MISSION

Moberly Area Community College, a public institution of higher education, provides open admission to students and fosters excellence in learning through innovative educational programs and services that are geographically and financially accessible throughout our service region.
VI. REPORT OF THE PRESIDENT

A. Personnel  (Please see Appendix C.)

1. Title Change

It is recommended to the Board of Trustees that the persons listed in the attachment be formally approved for title changes as presented.

Notations: ____________________________________________________________

Motion to: ____________________________________________________________

By: __________________________ Seconded by: __________________________

Action: __________________________

2. Schedule and/or Salary Adjustment

It is recommended to the Board of Trustees that the persons listed in the attachment be formally approved for schedule and/or salary adjustments as presented.

Notations: ____________________________________________________________

Motion to: ____________________________________________________________

By: __________________________ Seconded by: __________________________

Action: __________________________

3. Retirement Resignation

It is recommended to the Board of Trustees that the retirement resignation of Beth Daly, Switchboard Operator, be accepted as presented in the attachment. It is further recommended that she be granted all applicable retirement benefits of Moberly Area Community College effective with her retirement date, September 1, 2012.

Notations: ____________________________________________________________

Motion to: ____________________________________________________________

By: __________________________ Seconded by: __________________________

Action: __________________________
4. Employment

It is recommended to the Board of Trustees that the persons listed in the enclosed attachment be formally approved for employment as presented.

It is also recommended to the Board of Trustees that the adjunct faculty members be formally employed. Employment of part-time faculty members is contingent on class enrollment and all official records required being on file at Moberly Area Community College.

Notations: __________________________________________________________

______________________________

Motion to: __________________________________________________________

By: ________________________ Seconded by: _____________________________

Action: ________________________

B. Preliminary Budget Proposal for Fiscal Year 2012-13  *(Please see Appendix D.)*

It is recommended to the Board of Trustees that the preliminary budget proposal be approved as the working budget effective July 1, 2012. This preliminary budget was discussed in detail in the work session on Monday, June 11, 2012.

As in past years, additional revisions that cannot be determined at this time will be brought to the Board of Trustees during the college year. Also, as in past years, a complete revised budget proposal will be formally presented to the Board of Trustees in a work session and at the regular February 2013 meeting.

Notations: __________________________________________________________

______________________________

Motion to: __________________________________________________________

By: ________________________ Seconded by: _____________________________

Action: ________________________
C. Depository of Funds

It is recommended to the Board of Trustees that the following banks be approved as depositories of Moberly Area Community College for the 2012-13 college year:

Moberly:
- Bank of America
- Bank of Moberly
- Bank Midwest
- Citizen's Bank and Trust
- City Bank and Trust Company of Moberly
- Commerce Bank of Moberly
- County Bank
- The Bank of Cairo and Moberly

Other Communities:
- Alliant Bank (Kirksville)
- American Loan & Savings Association (Hannibal)
- Bank of Kirksville
- Bank Midwest (Kirksville)
- Boone County National Bank (Columbia)
- Farmers & Merchants Bank (Hannibal/Columbia)
- First National Bank (Mexico)
- Firstar (Hannibal)
- Hannibal National Bank
- Martinsburg Bank & Trust (Mexico)
- MCM Savings Bank (Hannibal)
- Northeast Missouri State Bank (Kirksville)
- Palmyra State Bank (Hannibal)
- Perry State Bank (Hannibal)
- US Bank (Kirksville/Hannibal/Mexico/Columbia)

Notations: _____________________________________________________________

Motion to: ____________________________________________________________

By: ___________________________ Seconded by: ____________________________

Action: ____________________________

D. Adult Education and Literacy (AEL) Budget 2012-13  (Please see Appendix E.)

It is recommended to the Board of Trustees that the Adult Education and Literacy (AEL) budget proposal for fiscal year 2012-13 be approved. A copy of this budget proposal is attached.
E. Proposed Transfers

It is recommended to the Board of Trustees that $200,000 be transferred from the general fund to the General-Facilities/Plant Fund for the year ending June 30, 2012.

F. Request for Board of Trustees' Work Session—July 2012

It is recommended that approval be given to have a special Board of Trustees' work session for planning purposes. This special work session is held each year to give us an opportunity to discuss the previous years’ accomplishments and to share goals and expectations for the coming college year. This work session would be held in conjunction with the Board Retreat on Friday, July 20, to be held at the MACC-Columbia Higher Education Center.
G. Missouri Arts Council Grant

On behalf of the Moberly Area Community College Foundation, MACC submitted a grant proposal to the Missouri Arts Council to support activities associated with Art on the Block. The Missouri Arts Council has awarded the Foundation $1,163, which MACC will use to further expand this event which aims to stimulate an interest in the arts among all ages. It is recommended to the Board of Trustees that formal approval to accept and implement these grant monies be given.

Notations: _______________________________________________________

Motion to: _______________________________________________________

By: ______________________ Seconded by: ____________________________

Action: ________________________________________________________

H. State Maintenance and Repair Projects for 2012-13  (Please see Appendix F.)

It is recommended to the Board of Trustees that the attached list of items be given approval for completion under State Maintenance and Repair appropriations for the 2012-13 fiscal year. This list contains a number of classroom renovations and flooring replacement on the main campus.

Notations: _______________________________________________________

Motion to: _______________________________________________________

By: ______________________ Seconded by: ____________________________

Action: ________________________________________________________

I. Proposed Tobacco-Free Policy  (Please see Appendix G.)

It is recommended to the Board of Trustees that the following Tobacco-Free Policy be approved as presented.

Notations: _______________________________________________________
J. Occupational Therapy Assistant Student Affiliation Agreements  (Please see Appendix H.)

It is recommended to the Board of Trustees that MACC formally approve the Occupational Therapy Assistant Student Affiliation Agreements with Audrain Medical Center, Missouri Delta Medical Center, Via Christi Hospital Pittsburg, Inc., and Carondelet Health beginning with the 2012-13 academic year. These agreements allow MACC students direct patient care experiences while under the supervision of the facilities' occupational therapist or other assigned professionals.

Notations: __________________________________________________________

Motion to: __________________________________________________________

By: ___________________________  Seconded by: __________________________

Action: ____________________________________________________________________

K. Agreements with Elsevier Inc.  (Please see Appendix I.)

It is recommended to the Board of Trustees that the agreements for Packages of Products with Elsevier Inc. be approved for renewal. These agreements provide a complete line of testing and remediation products and services for students preparing for the National Council of Licensure Examination (NCLEX). The practical nursing programs wish to use this service to do Health Education Systems, Inc. (HESI) testing. These testing and remediation products will allow student nurses the opportunity to test their knowledge and prepare for taking the state board exams. The nursing students will bear the cost of the practice exams and ancillary testing materials.

Notations: __________________________________________________________

Motion to: __________________________________________________________

By: ___________________________  Seconded by: __________________________

Action: ____________________________________________________________________
L. Curriculum Committee Proposed New Certificate  (Please see Appendix J.)

It is recommended to the Board of Trustees that the new certificate, Industrial Electrical Technician Certificate, be formally approved. This new certificate has been approved by the Curriculum Committee, the President’s Council, and the MACC President.

Notations: 

Motion to: 

By: __________________________ Seconded by: __________________________ 

Action: 

M. Disposal of Documents  (Please see Appendix K.)

It is recommended to the Board of Trustees that authorization be given to dispose of old college records as listed in the attachment. These documents are no longer required to be maintained by the College according to state and federal regulations.

Notations: 

Motion to: 

By: __________________________ Seconded by: __________________________ 

Action: 

N. Proposed Policy Handbook Revision—M.020.2  (Please see Appendix L.)

It is recommended to the Board of Trustees that the following policy in the Policy Handbook be revised as shown in the attachment. This revision updates the policy to more accurately reflect current practice. Additions are in bold while deletions are shown by striking through the text.

Notations: 

Motion to: 

By: __________________________ Seconded by: __________________________ 

Action: 

Board of Trustees’ Agenda, June 26, 2012
O. Proposed ADA Upgrade for Main Building  (Please see Appendix M.)

It is recommended to the Board of Trustees that formal approval be given to accept the bid from Verslues Construction Company, Inc., Jefferson City, in the amount of $184,700, for the installation of concrete sidewalks, patio, and ramps in Lot B directly behind the Main Building. This project will create a wheelchair accessible entrance on the west side of the Main Building where currently there are none. Bids were reviewed by Architects Alliance, with the lowest and best bid provided to the College.

Notations: ________________________________

Motion to: ________________________________

By: ________________________ Seconded by: ________________________

Action: ________________________________

P. General Information

1. Summer Enrollment 2012 – Preliminary Report

At this time, summer enrollment 2012 is flat. We can expect a slight increase (1%) based on second four-week and intercession classes.

Notations: ________________________________

2. Default Prevention Grant

On May 7 2012, a proposal for renewing a default prevention grant was submitted to the Missouri Department of Higher Education (MDHE). This proposal was submitted in response to an offer extended by MDHE in their quest to initiate and finance new programs and activities related to student loan default prevention. If this grant proposal is funded, it will pay for a variety of default prevention services and related activities which will enhance the efforts made in MACC’s existing default prevention plan. Upon notification of receipt of the grant, the proposal will be brought to the Board of Trustees for formal approval to accept and implement the grant monies.

Notations: ________________________________
3. Peace Officers Standards and Training (POST) Examinations

On May 24, 2012, sixteen Law Enforcement Training Center (LETC) students sat for the POST examination to receive a Missouri Class A Peace Officer’s license. All sixteen students who took the exam received passing scores. Four students in the class were under age twenty-one and not eligible to sit for the POST examination.

Notations: ________________________________

4. JAM (Jenzabar Annual Meeting)

The annual JAM conference was held May 30, 2012 through June 1, 2012 in Dallas, Texas. Several MACC staff and faculty members attended. Michele McCall presented a session on “Early Adopter Experience with Academic Planner” and Lloyd Marchant presented a session on “How to be Sure that Data and Systems are Secured and Recoverable.”

Notations: ________________________________

5. Associate Degree Nursing Program Recognition

At the May 18, 2012 Associate Degree Nursing Pinning Ceremony, the academic and clinical excellence awards were announced. Micah Graviett of Moberly was recognized for academic excellence. Christy DeLozier of Laddonia was recognized for clinical excellence. Heather Williams of Farber received the Missouri League of Nursing outstanding student of the year award.

Notations: ________________________________

6. Medical Laboratory Technician Graduation Ceremony

The Medical Laboratory Technician Graduation Ceremony will be held Friday, August 3, 2012, at 4:30 p.m. in the Janson Auditorium at the Audrain Medical Center in Mexico.

