



# BERKSHIRE WORKFORCE BOARD

**BECOME A CERTIFIED NURSING ASSISTANT!**

## SIGN UP!

If interested, please complete the attached application and:

Email to:

Shannon@masshireberkshire.com

OR

Fax to:

413.448.2801

Applications are due no later than:  
**October 9th**

Please email

Shannon@masshireberkshire.com

or call

413.442.7177 ext. 118

with questions.



*This project is funded by a Senator Kenneth J. Donnelly Workforce Success Grant (Workforce Competitiveness Trust Fund FY'19*

*Appropriation) through the Massachusetts Executive Office of Labor and Workforce Development and is administered by the Commonwealth Corporation*

## Certified Nursing Assistant Daytime Training Program

Berkshire Community College  
1350 West Street, Pittsfield, MA

**This Is a FREE Opportunity  
to attend the BHS/BCC Nursing Assistant course!  
Un- and underemployed individuals are  
encouraged to apply!  
Limited spots are available, Apply Today!**

This 3 week (90 hour) program with classroom and clinical components prepares you to apply for and complete the State of Massachusetts Nursing Assistant Certification Exam.

Must be a Massachusetts resident to apply

### Course Information

**Course Dates:** October 19, 2020 – November 6, 2020

**Course Times:** Class - 8:00am-2:30pm Monday-Friday  
Clinical - 7:00am-1:30pm

**Classes:** Berkshire Community College West Street, Pittsfield

**Clinical:** Mt. Greylock Extended Care North Street, Pittsfield

Participants must be willing to follow all safety guidelines regarding COVID-19 and understand that this is an in-person course which may require schedule modifications.

*This program is an Equal Employment Opportunity*



## Berkshire Nursing Assistant Daytime Program Application

*Please print clearly*

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Last, First, MI)

ADDRESS, CITY, STATE, ZIP: \_\_\_\_\_

PHONE/CELL: \_\_\_\_\_ EMAIL: \_\_\_\_\_

EMPLOYMENT STATUS: Unemployed\_\_\_\_ Employed\_\_\_\_

Place of Employment: \_\_\_\_\_ Title: \_\_\_\_\_

MA STATE RESIDENT: Yes\_\_ No\_\_ Can you Provide Citizenship/Work Authorization? Yes\_\_ No\_\_

ARE YOU CURRENTLY RECEIVING ASSISTANCE: SNAP\_\_\_\_ TAFDC \_\_\_\_ SSI \_\_\_\_

Veteran's Benefits \_\_\_\_ Unemployment Insurance \_\_\_\_ Other: \_\_\_\_\_

Not receiving assistance \_\_\_\_

HIGHEST LEVEL OF EDUCATION:

\_\_\_\_ Less than high school, no diploma

\_\_\_\_ High School Diploma

\_\_\_\_ GED/High School Equivalency

\_\_\_\_ Some college, no degree

\_\_\_\_ Associate Degree: concentration: \_\_\_\_\_

\_\_\_\_ Bachelor Degree or higher: concentration: \_\_\_\_\_

Please describe any prior or current work in healthcare:

\_\_\_\_\_

***Please attach:***

1. A paragraph describing why you are interested in becoming a certified nursing assistant.
2. (Optional) A letter of support from an employer

How did you hear about this training? \_\_\_\_\_

**By signing below, I am committed to finding work as a CNA, have reliable transportation, willing to have CORI and drug testing done, and can commit to the entire duration of this training program.**

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