

**El Monte-Rosemead Adult School**

**Vocational Nursing Program**

**Interest Form**

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone number: \_\_\_\_\_

Do you have a CNA certification?       Yes       No

Do you have a current CPR card?       Yes       No

**Have you completed the following Pre-requisite courses?**

Medical Math       Yes       No

Medical Terminology       Yes       No

Introduction to Anatomy and Physiology       Yes       No

**ALL pre-requisite courses must be completed BEFORE you fill out the interest form. Please DO NOT fill out this interest form until you have completed all of the required LVN Program pre-requisite courses.**

**EMRAS offers the pre-requisite courses. Call and speak to one of our counselors for assistance.**

**Please read: This is an interest form only. This document does NOT mean that you are accepted in the LVN program. All interest forms will be reviewed by the Nursing Education Department. Only those who have completed ALL of the pre-requisite courses will be contacted to complete the LVN application.**