Notations: ________________________________
7. Accelerated Associate Degree in Nursing – Advanced Technology Center, Mexico

MACC has received approval from the Coordinating Board for Higher Education to offer the accelerated associate degree in nursing (AADN) program at the Advanced Technology Center in Mexico. MACC currently offers the practical nursing (PN) program at the Advanced Technology Center

Notations: ____________________________________________________________

8. Curriculum Committee  (Please see Appendix N.)

The Curriculum Committee revised course, new course, and revised program or certificate descriptions are attached for your information. These proposals have been approved by the Curriculum Committee, the President’s Council, and the MACC President

Notations: ____________________________________________________________

VII. OTHER BUSINESS

A. Other

Notations: ____________________________________________________________

B. Forum – Open Discussion

Notations: ____________________________________________________________

VIII. ADJOURN

Notations: ____________________________________________________________

Motion to: __________________________________________________________

By: _______________________________  Seconded by: _______________________

Action: ____________________________________________________________
VI. Report of the President

A. Personnel

1. Title Change

a. Jeanie Gelski – Assistant Director of Business Services

It is recommended that Jeanie Gelski’s title be changed from Business Office Coordinator to Assistant Director of Business Services. This change better reflects Ms. Gelski’s role in the Business Office.

b. Jocelyn Neal – Senior Accounts Payable Specialist

It is recommended that Jocelyn Neal’s title be changed from Accounts Payable Specialist to Senior Accounts Payable Specialist. This change reflects Ms. Neal’s expanding responsibilities as the chief accounts payable specialist at MACC.

c. Jamie Skubic – Senior Accounts Receivable Specialist

It is recommended that Jamie Skubic’s title be changed from Accounts Receivable Specialist to Senior Accounts Receivable Specialist. This change reflects Ms. Skubic’s expanding responsibilities as the chief accounts receivable specialist at MACC.

d. Denise Farmer – Financial Aid/Administrative Specialist

It is recommended that Denise Farmer’s title be changed from Secretary/Receptionist/Financial Aid Specialist to Financial Aid/Administrative Specialist. This change more accurately reflects Ms. Farmer’s current role at the MACC-Kirksville Higher Education Center.

e. Dorothy McCollum – Administrative Assistant

It is recommended that Dorothy McCollum’s title be changed from Secretary/Receptionist to Administrative Assistant. This change more accurately reflects Ms. McCollum’s current role at the Advanced Technology Center.
2. Schedule and/or Salary Adjustment
   
a. Continuing Education Specialist — Becky Dulaney

   It is recommended that the continuing education specialist position increase from 32 hours to 37.5 hours per week. This increase will be funded through the Training for Tomorrow grant. This change is being made to support the growth that is occurring in the health care areas of MACC's continuing education program. At the conclusion of the grant period this position will be evaluated for continued institutional funding.

   b. Computer Services Coordinator — Marcus Perkins

   It is recommended that a salary adjustment be approved for Marcus Perkins, Computer Services Coordinator at MACC-Columbia Higher Education Center. This adjustment reflects Mr. Perkins completion of his bachelor's degree, and is in addition to his July 1, 2012 salary increase.

   c. Systems Technical Specialist — Jered Bare

   It is recommended that Jered Bare be provided a salary adjustment because of increased responsibilities and changes in his job description as systems technical specialist. His increased responsibilities include, but are not limited to, configure, maintain and troubleshoot MACC local and remote domain controllers, install base installations of Linus, Microsoft, and other operating systems in virtual and physical areas, maintain and update portals within JICS, install, configure, maintain, troubleshoot virtual infrastructure software, and implement a disaster recovery plan for extreme measures of data recovery.

3. Retirement Resignation
   
a. Switchboard Operator – Beth Daly

   Beth Daly has submitted her retirement resignation letter effective September 1, 2012. Beth has been employed with Moberly Area Community College since August of 1997.

4. Employment
   
a. Biological Sciences Instructor – Patricia Noel

   Patricia Noel will be employed as a full-time biology instructor at the Moberly campus. Dr. Noel received her Ph.D. in fisheries from Auburn University, Auburn, Alabama; her master of science in biology from University of Windsor in Ontario, Canada; and her bachelor of science in biology from Gannon University, Erie, Pennsylvania. She most recently served as a research/teaching assistant at Auburn University. Patricia resides in Mexico, Missouri.
b. Reemployment of Director of Career and Placement Services—Patricia Twaddle

The director of career and placement services position will continue to be filled by Patricia Twaddle. This is a 12-month position.

c. Reemployment of Articulation Specialist/Career and Technical Education Programs—Mark Chambers

The articulation specialist/career and technical education programs position will continue to be filled by Mark Chambers. This is a 12-month position.

d. Reemployment of Adult Education and Literacy (AEL) Personnel

The following persons will serve in the adult education and literacy program for the 2012-13 college year pending funding:

Director – Susie Cason
Instructors/Substitute Instructors – William Alton, Ronda Blakley, Judith Carr, Stephanie Farnen, Bill Fountain, Beverly Hipkins, Mya McClain, Barbara Potter, Karen Robnett, Carolee Struble, Teresa Thornburg and Colene Wilson

e. Language and Literature Instructor – Cindy Droege

Cindy Droege will be employed as a full-time language and literature instructor at the MACC-Columbia Higher Education Center. Ms. Droege earned her master of fine arts in creative writing from Queens University of Charlotte, Charlotte, North Carolina, and her bachelor of arts in English from Columbia College. She currently serves as Learning Center Coordinator and an adjunct instructor for MACC. Ms. Droege resides in Columbia.

f. Adjunct Faculty

Christina Eick will teach psychology courses at the Advanced Technology Center, Mexico. She earned her master of education in counseling and guidance from Stephens College, Columbia, her bachelor of science in special education from William Woods University, Fulton, and her associate of arts in liberal/general studies from Moberly Area Community College. She is a guidance counselor and financial aid officer at Davis H. Hart Career Center in Mexico, and has teaching experience. She lives in Mexico.

Ryan Flugum will teach mathematics courses at the MACC-Columbia Higher Education Center. He earned his master of arts in mathematics from the University of Northern Iowa, Cedar Falls, and his bachelors of science in accounting and mathematics from Mount Mercy University, Cedar Rapids, Iowa. He is currently pursuing his doctoral degree in mathematics from the University of Missouri-Columbia. He has teaching experience and lives in Columbia.
Rebecca (Becky) Schafer will teach developmental math classes and education courses at the Advanced Technology Center, Mexico. She earned her educational specialist in educational leadership and policy analysis from the University of Missouri-Columbia, her master of arts in teaching from Columbia College, Columbia, and her bachelor of science in business administration from the University of Central Missouri, Warrensburg. She has teaching experience and lives in Martinsburg.

Emily Schmidt will teach chemistry courses at the MACC-Columbia Higher Education Center. She earned her master of education in science education and her master of science in chemistry from the University of Missouri-Columbia, and her bachelor of science in geology from Missouri State University, Springfield. She is currently pursuing her Ph.D. in chemistry from the University of Missouri-Columbia. She has teaching experience and lives in Mexico.

Beth Walker will teach Mental Health Nursing this summer in the Allied Health Department. She earned her master of science in nursing from the University of Missouri-Columbia. She is currently employed as a nursing instructor at Maricopa Community College in Phoenix, Arizona. Ms. Walker spends her summers in Missouri with family.

Holly Wooldridge will teach dual credit Spanish at Westran R-I High School. She earned her master of science in Spanish language education from Nova Southeastern University, Fort Lauderdale-Davie, Florida, and her bachelor of arts in international studies from Westminster College, Fulton. She has been teaching Spanish at Westran R-I since 1998 and lives in Huntsville.
MOBERLY AREA COMMUNITY COLLEGE  
SUMMARY OF CHANGE IN FUND BALANCES  

<table>
<thead>
<tr>
<th>General Fund</th>
<th>Current Budget 2011-12</th>
<th>Proposed Budget 2012-13</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fund Balance, July 1</td>
<td>$3,572,682</td>
<td>$3,605,564</td>
<td>$32,882</td>
</tr>
<tr>
<td>Total Revenue</td>
<td>$37,998,615</td>
<td>$40,544,303</td>
<td>$2,545,688</td>
</tr>
<tr>
<td>Total Expenditures</td>
<td>(37,955,145)</td>
<td>(40,502,364)</td>
<td>(2,547,219)</td>
</tr>
<tr>
<td>Net, before proposed transfers</td>
<td>43,470</td>
<td>41,939</td>
<td>(1,531)</td>
</tr>
<tr>
<td>Proposed Transfers</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Net</td>
<td>43,470</td>
<td>41,939</td>
<td>(1,531)</td>
</tr>
<tr>
<td>Projected General Fund Balance, June 30</td>
<td>$3,616,152</td>
<td>$3,647,503</td>
<td>$31,351</td>
</tr>
</tbody>
</table>

Total General Fund Balance as a percent of total operating expenditures | 15.83% | 14.90% |
## MOBERLY AREA COMMUNITY COLLEGE
### SUMMARY BUDGET
### REVENUE

<table>
<thead>
<tr>
<th>Current Budget (2011-12)</th>
<th>Proposed Budget (2012-13)</th>
<th>Increase (Decrease)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Local Receipts</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local Taxes</td>
<td>$369,248</td>
<td>$369,248</td>
</tr>
<tr>
<td>Local Taxes - Designated</td>
<td>184,000</td>
<td>184,000</td>
</tr>
<tr>
<td>Fees and Tuition - On Campus</td>
<td>2,550,435</td>
<td>2,824,352</td>
</tr>
<tr>
<td>Fees and Tuition - Columbia</td>
<td>4,617,723</td>
<td>4,953,373</td>
</tr>
<tr>
<td>Fees and Tuition - Edina</td>
<td>22,971</td>
<td>17,787</td>
</tr>
<tr>
<td>Fees and Tuition - Hannibal</td>
<td>584,420</td>
<td>586,235</td>
</tr>
<tr>
<td>Fees and Tuition - Kirksville</td>
<td>819,362</td>
<td>857,313</td>
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<tr>
<td>Fees and Tuition - Mexico</td>
<td>1,040,223</td>
<td>1,101,849</td>
</tr>
<tr>
<td>Fees and Tuition - Other Off Campus</td>
<td>259,830</td>
<td>287,706</td>
</tr>
<tr>
<td>Fees and Tuition - On Line Courses</td>
<td>3,798,194</td>
<td>4,313,098</td>
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<tr>
<td>Student Activity</td>
<td>190,370</td>
<td>210,130</td>
</tr>
<tr>
<td>Student Activity - Off Campus</td>
<td>547,460</td>
<td>652,738</td>
</tr>
<tr>
<td>Interest</td>
<td>15,000</td>
<td>15,000</td>
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<tr>
<td>Railroad and Utilities</td>
<td>36,000</td>
<td>38,228</td>
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<tr>
<td>Other Local</td>
<td>90,800</td>
<td>95,675</td>
</tr>
<tr>
<td>Other Local - Kirksville</td>
<td>35,000</td>
<td>13,000</td>
</tr>
<tr>
<td>Other Local - Mexico</td>
<td>2,300</td>
<td>1,800</td>
</tr>
<tr>
<td>In-House Charges</td>
<td>64,000</td>
<td>68,000</td>
</tr>
<tr>
<td><strong>Total Local</strong></td>
<td>$15,227,336</td>
<td>$16,589,532</td>
</tr>
</tbody>
</table>

| **State/Federal Receipts** |                           |                     |
| State Aid - Regular Community College | 2,662,874       | 2,662,874          | 0  |
| State Aid - Workforce Preparation | 361,311         | 361,311            | 0  |
| State Aid - Welfare Reform       | 37,489          | 37,489             | 0  |
| State Aid - Hannibal HB 1456     | 42,182          | 42,182             | 0  |
| State Aid - Kirksville HB 1456   | 231,674         | 231,674            | 0  |
| State Aid - Mexico HB 1456       | 262,101         | 262,101            | 0  |
| State Revenue - Workforce Development | 107,000       | 103,000            | (4,000) |
| Vocational Aid                 | 200,000         | 200,000            | 0  |
| Perkins - Federal              | 235,446         | 267,124            | 31,678 |
| Vocational Enhancement Grant   | 143,475         | 111,813            | (31,662) |
| **Total State/Federal**        | $4,283,552      | $4,279,568         | ($3,984) |

| **Auxiliary Enterprises**      |                           |                     |
| Activity Center                | $80,300                 | $80,400             | $100 |
| Cafeteria                      | 111,910                 | 125,100             | 13,190 |
| Bookstore                      | 3,079,250               | 3,316,100           | 236,850 |
| Student Housing                | 110,000                 | 125,400             | 15,400 |
| **Total Auxiliary**            | $3,381,460              | $3,647,000          | $265,540 |

