 94112
TEL#650-991-2309

NURSE ASSISTANT TRAINING PROGRAM

REQUIREMENTS:

The applicant must submit upon enrollment and prior to direct patient contact the following requirements:

1. **Valid State ID / Driver's License / Passport / Alien Card (Green Card)**
2. **Social Security Card / ITIN number**
3. **Physical Exam (*with Doctor's stamp*) and TB Testing :**
   - **2 step PPD** (Skin Test) **or Quanti FERON TB-Gold** (Blood draw)
   - **Chest X-ray** if TB test is Positive

Immunizations:

- Flu Vaccine (Seasonal) , COVID-19 Vaccination record (if vaccinated)

Considerations for who should get tested

- *People who have symptoms of COVID-19.*
- *People who have had close contact (within 6 feet for a total of 15 minutes or more) with someone with confirmed COVID-19.*
- *People who have taken part in activities that put them at higher risk for COVID-19 because they cannot socially distance as needed, such as travel, attending large social or mass gatherings, or being in crowded indoor settings.*
- *People who have been asked or referred to get testing by their healthcare provider,* local external *or state health department.*

Not everyone needs to be tested. If you do get tested, you should self-quarantine/isolate at home pending test results and follow the advice of your health care provider or a public health professional.

4. Live scan fingerprint for criminal screening for submission to the Department of Justice and Department of Public Health
5. Must be 16 years old or over
6. High School Diploma / Certificate or GED equivalent / School Transcript

Note: Prior to direct patient contact, the applicant shall provide a copy of CPR Card / Basic Life Support for Healthcare Provider.

Registration fee (Non-refundable)	$ 75.00	TOTAL CHARGE THE STUDENT IS OBLIGATED TO PAY UPON ENROLLMENT
Tuition	$ 1690.00	
Equipment	$ no fee	
Lab. supplies or kits	$ no fee	
TOTAL CHARGES FOR THE CURRENT PERIOD OF ATTENDANCE	$1765.00	Non-refundable

CHARGES PAID TO ANOTHER ENTITY

	$ 120.00	Competency Evaluation Program (state exam fee)
(optional)	$ 40.00	Uniform with school patch
(optional)	$ 65.00	Live Scan / Fingerprint
(optional)	$ 100.00	C.P.R. / Basic Life Support
	$ 50.00	Ebook (digital copy) & Workbook
	$ 375.00	Total Misc Expenses
ESTIMATED TOTAL CHARGES FOR THE ENTIRE EDUCATIONAL PROGRAM	$ 2140.00	Estimated total Expenses

Students may pay the tuition fees in three (3) equal installment basis within the current period of attendance