**Total Operating Revenue**     | $22,882,348             | $24,516,100         | $1,623,752
<table>
<thead>
<tr>
<th>Restricted Funds</th>
<th>Current Budget 2011-12</th>
<th>Proposed Budget 2012-13</th>
<th>Increase (Decrease)</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Aid - Maintenance and Repair</td>
<td>133,851</td>
<td>133,851</td>
<td>0</td>
</tr>
<tr>
<td>State Aid - Regional Consortium (RTEC)</td>
<td>931,478</td>
<td>931,478</td>
<td>0</td>
</tr>
<tr>
<td>State Aid - Jim Sears NE Tech Center (RTEC)</td>
<td>59,070</td>
<td>59,070</td>
<td>0</td>
</tr>
<tr>
<td>State Aid - Lewis &amp; Clark</td>
<td>388,138</td>
<td>0</td>
<td>(388,138)</td>
</tr>
<tr>
<td>MO Small Business Dev. Center</td>
<td>59,073</td>
<td>53,546</td>
<td>(5,527)</td>
</tr>
<tr>
<td>FEMA Grant - Hannibal</td>
<td>0</td>
<td>816,976</td>
<td>816,976</td>
</tr>
<tr>
<td>Adult Education and Family Literacy</td>
<td>54,431</td>
<td>54,431</td>
<td>0</td>
</tr>
<tr>
<td>Training For Tomorrow</td>
<td>305,443</td>
<td>315,273</td>
<td>9,830</td>
</tr>
<tr>
<td>Broadband Technology Opportunities Grant</td>
<td>245,946</td>
<td>262,655</td>
<td>16,709</td>
</tr>
<tr>
<td>MoHealthWINS Grant</td>
<td>325,969</td>
<td>108,002</td>
<td>(217,967)</td>
</tr>
<tr>
<td>STEP Grant - Truman State</td>
<td>2,731</td>
<td>2,731</td>
<td>0</td>
</tr>
<tr>
<td>Early Childhood Grant</td>
<td>20,000</td>
<td>20,000</td>
<td>0</td>
</tr>
<tr>
<td>MDHE Default Prevention</td>
<td>25,000</td>
<td>25,000</td>
<td>0</td>
</tr>
<tr>
<td>Booster Club</td>
<td>16,000</td>
<td>16,000</td>
<td>0</td>
</tr>
<tr>
<td>Facilities/Plant - Designated Funds</td>
<td>1,519,137</td>
<td>1,609,190</td>
<td>90,053</td>
</tr>
<tr>
<td>Other Local Restricted</td>
<td>20,000</td>
<td>20,000</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total Restricted General Funds</strong></td>
<td><strong>4,106,267</strong></td>
<td><strong>4,428,203</strong></td>
<td><strong>321,936</strong></td>
</tr>
</tbody>
</table>

| Restricted Funds - Financial Aid                      | 11,000,000             | 11,600,000              | 600,000             |

| Total Restricted General Funds                        | **$15,106,267**        | **$16,028,203**         | **$921,936**        |

<p>| Total General Fund Revenue and Financial Aid          | <strong>$37,998,615</strong>        | <strong>$40,544,303</strong>         | <strong>$2,545,688</strong>      |</p>
<table>
<thead>
<tr>
<th>Service Category</th>
<th>Current Budget 2011-12</th>
<th>Proposed Budget 2012-13</th>
<th>Increase (Decrease)</th>
</tr>
</thead>
<tbody>
<tr>
<td>President's Office</td>
<td>$280,610</td>
<td>$288,480</td>
<td>$7,870</td>
</tr>
<tr>
<td>Administrative Support Services</td>
<td>115,660</td>
<td>111,140</td>
<td>(4,520)</td>
</tr>
<tr>
<td>Financial Support Services</td>
<td>779,459</td>
<td>821,473</td>
<td>42,014</td>
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<td>Technical/Information Support Services</td>
<td>707,975</td>
<td>739,440</td>
<td>31,465</td>
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<tr>
<td>Business Office</td>
<td>369,900</td>
<td>395,168</td>
<td>25,268</td>
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<tr>
<td>Institutional Services</td>
<td>110,135</td>
<td>116,373</td>
<td>6,238</td>
</tr>
<tr>
<td>General Institutional - Other</td>
<td>733,033</td>
<td>762,368</td>
<td>29,335</td>
</tr>
<tr>
<td>Institutional Facilities</td>
<td>2,635,406</td>
<td>2,753,898</td>
<td>118,492</td>
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<td>Student Services</td>
<td>1,610,383</td>
<td>1,754,028</td>
<td>143,645</td>
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<td>Student Activities and Services</td>
<td>510,643</td>
<td>584,458</td>
<td>73,815</td>
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<tr>
<td>Instructional (Academic Support)</td>
<td>2,068,329</td>
<td>2,195,982</td>
<td>127,653</td>
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<td>Library</td>
<td>260,590</td>
<td>274,763</td>
<td>14,173</td>
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<tr>
<td>Instructional - General</td>
<td>9,607,594</td>
<td>10,349,512</td>
<td>741,918</td>
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<tr>
<td>Auxiliary Enterprises</td>
<td>3,059,161</td>
<td>3,327,078</td>
<td>267,917</td>
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<tr>
<td>Total Operating Expenditures</td>
<td>$22,848,878</td>
<td>$24,474,161</td>
<td>$1,625,283</td>
</tr>
</tbody>
</table>
## MOBERLY AREA COMMUNITY COLLEGE
### SUMMARY BUDGET
#### EXPENDITURES

<table>
<thead>
<tr>
<th>Restricted Funds</th>
<th>Current 2011-12</th>
<th>Proposed 2012-13</th>
<th>Increase (Decrease)</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Aid - Maintenance and Repair</td>
<td>133,851</td>
<td>133,851</td>
<td>0</td>
</tr>
<tr>
<td>State Aid - Regional Consortium (RTEC)</td>
<td>931,478</td>
<td>931,478</td>
<td>0</td>
</tr>
<tr>
<td>State Aid - Jim Sears NE Tech Center (RTEC)</td>
<td>59,070</td>
<td>59,070</td>
<td>0</td>
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<tr>
<td>State Aid - Lewis &amp; Clark</td>
<td>388,138</td>
<td>0</td>
<td>(388,138)</td>
</tr>
<tr>
<td>MO Small Business Dev. Center</td>
<td>59,073</td>
<td>53,546</td>
<td>(5,527)</td>
</tr>
<tr>
<td>FEMA Grant - Hannibal</td>
<td>0</td>
<td>816,976</td>
<td>816,976</td>
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<tr>
<td>Adult Education and Family Literacy</td>
<td>54,431</td>
<td>54,431</td>
<td>0</td>
</tr>
<tr>
<td>Training For Tomorrow</td>
<td>305,443</td>
<td>315,273</td>
<td>9,830</td>
</tr>
<tr>
<td>Broadband Technology Opportunities Grant</td>
<td>245,946</td>
<td>262,655</td>
<td>16,709</td>
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<tr>
<td>MOHealthWINS Grant</td>
<td>325,969</td>
<td>108,002</td>
<td>(217,967)</td>
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<tr>
<td>STEP Grant - Truman State</td>
<td>2,731</td>
<td>2,731</td>
<td>0</td>
</tr>
<tr>
<td>Early Childhood Grant</td>
<td>20,000</td>
<td>20,000</td>
<td>0</td>
</tr>
<tr>
<td>MDHE Default Prevention</td>
<td>25,000</td>
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<td>0</td>
</tr>
<tr>
<td>Booster Club</td>
<td>16,000</td>
<td>16,000</td>
<td>0</td>
</tr>
<tr>
<td>Facilities/Plant - Designated Funds</td>
<td>1,519,137</td>
<td>1,609,190</td>
<td>90,053</td>
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<tr>
<td>Other Local Restricted</td>
<td>20,000</td>
<td>20,000</td>
<td>0</td>
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<tr>
<td>Total Restricted Funds</td>
<td>$15,106,267</td>
<td>$16,028,203</td>
<td>$921,936</td>
</tr>
</tbody>
</table>

#### Restricted Funds - Financial Aid

| Restricted Funds - Financial Aid                        | 11,000,000      | 11,600,000      | 600,000             |

#### Total Restricted Funds

| Total Restricted Funds                                   | $16,028,203     | $16,600,000     | $571,800            |

#### Total Expenditures

| Total Expenditures                                      | $37,955,145     | $40,502,364     | $2,547,219          |

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D - 5
MOBERLY AREA COMMUNITY COLLEGE
PROPOSED ADULT EDUCATION AND LITERACY BUDGET
FISCAL YEAR 2012-13

<table>
<thead>
<tr>
<th></th>
<th>Instruction</th>
<th>Administration</th>
<th>Total</th>
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<tr>
<td>Certified Salaries</td>
<td>34,578</td>
<td>3,600</td>
<td>38,178</td>
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<tr>
<td>Employee Benefits</td>
<td>3,997</td>
<td>600</td>
<td>4,597</td>
</tr>
<tr>
<td>Purchased Services</td>
<td>3,775</td>
<td>1,800</td>
<td>5,575</td>
</tr>
<tr>
<td>Supplies/Materials</td>
<td>3,275</td>
<td>600</td>
<td>3,875</td>
</tr>
<tr>
<td>Equipment</td>
<td>1,061</td>
<td>-</td>
<td>1,061</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>46,686</strong></td>
<td><strong>6,600</strong></td>
<td><strong>53,286</strong></td>
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</table>
# PROPOSED MAINTENANCE/REPAIR PROJECTS
## 2012-2013
### $133,851

<table>
<thead>
<tr>
<th></th>
<th>Project Description</th>
<th>Estimates</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Remodeling (Materials Only)</td>
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</tr>
<tr>
<td></td>
<td>Main Building Room 230 (Classroom)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Main Building Room 235 (Classroom)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Main Building Room 238 (Classroom)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Career Center Room C37 (Classroom)</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Campus-wide Painting</td>
<td>14,000</td>
</tr>
<tr>
<td>3</td>
<td>Tile/Carpet Replacement</td>
<td>37,000</td>
</tr>
<tr>
<td>4</td>
<td>Elevator/Alarm/Pest Maintenance Contracts</td>
<td>16,000</td>
</tr>
<tr>
<td>5</td>
<td>Labor (Carpenter)</td>
<td>25,000</td>
</tr>
<tr>
<td>6</td>
<td>Main Campus Sidewalk Additions/Concrete Repair</td>
<td>10,000</td>
</tr>
<tr>
<td>7</td>
<td>Miscellaneous Projects/Bid Contingency Amount</td>
<td>6,851</td>
</tr>
</tbody>
</table>

**TOTAL:** $133,851
Moberly Area Community College
Tobacco Free Recommended Policy

Recommended effective date: August 1, 2012

Introduction
Moberly Area Community college is committed to providing a healthy educational setting and workplace not only for our students and employees, but also for those who visit our campuses and facilities. Moberly Area Community College has determined that all six campus sites (Moberly, Edina, Kirksville, Mexico, Hannibal and Columbia) will be tobacco-free in August, 2012. MACC joins a growing list of more over 400 colleges and universities nationwide that have enacted 100 percent tobacco-free policies. As part of this policy, no tobacco use of any kind will be permitted within the college property boundaries. Tobacco products affected by this policy include, but are not limited to, cigarettes, cigars, pipes and smokeless/spit tobacco (also known as dip, chew, or snuff). As an educational institution, we believe it is our obligation to lead by example and to provide a healthy educational environment for all.

This campus policy is in response to:
- exposure to second-hand smoke (SHS);
- desire to ensure clean air for all who come to the college;
- tobacco litter on the campus; and
- presence of underage students.

Moberly Area Community College prohibits the use of all tobacco products on all grounds and parking areas (traditional cigarettes, e-cigarettes, chew, pipes, cigars, hookah or waterpipe smoking, snus, snuff, etc.). Exceptions may be granted for specific auxiliary enterprises, as approved by the President.

No tobacco-related advertising or sponsorship shall be permitted on Moberly Area Community College property, at college-sponsored events or in publications produced by the college, with the exception of advertising in a newspaper or magazine that is not produced by Moberly Area Community College and which is lawfully sold, bought or distributed on campus property. For the purposes of this policy, “tobacco-related” applies to the use of a tobacco brand or corporate name, trademark, logo, symbol or motto, selling message, recognizable pattern of colors or any other indicia of product identification identical to or similar to, or identifiable with, those used for any brand of tobacco products or company which manufactures tobacco products.
Procedures

Communication
Persons will be informed of this policy through:

- signs posted in appropriate areas throughout the college;
- MACC website and houndmail;
- e-mail communication to all employees; and
- employee and student handbooks.

Enforcement
Enforcement of this policy will depend upon the cooperation of all faculty, staff, students and visitors not only to comply with this policy, but also to encourage others to comply with the policy, in order to promote a healthy environment in which to work and study.

Visitors, contractors, and other individuals on campus who are in violation of the policy should be reminded of the policy and asked to comply by discarding the tobacco product.

All staff, faculty, and students violating the policy should be reminded of the policy and asked to comply by discarding the tobacco product.

- If a student refuses to comply with the policy, the Dean of Student Services shall be contacted at ext. 11235. That office will follow up with the student regarding the policy and available resources. (Sanctions still to be developed.)
- If a staff or faculty member refuses to comply with the policy, the immediate supervisor shall be notified. The immediate supervisor will follow up with the employee to remind him/her about the policy and available resources. Continued violations may also result in appropriate disciplinary action up to and including dismissal.

Smoking Cessation Resources/Program
Moberly Area Community College will offer and promote prevention and education initiatives. We will actively support non-use and address the risks of all forms of tobacco use. And finally, provide services that include practical evidence-based approach to end tobacco use for students and employees who want to quit.

Moberly Area Community College will encourage any individual to enroll in a comprehensive smoking cessation program. All students, faculty and staff, who are interested, are encouraged to learn more about this program. For more information, call the Employee/Student Assistance Program at 800.832.8302 or visit the Employee/Student Assistance Program website at www.hhhealthassociates.com.
Policy Enforcement

The committee is suggesting that during the first year (2012-2013) is in place, voluntary compliance will be emphasized. Designated staff at each campus will monitor and enforce this policy. In the event that an individual or group was found using tobacco products, they will be given a verbal reminder with a review of the Tobacco-Free Policy and their compliance is requested.

In September, 2013 a penalty phase will be instituted for those using tobacco on MACC campuses. The penalty consists of a $25 fine or two hours of labor (picking up refuse on campus). This penalty will be invoked only after an administrator talked with the person about the policy and warned them that future violations could result in the penalty.

It is our intent to educate our students and employees about the policy then seek their compliance. From the beginning our committee sought to treat tobacco users with respect and dignity. The policy is not focused on getting adults to quit their use of tobacco though we offer assistance to those who wish to do so. Rather we emphasize the importance of respecting others. Ultimately the tobacco-free policy like all college policies becomes self enforced.
SCHOOL AFFILIATION AGREEMENT

This Agreement is made and entered into the \text{August} 1, 2012, by and between the Moberly Area Community College, as a member of the Missouri Health Professions Consortium (HEREINAFTER “SCHOOL”) and Audrain Health Care, Inc. dba Audrain Medical Center, (hereinafter “FACILITY”).

WHEREAS, SCHOOL, in conferring credentials upon its students, must provide and certify completion of certain practical learning and/or clinical experiences, some of which may involve interaction with patients; and:

WHEREAS, SCHOOL desires that certain of its students (“Students”) and, when appropriate, certain of its faculty members, be permitted to visit and utilize the premises of FACILITY to afford such Students the opportunity to have practical learning and clinical experiences at FACILITY; and

WHEREAS, FACILITY recognizes the need for and desires to aid in the educational development of nursing and/or ancillary health professionals, is an operating facility for the provision of health care services to its patients, and is willing to permit SCHOOL’S faculty and Students to participate in providing some of those services on its premises to the extent it is reasonable, proper, and professionally acceptable for them to do so.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

1. DUTIES OF SCHOOL

Prior to assigning Students to FACILITY, SCHOOL, shall:

1.1 Designate a member of its faculty (“Faculty Coordinator”) to coordinate this Agreement with a designated member of FACILITY’s staff, and obtain FACILITY’s written or verbal approval of such Faculty Coordinator, which such approval FACILITY shall not unreasonably withhold. The coordination shall include on-site visits when practical and a continuing exchange of information on progress of the program. SCHOOL shall obtain and provide verification of a criminal background check on the Faculty Coordinator as provided by Missouri law for health care workers. In the event adverse information is obtained from the criminal background check, SCHOOL shall provide the information obtained to FACILITY. Failure to provide the information obtained shall disqualify the designated Faculty Coordinator from participation at FACILITY. The results of the criminal background check must be satisfactory to FACILITY.

1.2 Recommend for affiliation only those Students who have successfully completed all necessary requirements of SCHOOL’s education program and any appropriate
professional requirements, and who have knowledge and skills consistent with an ability to properly discharge the clinical duties or functions associated with the clinical experiences in which the Students will participate:

1.3 Be responsible for orienting Students to those applicable policies and procedures provided by FACILITY to SCHOOL, including Student's responsibilities for the cost of his/her food, transportation, clothing and medical expenses, and to such other policies, procedures, rules and regulations as SCHOOL deems appropriate.

1.4 Provide FACILITY with the names, health status reports, including records of any immunizations required by FACILITY, and other pertinent information about each Student to be assigned to FACILITY before the beginning date of the Student's assignment at FACILITY.

1.5 Obtain FACILITY'S verbal or written approval of Students and periods of affiliation.

1.6 Advise Students to maintain the confidential nature of all information which may come to them with regard to patient and FACILITY records during the duration of the program. Each Student must sign a Statement of Confidentiality at the request of the Facility and complete the Facility's privacy training.

1.7 Keep all records and reports on each Student's experience:

1.8 Represent and certify that its teaching program for Students involved under this Agreement is accredited by the appropriate accrediting agency and that SCHOOL is responsible for notifying FACILITY within ten (ten) days in the event such accreditation is canceled, withdrawn or otherwise terminated; and

1.9 Obtain and provide verification of a criminal background check as provided by Missouri law for health care workers for each Student prior to that Student's assignment at FACILITY. In the event adverse information is obtained from the criminal background check, SCHOOL shall provide the information to FACILITY after obtaining an Authorization and Release from the STUDENT. In the event such Authorization and Release are not given by the STUDENT, the STUDENT shall be disqualified from participation at FACILITY. The results of the check must be satisfactory to FACILITY.

2. DUTIES OF FACULTY COORDINATOR. SCHOOL, through the Faculty Coordinator, shall:

2.1 Select, in cooperation with designated FACILITY personnel, the appropriate clinical experiences for Students;

2.2 Guide, coordinate and evaluate Students' performance at all times while Students are affiliated with FACILITY.
2.3 Meet with FACILITY personnel prior to and following Students’ affiliations, and at such times as either party shall deem appropriate, to evaluate Students’ performance and clinical experiences; and

2.4 Ensure that Students participate in ongoing training with respect to the learning and clinical experiences at the FACILITY, including but not limited to, being advised of any changes in FACILITY’s policies and procedures, which may impact Student’s expenses hereunder.

3. DUTIES OF FACILITY.

During this Agreement FACILITY shall:

3.1 Provide practical learning and/or clinical experience to Students assigned to FACILITY.

3.2 Maintain primary responsibility at all times for patient care and total health services.

3.3 Cooperate with the Faculty Coordinator in the selection of any appropriate clinical experiences for Students.

3.4 Provide physical space for faculty members and Students to hold conferences.

3.5 Provide SCHOOL with any applicable policies and procedures and inform SCHOOL, through the Faculty Coordinator, of any new applicable procedures and/or policies or any changes in procedures and/or policies which may affect the affiliation described hereunder; and

3.6 In the event of accidental injury or illness of any Student or faculty member, FACILITY shall, upon request, provide emergency care at FACILITY, but FACILITY shall not be responsible for follow-up care, hospitalization or costs incurred in providing such care.

3.7 Allow students to perform services for patients only when under the supervision of a registered, licensed or certified instructor or health professional. Such health professional is to be registered, certified or licensed in the discipline in which supervision is provided. Students shall work, perform assignments, participate in ward rounds, clinics, staff meetings, and in-service educational programs at the discretion of their supervisors designated by FACILITY.

4. TERMINATION OF STUDENT AFFILIATION. Upon the request of FACILITY, SCHOOL shall immediately withdraw a Student or SCHOOL faculty member, including Faculty Coordinator, from FACILITY in the sole discretion of FACILITY, with or
without cause, provided, however, FACILITY shall provide SCHOOL with written notice thereof within a reasonable time following the request for removal.

5. INSURANCE

5.1 For Students affiliating with FACILITY under this Agreement, SCHOOL will obtain and maintain in full force and effect for each Student and faculty member, including Faculty coordinator, assigned to FACILITY, throughout their clinical affiliation with FACILITY, professional liability insurance in minimum amounts of not less than Five Hundred Thousand Dollars ($500,000.00) per occurrence, One Million Dollars ($1,000,000.00) annual aggregate. If SCHOOL procures professional liability coverage that is not on an "occurrence basis," SCHOOL or Student shall, at all times, including without limitation, after the expiration or termination of this Agreement for any reason, maintain insurance coverage for medical professional liability directly or indirectly resulting from acts or omissions of SCHOOL or SCHOOL's employees and agents (including Student), occurring in whole or in part during the term of this Agreement ("Continuing Coverage"). SCHOOL may procure such Continuing Coverage by obtaining, at SCHOOL's expense, subsequent insurance policies that have a retroactive date of coverage on or before the Effective Date, by obtaining an extended reporting endorsement applicable to and with the same limits of insurance coverage maintained by SCHOOL during the term of this Agreement or by such other method reasonably acceptable to the parties.

5.2 In addition, SCHOOL shall obtain or require its students to obtain and keep in force, without lapse, general liability insurance on an occurrence basis for all its Students, employees and faculty members, including Faculty Coordinator, participating in training programs at FACILITY. The limits of general liability shall be One Million Dollars ($1,000,000.00) per occurrence, Two Million Dollars ($2,000,000.00) annual aggregate.

5.3 SCHOOL shall also maintain through the term of this Agreement, at its sole cost and expense, workers' compensation insurance for any employees of SCHOOL performing services under this Agreement.

5.4 SCHOOL shall furnish FACILITY with a certificate of insurance upon request showing that the applicable insurance coverage shown in Sections 5.1, 5.2 and 5.3 above before the beginning date of each Student's assignment at the FACILITY. Such certificate of insurance shall provide that FACILITY shall receive thirty (30) days' written notice prior to the effective date of any cancellation of such insurance.

5.5 It is understood that coverage of FACILITY and SCHOOL's Students, employees, and faculty, including Faculty Coordinator, under the above-referenced policies, or an acceptable substitute therefore, shall be a continuing
condition of this Agreement. SCHOOL shall be responsible for satisfying any deductible or self-insured retention required by its liability coverage.

6. TERM AND TERMINATION.

This Agreement shall be effective on \[\text{April 1, 2012}\] for an initial term of one (1) year unless earlier terminated as provided herein. Thereafter, this Agreement shall automatically renew for successive terms of one (1) year each. Notwithstanding the foregoing, either party may terminate this Agreement without cause at any time during a term by giving sixty (60) days' prior written notice, effective on the date stated therein. provided Students assigned to FACILITY shall be given an opportunity to complete their affiliation if reasonably practicable.

7. NOTICES.

All notices given pursuant to this Agreement shall be verified either by e-mail, fax or a telephone call to verify receipt by involved parties.

8. MUTUAL RESPONSIBILITIES.

8.1 SCHOOL and FACILITY agree that no individual will be discriminated against on the basis of age, race, religion, creed, sex, national origin, disability, sexual orientation or veteran's status.

8.2 Students and faculty members, including Faculty coordinator, shall remain at all times during this Agreement students and faculty members of SCHOOL and shall in no way be considered servants, agents, or employees of FACILITY. Students are trainees, not employees, and are not to replace FACILITY staff nor to be covered by FACILITY's Social Security, Workers' Compensation or Unemployment Compensation.

8.3 This Agreement shall not prevent FACILITY from accepting students for affiliation from other educational institutions.

8.4 This Agreement shall be construed and enforced in accordance with the laws of the State of Missouri.

8.5 This Agreement shall be binding upon and shall inure to the benefit of both parties and their respective successors, heirs, assigns and legal representatives. Neither this Agreement nor any rights hereunder may be assigned without the prior consent in writing of the non-assigning party; provided, however, that written consent is not required for FACILITY to assign this Agreement to any entity under common control, or affiliated, with FACILITY.

8.6 Individuals executing this Agreement on behalf of organizations represent and
warrant that they have been authorized to do so.

8.7 This Agreement contains the entire understanding of the parties relating to the subject matter of this Agreement. Any prior agreements, promises, negotiations or representations between the parties, either oral or written, relating to the subject matter of this Agreement not expressly set forth herein are of no force or effect. Any modifications or amendments hereto must be agreed to by both parties in writing and shall become effective on the date stated therein.

IN WITNESS WHEREOF, the parties hereto have entered into this Agreement as of the year and date first above written.

(Moberly Area Community College, as a Member of the Missouri Health Professions Consortium)

By: ____________________________
Name: Evelyn Jorgensen
Title: President

Fax #: __________________________

By: ____________________________
Name: __________________________
Title: __________________________

Fax #: __________________________

(Audrain Medical Center)

By: ____________________________
Name: Kari Wilson
Title: VP Clinical Services

Fax: ____________________________

By: ____________________________
Name: __________________________
Title: __________________________

Fax: ____________________________
<table>
<thead>
<tr>
<th>Immunization Requirement</th>
<th>Requirement Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measles/Mumps/Rubella</td>
<td>The student must provide documentation of receiving two doses of vaccine at least one month apart on or after his/her first birthday OR serologic evidence of immunity.</td>
</tr>
<tr>
<td>Varicella Zoster (chicken pox)</td>
<td>The student must provide either a physician's documentation of varicella OR serologic evidence of immunity OR documentation of two doses of vaccine at least four weeks apart.</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Any student with potential exposure to blood borne pathogens is expected to have completed the three shot series or in process thereof.</td>
</tr>
<tr>
<td>Influenza Vaccine</td>
<td>All students are expected to obtain an annual influenza vaccination.</td>
</tr>
<tr>
<td>Tuberculin Skin Test</td>
<td>All students are required to have a current (within one year) PPD. Students with documentation of a negative PPD skin test within one year prior to AMC training will require a repeat skin test within two years.</td>
</tr>
<tr>
<td>Pertussis</td>
<td>All students 19 – 64 years of age, must show proof of serologic immunity or has received one dose of Tdap.</td>
</tr>
</tbody>
</table>
AFFILIATION AGREEMENT

MOBERLY AREA COMMUNITY COLLEGE
As a Member of
Missouri Health Professions Consortium
Occupational Therapy Assistant Program

THIS COOPERATIVE AGREEMENT (hereinafter the “Agreement) is made and entered into this ___ day of _July 2012__ by and between MOBERLY AREA COMMUNITY COLLEGE (hereinafter the “College”) and Missouri Delta Medical Center (hereinafter called “Agency”).

WITNESSETH

WHEREAS, The College, as a member of the Missouri Health Professions Consortium (MHPC) has a program in Occupational Therapy Assistant (OTA) and is desirous of cooperating with the Agency for the benefit of MHPC OTA students as well as the benefit of the Agency and,

WHEREAS, the Agency is desirous of establishing a clinical educational program and of obtaining the educational and practical benefits to be derived from the carrying out of such a program and desires to cooperate with the college in this respect

NOW THEREFORE, in consideration of the mutual promises and for such other further considerations as hereinafter contained, the parties hereby agree on the following terms and conditions as follows:

1. RESPONSIBILITIES OF COLLEGE AS A MEMBER OF MHPC OTA PROGRAM

1.1 College will plan and implement an educational program for its students and will determine the adequacy of the educational experience of its students in theoretical training, basic skills in the provision of health care, professional ethics, attitude, and behavior. College will determine a student’s final grade. College will notify the agency of student(s)’ assignment(s), learning objectives related to the curriculum, and schedule(s), including the dates and purpose of affiliation, the name(s) of the student(s) and the level of academic preparation.

1.2 College will provide a qualified, Fieldwork Coordinator to oversee agency fieldwork educator and student educational relationships during clinical assignments

1.3 College will advise students assigned to agency of their responsibilities for complying with the policies, rules, and regulations of the agency.

1.4 Program will inform student(s) of their responsibilities to maintain and to provide upon request a current health record showing the student’s physical status, including Hepatitis B vaccination status and evidence of the student’s immunization for mumps, measles, and rubella (MMR), TB testing, training in Universal Precautions, and follow-up exposures.
1.5 The College shall provide medical professional liability protection for its students assigned to the Facility.

1.6 The College agrees to, at the written request of agency, remove from the agency’s program any student who, in the discretion of the agency, has performed unsatisfactorily or whose behavior or activities are inappropriate or detrimental to the agency’s provision of health care to its clients or which are contrary to the objectives of this Agreement. Requests for removal of a student must be provided in writing and should follow the following procedure:

a. If the agency deems a student’s performance to be unsatisfactory and detrimental to the agency’s health care responsibilities the agency may temporarily suspend the student from their program by written notice to the student and the MHPC OTA Program Academic Fieldwork Coordinator.

b. Agency, MHPC OTA Academic Fieldwork Coordinator, and Student will confer as soon as feasible following such temporary suspension to discuss reasons for the suspension and the possibility of student’s continuation in the program.

c. If the agency determines that the continuation of the student in the program would be detrimental to the agency’s health care responsibilities, the MHPC OTA Program and College will withdraw the student from the agency upon receiving written reasons from the agency for such determination.

d. If agency determines the student can continue in their program, then the learning objectives will be developed by the MHPC OTA Program Academic Fieldwork Educator, agency, and student for the remainder of the affiliation. The agency will provide makeup time for the student equal to the period the student was suspended.

1.7 College agrees to provide evaluating forms to agency to be utilized in rating student performance.

2. RESPONSIBILITIES OF THE AGENCY

2.1 The agency will appoint one of its employees, with the concurrence of the Program, as a Fieldwork Educator for each student(s). The Fieldwork Educator will be responsible for the planning and supervision of all experiences of the Student taking part in the educational program at the agency. The Fieldwork Educator will be available for meetings with the Program Academic Fieldwork Coordinator concerning the planning, implementation, and carrying out of the student educational program as necessary.

2.2 Agency will conduct a complete orientation for each student in respect to the policies of the agency, will provide each student with the necessary instructional materials to be utilized during the educational programs as well as provide a place for safekeeping of student belongings while participating in affiliation duties.

2.3 Agency understands that the student will participate in providing, but shall not be solely responsible for, patient services rendered at agency as part of the student’s experiences, including that students will also have the opportunity to participate in conferences and programs of interest which are related to their discipline. It is understood, however, that agency and the Fieldwork Educator has sole primary responsibility for patient care and treatment.
3. **RESPONSIBILITIES OF BOTH PARTIES**

3.1 Both parties acknowledge and agree to instruct student(s) on the importance of respecting the confidential nature of all information, which may come to them regarding agency protected health information while participating in the fieldwork education at the agency.

3.2 College will not discriminate against any student in its assignments to this program because of race, color, religion, sex, age, disability, marital status, parental status, or national origin. Agency will not discriminate against any employee or applicant for employment because of race, color, religion, sex, or national origin.

3.3 Both parties recognize that they are bound to comply with the Family Educational Rights and Privacy Act (FERPA or the Buckley Amendment) in the handling of educational records of students enrolled in their programs.

3.4 Both parties agree that any amendments to this Agreement will be effective only if in writing and signed by all parties.

4. **TERM AND TERMINATION**

This Agreement is valid beginning **July 1, 2012** and will remain in effect until terminated by either party. This Agreement may be terminated by either party upon notifying the other in writing sixty (60) days prior to the intended termination date. Such termination shall not, however, take effect with regard to Students enrolled in the Program until such Students have completed their clinical experience. The College and agency shall review this Agreement every 5 years. Pursuant to such review, the College shall issue a statement to the Agency for appropriate signatures to insure that this Agreement remains current and timely.

**Moberly Area Community College**

________________________________________

(Authorized Agent)

________________________________________

(Title)

________________________________________

(Date)

**Agency: Missouri Delta Medical Center**

________________________________________

(Authorized Agent)

________________________________________

(Title)

________________________________________

(Date)
EDUCATIONAL AFFILIATION AGREEMENT

This Educational Affiliation Agreement ("Agreement") is entered into effective as of the 1st day of August, 2012, by and between Via Christi Hospital Pittsburg, Inc. located in Pittsburg, Kansas, hereinafter called "Hospital," and Moberly Area Community College, as a member of the Missouri Health Professions Consortium located in Moberly, Missouri, hereinafter called "School".

RECITALS

1. Hospital operates acute-care hospital.

2. School offers an Occupational Therapy Assistant Program (the "Program") to enrolled students.

3. School desires to provide to its students clinical educational experiences through the application of knowledge and skills in clinical situations in hospital facilities.

4. Hospital has agreed to make its facility available to School for such clinical educational, training, and field internship experiences for the students enrolled in the Program.

NOW, THEREFORE, in consideration of the mutual promises contained herein, the parties hereby agree as follows:

TERMS

I. EDUCATIONAL PROGRAM.

School shall, in consultation with representatives of Hospital, plan and administer the educational program for its students at Hospital and shall assume the following responsibilities:

A. Overall Educational Plan: School shall provide Hospital with its overall plan for the use of clinical facilities at least three months prior to the commencement of the academic term. The plan shall include details of School's Program at Hospital, including the objectives, and approximate number of students for each term, dates, times, and levels of each student's academic preparation. School shall modify its educational program as necessary to accommodate the requirements of Hospital.

B. Compliance With Educational Standards: School will maintain the Program in continuing compliance with educational standards established by appropriate federal, state, and local accrediting agencies.

C. Student Names: School will provide the names of students as soon as possible after registration for each term, but in no event later than one week before the beginning of the clinical experience program at Hospital.
D. **Background Check.** Prior to clinical assignment of a student to Hospital, School shall conduct (or have conducted) a background check on each and every student assigned to Hospital and every member of the staff/faculty responsible for supervision and/or instruction of the students at Hospital. The background check may be either at School or student's expense. In the event School has students or staff/faculty on-site at Hospital prior to the execution of this Agreement, School shall immediately conduct a retrospective background check on the students.

E. **Pre-Clinical Training:** Students assigned to Hospital will be students of the Program. School agrees to provide adequate pre-clinical instruction to each student, in accordance with standards mutually agreeable to School and Hospital, and to present for clinical experience at Hospital only those students who have satisfactorily completed the pre-clinical instructional program.

F. **Compliance With Hospital Policies:** School shall instruct all of its students assigned to Hospital with regard to, and shall monitor compliance with, all rules, regulations and policies and procedures of Hospital, including but not limited to those relating to bloodborne pathogens, the confidentiality of patient and Hospital records and information, and to the responsibility and authority of the medical, nursing, and administrative staff of Hospital over patient care and Hospital administration. School shall instruct all of its students that identification badges must be worn at all times students are in Hospital. Documentation of the instructions required under this paragraph F shall be provided to Hospital.

G. **Educational Records:** School shall maintain all educational records and reports relating to the Program completed by individual students at Hospital, and Hospital shall have no responsibility respecting the same. Hospital shall refer all requests for information respecting such records to School. School agrees to comply with all applicable statutes, rules and regulations respecting the maintenance of and release of information from such records.

H. **Student Health Status:** Prior to beginning of the clinical learning/training experience, School shall furnish Hospital with written evidence that each student and clinical instructor participating in the clinical experience has undergone (1) HBV vaccination, or that such student has been informed of and advised to be so vaccinated but has refused; (2) rubella, and measles vaccination or established immunity; (3) current (within the last 12 months) negative TB skin test or chest x-ray; (4) has current CPR certification; and, (5) such other health-related certification requirements established by Hospital. School will maintain proof of these requirements on file.

I. **Student Discipline:** School shall have full responsibility for the conduct of any student disciplinary proceedings and shall conduct the same in accordance with all applicable statutes, rules, regulations and case law.
J. **Medical Insurance:** School shall ascertain and verify that each student and clinical instructor maintains medical insurance coverage for illness or injury while participating in the clinical experience and all School-related activities at Hospital.

K. **Declined Students:** No provision of this Agreement shall prevent Hospital from refusing to accept any student who has previously been discharged for cause as an employee of Hospital, who has been removed from or relieved of responsibilities for cause by Hospital, or who would not be eligible to be employed by Hospital. Hospital shall notify School in writing of its refusal to accept a student and the basis therefore and School shall not thereafter submit such student for clinical experience at Hospital. Hospital may submit a written request to School for the withdrawal of any student from the Program after the commencement of the student's clinical experience at Hospital for a reasonable cause related to the need for maintaining an acceptable standard of patient care, and School shall immediately comply with such request. The written request from Hospital shall set forth the basis for removal.

II. **PATIENT CARE PROGRAM.**

Hospital shall plan and administer all aspects of patient care at Hospital's facilities, and shall assume the following responsibilities:

A. **Supervision Of Students:** Hospital shall arrange the direct supervision of students in the clinical experience by one or more Occupational Therapist (OT) or Occupational Therapy Assistant (COTA) with at least one (1) year of professional experience. Prior to commencement of the educational/training experience, School and Hospital shall determine whether supervision of student activities at Hospital will be provided by Hospital personnel or School faculty. School warrants that in the event said preceptors are faculty of School, said personnel shall be (i) eligible to participate in any federal health care program, (ii) qualified with at least one (1) year of professional experience in the discipline said faculty will be supervising students and (iii) be appropriately licensed or certified in the State of Kansas as said discipline may require.

B. **Clinical Experience Coordinator:** Hospital shall designate a clinical experience coordinator to serve as the contact person with School faculty.

C. **Supervision Of Patient Care:** Hospital shall maintain responsibility for the provision of appropriate care to patients at Hospital. Hospital supervisory personnel may, in an emergency, or in certain cases based upon applicable standards of patient care, temporarily relieve a student from a specific assignment or require that such student leave an area or department pending a final determination of the future status of the student by the parties.

D. **Implementing the Student Experience:** All faculty members utilized by School shall be both competent teachers and licensed registered health care providers in the state of Kansas. Hospital shall cooperate with School in the planning and conduct of the students' clinical experience, to the end that the students' clinical experience may be appropriate in light of School's educational objectives.
E. **Non-Teaching Patients:** No provision of this Agreement shall prevent any patient from requesting not to be a teaching patient or prevent any member of Hospital medical staff from designating any patient as a nonteaching patient.

F. **Hospital Amenities:** Hospital shall make available to students the use of its cafeteria, conference rooms, dressing rooms and library as available and as required by the educational program and without charge except for food consumed by the students.

G. **Student Health Care:** Students may use the emergency and outpatient services of Hospital for the medical care of themselves while they are participating in the educational program at the cost customarily charged to the general public for such services.

III. **GENERAL PROVISIONS.** The parties mutually acknowledge and agree as follows:

A. **Acknowledgement of Responsibility:**

   (i) School agrees and acknowledges that it is responsible for any and all liabilities, obligations, damages, penalties, claims, costs and expenses, including, without limitation, reasonable attorneys' fees, paid or incurred as a result of or in connection with (i) any breach by School, any of its students, agents, contractors, employees, customers, invitees or licensees, of any covenant or condition of this Agreement, or (ii) the carelessness, negligence or improper conduct of School, any of its students, agents, contractors, employees, customers, invitees or licensees. If any action or proceeding is brought against Hospital by reason of any such claim, School, upon written notice from Hospital, will, at School's expense, resist or defend such action or proceeding by counsel approved by Hospital in writing.

   (ii) Hospital agrees and acknowledges that it is responsible for any and all liabilities, obligations, damages, penalties, claims, costs and expenses, including, without limitation, reasonable attorneys' fees, paid or incurred as a result of or in connection with (i) any breach by Hospital or any of its agents, contractors, employees, customers, invitees, or licensees, of any covenant or condition of this Agreement, or (ii) the carelessness, negligence or improper conduct of Hospital, any of its contractors, employees, customers, invitees or licensees. If any action or proceeding is brought against School by reason of any such claim, Hospital, upon written notice from School, will, at Hospital's expense, resist or defend such action or proceeding by counsel approved by School in writing.

   (iii) Notwithstanding any other provision of this Agreement to the contrary, the parties' obligations under the preceding two (2) paragraphs will survive the expiration or termination of this Agreement with respect to occurrences prior to the expiration or termination of this Agreement.
B. **Insurance:**

Throughout the term of this Agreement, School shall maintain in full force and effect comprehensive general liability and professional liability insurance covering School, its students and faculty wherever School's liability may exist. This comprehensive general liability insurance and professional liability insurance shall provide for liability limits of no less than $1,000,000 per occurrence/claim, $3,000,000 annual aggregate, respectively, for each type of coverage. If the coverage is on a claims-made basis, School shall provide for commercially reasonable tail coverage. All insurance shall be placed with an insurer admitted to do business in Kansas that is acceptable to Hospital. School shall furnish Hospital with written evidence of all insurances provided for in this Agreement no later than one week prior to the commencement of the clinical experience each academic year. School shall give Hospital at least ten (10) days' advance written notice of any threatened or actual cancellation, termination or modification of the insurance provided for herein.

C. **Legal Compliance:** Each party shall be separately responsible for compliance with all laws, including anti-discrimination laws, which may be applicable to their respective activities under this Agreement.

D. **HIPAA Compliance:** Hospital complies with the Health Insurance Portability and Accountability Act (HIPAA) of 1996 as may be amended from time to time, including amendments by the HITECH Act and shall direct all students/trainees to comply with the policies and procedures of Hospital, including those governing the use and disclosure of individually identifiable health information under federal law, specifically 45 CFR parts 160 and 164. Solely for the purpose of defining the students'/trainees' role in relation to the use and disclosure of protected health information (PHI), such students/trainees are defined as members of the Training Site's workforce, as that term is defined by 45 CFR 160.103, when engaged in activities pursuant to this Agreement. School will notify each student/trainee of his or her status and responsibilities under this Agreement regarding HIPAA and the use, disclosure, and security of PHI. Hospital will provide access to such information, including PHI, as indicated or as may be necessary to comply with the students/trainees educational plan. Hospital shall provide a statement of confidentiality and security (attached to this Agreement) to be signed by students, faculty, and other agents of School that have access to PHI and provide training to students/trainees, faculty and other agents of School regarding HIPAA and the appropriate use and disclosure of PHI in accordance with the policies and procedures of Hospital.

E. **No Employment Relationship:** Students and faculty of School shall not be deemed to be employees of Hospital for purposes of compensation, fringe benefits, workers' compensation, unemployment compensation, minimum wage laws, income tax withholding, social security or any other purpose, because of their participation in the Program. Each student is placed with Hospital to receive clinical experience as a part of his or her academic curriculum; those duties performed by a student are not performed as an employee, but in fulfillment of these academic requirements and are performed under supervision. At no time shall students replace or substitute for any employee of Hospital. This provision shall not be deemed to prohibit the employment of
any such student by Hospital under a separate employment agreement. School shall notify each
student of the content of this paragraph.

F. **No Monetary Consideration:** There shall be no monetary consideration paid by
either party to the other, it being acknowledged that the Program provided hereunder is mutually
beneficial. The parties shall cooperate in administering this Program in a manner which will tend to
maximize the mutual benefits provided to School and Hospital.

G. **No Third-Party Beneficiaries.** This Agreement is intended solely for the
mutual benefit of the parties hereto, and there is no intention, express or otherwise, to create any
rights or interests for any party or person other than Hospital and School; without limiting the
generality of the foregoing, no rights are intended to be created for any patient, student, parent or
guardian of any student, employer or prospective employer of any student.

H. **Independent Contractor.** In the performance of their respective duties and
obligations under this Agreement, each party is an independent contractor, and neither is the agent,
employee or servant of the other, and each is responsible only for its own conduct.

I. **Entire Agreement.** This Agreement constitutes the entire agreement between the
parties, and all prior discussions, agreements and understandings, whether verbal or in writing, are
hereby merged into this Agreement.

J. **Amendments to Agreement.** No amendment or modification to this Agreement,
including any amendment or modification of this paragraph, shall be effective unless the same is in
writing and signed by the party to be charged.

K. **Term of Agreement.** This Agreement shall become effective as of August 1,
2012, and shall continue thereafter until July 31, 2015, or terminated by either party upon thirty
(30) days' written notice of termination with or without cause.

L. **Notice.** Any Notice under this Agreement shall be directed to:

**Hospital:**
Via Christi Hospital Pittsburg, Inc.
1 Mt Carmel way
Pittsburg, KS 66762
Attention: Bill Aquino

**School:**
Moberly Area Community College
c/o MHPC OTA Program
203 Clark Hall
Columbia, MO 65211
Attention: Lea Brandt, Director
IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the
dates set opposite their respective signatures, below.

By: ____________________________
Its: ____________________________
DATE: __________________________

By: Evelyn Jorgenson
Its: President, Moberly Area Comm. College
DATE: __ ____________
STATEMENT OF CONFIDENTIALITY AND SECURITY

While participating in education and clinical education experiences, internships and other training/learning activities at Via Christi Hospital Pittsburg, Inc. ("Hospital") you may have access to information which is of a confidential nature. Any information, whether written, oral or in electronic form or medium, collected from a patient or patient representative which does or may identify the patient and has any relevance to patient care or patient condition, whether past, present or future, is considered Protected health Information (PHI) and is strictly confidential and must be maintained in a secure manner and may not be accessed, used or disclosed without appropriate authorization by a patient or patient representative, appropriate Hospital personnel or as may otherwise be required by law. Determinations of appropriate authorization may be made by a supervisor or Hospital representative only. Discussions regarding patients and/or Hospital information are restricted to the proper professional environment under supervision of appropriate personnel. Anyone participating in special education projects, clinical experiences, internships and other educational or training activities that have knowledge of an impermissible disclosure or breach of unsecured PHI must report this information to the Privacy Officer immediately. Anyone participating in special education projects, clinical experiences, internships and other educational or training activities at Hospital must report all security breaches, incidents, threats or violations that affect or may affect the confidentiality, integrity or availability of electronic PHI (EPHI) to the Hospital HIPAA Security Officer. Use or disclosure of PHI related to education projects, clinical experiences, internships and other training activities must be specifically approved through Hospital Administration. Use of Hospital information related to the education project, clinical experiences, other activities and internships must be approved through Hospital Administration.

Anyone participating in special education projects, clinical experiences, internships and other training and/or educational activities at Hospital must document receipt of information/training/orientation related to the HIPAA Privacy, Security and HITECH rules and regulations. The participant must acknowledge receipt of the Hospital Privacy & confidentiality Pamphlet: Obligations for Employees, Medical Staff, Volunteers, Students and Business Associates and/or the HIPAA Security Training Handbook.

Any research conducted under the auspices of Hospital that creates or uses Protected Health Information (PHI) is subject to the HIPAA and HITECH regulations. This includes such research activities as clinical pharmaceutical and device trials, chart reviews, behavioral, as well as basic science research activities. It includes research that involves treatment as well as research that provides neither treatment nor diagnosis.

By my signature, I verify that I have read the above information and agree to abide by Hospital policies pertaining to patient confidentiality, PHI and EPHI as required under the HIPAA Privacy, HITECH, HIPAA Security statutes, rules and regulations.

________________________
Print or type name

________________________
Educational Institution

________________________
Signature

________________________
Date
EDUCATIONAL AFFILIATION AGREEMENT

THIS EDUCATIONAL AFFILIATION AGREEMENT (this "Agreement") is entered into and effective as of this _1st_ day of _August, 2012_ ("Effective Date"), by and between CARONDELET HEALTH, a Missouri nonprofit corporation (hereinafter referred to as "Carondelet Health"), and MOBERLY AREA COMMUNITY COLLEGE, AS A MEMBER OF THE MISSOURI HEALTH PROFESSIONS CONSORTIUM (hereinafter referred to as "School").

WITNESSETH:

WHEREAS, Carondelet Health is the owner and operator of two acute-care hospitals known as St. Joseph Medical Center, located in Kansas City, Missouri, and St. Mary's Medical Center, located in Blue Springs, Missouri (each a "Carondelet Health Facility" and collectively referred to as "Carondelet Health Facilities");

WHEREAS, the School operates an accredited program(s) set forth on EXHIBIT A, attached hereto and incorporated herein (the "Program"), and desires to cooperate with Carondelet Health, on behalf of Carondelet Health Facilities, to offer students enrolled in the Program ("Students") the opportunity to participate in a clinical educational experience in the form of a clinical rotation/practicum at a Carondelet Health Facility ("Clinical Experience"); and

WHEREAS, Carondelet Health has the ability and is willing and able to offer Carondelet Health Facilities to function as sites for Clinical Experiences for Students.

THEREFORE, in consideration of the mutual promises and agreements set forth herein, the parties hereto agree to the following:

1. Student Assignment.

A. The School and Carondelet Health will mutually agree upon the dates, times, clinical areas and departments for Student placement and the goals and objectives of each Clinical Experience. Carondelet Health's acceptance of a Student for a Clinical Experience will not be unreasonably withheld, subject to Carondelet Health's determination of the number of Students to be accepted. School shall assign to Clinical Experiences only the number of Students mutually agreed upon by Carondelet Health and the School.

B. For each Student and School instructor ("Instructor") assigned to Carondelet Health, the School will provide, or cause each Student and Instructor to provide, Carondelet Health with a completed Verification of Required Documentation Statement in the form set forth on EXHIBIT B, attached hereto and incorporated herein, at least two (2) weeks prior to the beginning of the Clinical Experience(s). For Schools which were part of a task force comprised of the Collegiate Nurse Educators of Greater Kansas City (CNE) & Kansas City Area Nurse Executives (KCANE), the Verification of Required Documentation Statement may be completed and maintained at the school and will provided at the request of Carondelet Health. The School will also ensure that criminal background checks have been completed for Students prior to participating in Clinical Experiences. Such background checks will be kept on file at the School and will be made available to Carondelet Health upon request. Students participating in Clinical Experiences in the Well*Life department, Emergency Medical Technicians, and
high school students are exempt from the requirement to have a criminal background check.

C. Carondelet Health retains the right to remove from any Carondelet Health Facility, and subsequently request that School withdraw Student from Clinical Experience(s), any Student at any time, upon notice to the School, if such removal is in the best interests of Carondelet Health and its patients, as determined solely by Carondelet Health. The School will immediately comply with any such Carondelet Health request to withdraw a student from the Clinical Experience. All other Student conflicts will be resolved by a conference between authorized representatives of the School and Carondelet Health.

D. **Program Structure.** The clinical coursework will be completed at the School and at Carondelet Health and Carondelet Health Facilities in accordance with the clinical requirements of the Program and Clinical Experience set forth in EXHIBIT A (the "Requirements"). The School will identify and provide to Carondelet Health in advance the Requirements which Carondelet Health preceptors will be expected to provide to Students. All Requirements and any modifications thereto pertaining to the Clinical Experience are subject to the prior approval of Carondelet Health, which may be reasonably withheld.

2. **Student Participation.**

A. **Patient Activities.** The parties agree that Students will participate in providing patient services rendered at Carondelet Health Facilities as part of Students' Clinical Experiences. The parties further agree that Carondelet Health and Carondelet Health Facilities have final responsibility, authority and supervision over all aspects of patient care and service, and all Students and the School will at all times abide by such supervision. Students and Instructors assigned to Carondelet Health Facilities for Clinical Experiences will be subject to the rules and regulations of Carondelet Health and Carondelet Health Facilities including, but not limited to, all applicable certification and accreditation standards, HIPAA procedures governing the disclosure of individually identifiable health information, credentialing requirements, and employee and risk management policies.

B. **Student Agreement.** Each Student's participation in a Clinical Experience(s) is conditioned upon execution by that Student, and his/her parent or guardian if applicable, of the written agreement set forth on EXHIBIT C, which is attached and incorporated by reference ("Student Agreement"). Among other agreements contained in the Student Agreement, by executing the Student Agreement, the Student agrees to: (i) abide by the terms of this Agreement and all applicable Carondelet Health policies and procedures; (ii) abide by the aforementioned Ethical and Religious Directives for Catholic Health Care Services; and (iii) release Carondelet Health from any liability for loss or damage related to the Student's activities pursuant to this Agreement or the Student's property on Carondelet Health premises. Carondelet Health may refuse to accept a Student, if that Student, or his/her parent or guardian if applicable, fails to execute the Student Agreement.

C. **Emergency and Other Medical Care for Students.** Carondelet Health will provide necessary emergency care for Students while they are participating in Clinical
Experiences. However, each Student will be accountable for payment for all charges related to emergency medical care and any other medical care that he or she receives at a Carondelet Health Facility.

3. **Carondelet Health's Obligations.** With respect to Students' Clinical Experiences, Carondelet Health will:
   
   A. Provide clinical facilities and opportunities for the mutually agreed number of Students to observe and participate in various clinical and patient activities relevant to the Program in which the Student is currently enrolled.

   B. Provide Students with educational in-services and lectures as appropriate to their Clinical Experiences.

   C. Provide the School with feedback regarding the Student Clinical Experiences as reasonably requested by the School and notify the School in a timely manner of any unsatisfactory conduct or performance of any Student.

   D. Maintain administrative and professional supervision of Students insofar as their presence affects the operation of Carondelet Health Facilities and/or the care of patients. When requested and agreed to by the Carondelet Health Facility, Carondelet Health may provide qualified health care personnel to act as preceptors for Students participating in the Clinical Experience.

   E. Upon reasonable request, permit inspection of the clinical facilities and other items pertaining to the Clinical Experience, by the School and/or agencies charged with responsibility for accreditation of the Program.

   F. Provide orientation materials for the Students as to applicable Carondelet Health Facility policies, procedures, HIPAA compliance policies, the Carondelet Health Mission Statement, and the Ethical and Religious Directives for Catholic Health Care Services, the text of which may be found at www.usccb.org/bishops/directives.shtml and is incorporated by reference as though set forth herein.

   G. Provide necessary personal protective equipment for Students while assigned to Carondelet Health Facilities in compliance with OSHA Blood-Borne Pathogen Regulations, the Nuclear Regulatory Commission regulations, and other applicable federal and state health and safety regulations.

4. **School's Obligations.** With respect to Students' Clinical Experiences, School will:

   A. Operate all aspects of the Program in a fashion consistent with the standards of the appropriate accrediting agency and advise Carondelet Health immediately if the Program is ever investigated or, if its approval/accreditation is ever suspended, limited, terminated or ended for any reason.

   B. Assume responsibility for the education and clinical training program of Students participating in Clinical Experiences and assign to Carondelet Health only those Students who have satisfactorily completed the School's prerequisites for Clinical Experiences.
C. Maintain all education records and reports relating to its Students, and comply with all applicable statutes, rules and regulations respecting the maintenance of and release of information from such records. The School acknowledges and agrees that Carondelet Health will not have responsibility regarding such records and will accordingly refer all requests regarding such information to the School.

D. Ensure that Students are trained in compliance with OHSA Blood-Borne Pathogen Regulations and infection control procedures prior to assignment to a Carondelet Health Facility.

E. Take the necessary steps to assure that no Student is sent to any Carondelet Health Facility if such Student is known or should have been known to present a foreseeable harm to patient care or disruption to Carondelet Health operations. The School must make a determination as to the Student's ability to perform activities in the Clinical Experience and advise Carondelet Health of any requests or needs of the Student for accommodation.

F. Ensure that all Students are appropriately physically identifiable as students, and that all Students identify themselves appropriately as students in all communications with Carondelet Health employees, agents, Medical Staff members, and patients. The parties agree that a Student may be terminated from the Clinical Experience immediately for failure to appropriately identify himself/herself.

G. Ensure that each Student participating in a Clinical Experience at a Carondelet Health Facility will be provided HIPAA compliance education prior to the start of the Clinical Experience. The training will include (i) a general overview of the privacy regulations; (ii) the duty of Students to maintain the confidentiality of patient information; (iii) the uses and disclosures that Students may make; and (iv) patient rights under the privacy regulations. Upon request by Carondelet Health, the School will provide evidence of any or all participating Students' training.

H. Provide, or cause each Student and Instructor to provide, documentation of appropriate immunization of Students and Instructors, as required pursuant to EXHIBIT B. Upon the request of Carondelet Health, School will provide a complete Student health history record. If the record is not provided within a reasonable period of time; Carondelet Health deems the record unsatisfactory; or, based on the record, it appears the Student may pose a risk to the health or safety of Carondelet Health personnel or patients, Carondelet Health may refuse the Student access to any or all Carondelet Health Facilities.

I. Notify the Carondelet Health Facility's Employee Health Department promptly of any exposure to disease or illness or injury reported by or occurring to any Student or Instructor participating in a Clinical Experience, regardless of whether such event occurred at a Carondelet Health Facility.

J. Apprise Carondelet Health of any other condition of which it becomes aware, related to the health of its Students or Instructors who are participating in Clinical Experiences and who perform duties on Carondelet Health's premises, which
condition may have a bearing upon the Student's functioning in the assigned clinical environment, or upon Carondelet Health's operation or quality of patient care, and upon receiving such notice, Carondelet Health may elect that School withdraw the Student or Instructor from the Clinical Experience(s).

K. Report to Carondelet Health if a Student or Instructor contracts an infectious disease during the period of time that he or she is participating in the Clinical Experience. If requested, such Student or Instructor must submit proof of recovery to Carondelet Health prior to returning to a Carondelet Health Facility for a Clinical Experience.

L. If School is part of CNE/KCANE, will provide each Student with a copy of the current Clinical Orientation Manual published by the Collaborative Project of Collegiate Nurse Educators of Greater Kansas City and Kansas City Area Nurse Executives (the "Manual"), and assign to Carondelet Health for Clinical Experiences only those Students who have passed the Manual's Orientation Competency Examination. Upon request, the School shall provide evidence of each Student's examination results.

5. Term and Termination.

A. Term. This Agreement shall be for a term of one (1) year, commencing on the Effective Date and expiring on __July 31, 20__11, unless earlier terminated as provided herein. This Agreement will automatically renew for up to two (2) additional one-year periods, unless either party hereto provides the other with written notice of its intent not to renew at least thirty (30) days prior to the expiration of the then-current term.

B. Termination.

i. Either party may terminate this Agreement with or without cause upon providing the other party with thirty (30) days advance written notice of its intent to terminate; provided, however, that any Student who is participating in a Clinical Experience at a Carondelet Health Facility at the time of notice of termination will be permitted to complete the originally scheduled training.

ii. This Agreement may also be terminated at any time by mutual written agreement of the parties upon the terms and date stipulated therein. In such case, all Students assigned to a Carondelet Health Facility may be reassigned by the School to other clinical education experiences.

iii. This Agreement may also be terminated in the manner specified in any provisions herein.

iv. Upon termination of this Agreement, neither party shall have any further obligation hereunder, except for obligations accruing prior to the date of termination.
6. **Insurance and Indemnification.**

A. For each Student participating in a Clinical Experience throughout the term of this Agreement, the School will maintain an insurance policy with coverage in the amount of least $1,000,000 per occurrence and $3,000,000 in the aggregate. Such coverage will apply to the Students' and Instructors' activities conducted within the scope of Clinical Experiences. All deductibles and/or self-insurance levels shall be the responsibility of the School. The School will notify Carondelet Health within five (5) days of any lapse, cancellation or modification of mandatory minimum insurance, and further agrees that Carondelet Health may immediately remove any and all Students and Instructors from Carondelet Health Facilities and terminate this Agreement by giving ten (10) days written notice based on School's failure to comply with or maintain the required coverage. Upon request, the School will provide Carondelet Health a Certificate of Insurance or other adequate documentation demonstrating compliance with the required coverages set forth above. The School shall notify Carondelet Health of any incident, event or occurrence as well as any actual or potential claims related to the Clinical Experience(s) or actions of a Student or Instructor within forty-eight (48) hours of identification of such an event.

B. Carondelet Health shall indemnify and hold harmless the School, its directors, officers, employees, agents, representatives, successors, assigns and subcontractors against all actions, all losses, damages, costs and expenses including but not limited to attorney's fees resulting in directly or indirectly as a result of negligence, intentional or unintentional act or acts of omission of Carondelet Health in connection with Carondelet Health's, its directors, officers', employees', agents', representatives', successors', assigns', and subcontractors' obligations under this Agreement.

C. School shall indemnify and hold harmless Carondelet Health, its directors, officers, employees, agents, representatives, successors, assigns and subcontractors against all actions, all losses, damages, costs and expenses including but not limited to attorney's fees resulting in directly or indirectly as a result of negligence, intentional or unintentional act or acts of omission of the School in connection with the School's, its directors, officers', employees', agents', representatives', successors', assigns', subcontractors', and Students' obligations under this Agreement. Students shall be considered agents of the School while acting within the scope of their Clinical Experiences and their acts are therefore the responsibility of the School.

7. **HIPAA Compliance.** School and all of School's employees, agents, and Students providing or receiving services as required under this Agreement will comply with all federal and state mandated regulations, rules or orders applicable to privacy, security and electronic transactions, including without limitation, regulations promulgated under Title II Subtitle F of the Health Insurance Portability and Accountability Act (Public Law 104-191) ("HIPAA"). Furthermore, the parties shall promptly amend this Agreement to conform with any new or revised legislation, rules and regulations to which Carondelet Health is subject now or in the future including, without limitation, the Standards for Privacy of Individually Identifiable Health Information or similar legislation (collectively, "Privacy Laws") in order to ensure that they are at all times in conformance with all Privacy Laws. If, within thirty (30) days of either party first providing notice to the other
of the need to amend the Agreement to comply with Privacy Laws, the parties, acting in
good faith, are (i) unable to mutually agree upon and make amendments or alterations to
this Agreement to meet the requirements in question, or (ii) alternatively, the parties
determine in good faith that amendments or alterations to the requirements are not
feasible, then either party may terminate this Agreement upon thirty (30) days prior
written notice. School further agrees that this is a material provision of the Agreement
and that its breach by any School employee, agent, or Student may result in the
immediate termination of this Agreement. Notwithstanding the foregoing, the parties
acknowledge and agree that Students may use patient information for educational
purposes only at the Carondelet Health Facility and at the School; provided, however,
that all information used for such purposes is appropriately de-identified in accordance
with HIPAA prior to such use.

8. **Compliance with Laws.** The parties agree that this Agreement is intended to comply
with all applicable state and federal laws, rules, and regulations (collectively, "Laws"). If
either party reasonably believes that this Agreement violates any Laws, then it shall
inform the other party and the parties shall negotiate in good faith to amend this
Agreement. If the Agreement cannot be amended to eliminate the problematic
provision, then either party may terminate this Agreement upon thirty (30) days written
notice to the other.

9. **Corporate Compliance.** School acknowledges that Carondelet Health has in place a
Corporate Responsibility Plan ("CRP"), the goal of which is to promote compliance with
all applicable federal, state and local laws and regulations within all Carondelet Health
organizations and affiliates. The CRP specifically focuses on risk identification and
management, the promotion of good corporate citizenship, the commitment of upholding
a high standard of ethical and legal business practices and the prevention of
misconduct. School further acknowledges Carondelet Health's commitment to the CRP
and agrees to provide, and cause its Students and Instructors to provide, the services
required by this Agreement in accordance with the highest ethical standards and all
applicable laws, regulations and statutes.

10. **Compliance with Ethical and Religious Directives.** During the term of this
Agreement, School agrees to comply, and to cause its Students and Instructors to
comply, with the Ethical and Religious Directives for Catholic Health Care Services, as
approved and amended from time to time by the United States Conference of Catholic
Bishops and implemented by the Bishop of the Diocese of Kansas City while providing
services hereunder.

11. **Confidentiality.** In the course of Students and Instructors participating in Clinical
Experiences hereunder, School, Instructors and Students may acquire valuable
proprietary data and other confidential information with respect to Carondelet Health's
activities. The parties agree that such proprietary data and other confidential information
may include, but are not limited to, the following: Carondelet Health's business and
financial methods and practices, pricing and marketing techniques, file or database
materials, computer programs, personnel information/records, aggregated patient
demographic information, data on Carondelet Health suppliers, and information relating
to Carondelet Health's current or future affiliates. School, Instructors and Students,
during the term of this Agreement and thereafter, will not, without the express written
consent of Carondelet Health, directly or indirectly communicate or divulge, or use for
School's, Instructor's and Students' own benefit or the benefit of any other person, firm,
association or client, any of Carondelet Health's or its affiliates' proprietary data or other confidential information, which were communicated to or otherwise learned by School, Instructors and Students in the course of the relationship covered by this Agreement. School and Students may, however, disclose such matters to the extent that disclosure is required (a) in the course of the relationship with Carondelet Health, or (b) by a court or governmental agency of competent jurisdiction. As long as such matters remain proprietary data or other confidential information, School, Instructors and Students will not use such proprietary data or other confidential information in any way or in any capacity other than as an independent contractor providing services for Carondelet Health and to further Carondelet Health's interests.

All patient care information obtained by the Student during the course of the Clinical Experience is to be considered confidential and is not to be released or shared in any form without the approval of Carondelet Health unless required by law. Students may be required sign a confidentiality agreement upon Carondelet Health's request in a form provided by Carondelet Health.


A. Independent Contractors. Both parties hereto are independent entities and neither will have nor exercise any control over the means, manner or method by which the other performs its obligations under this Agreement. Nothing contained in this Agreement will be deemed or construed by the parties or by any third person to create the relationship of principal and agent or of partnership and joint venture. Likewise, the Students assigned to Carondelet Health for the purpose of completing Clinical Experiences are not Carondelet Health employees and are not entitled to any benefits of employees, including, but not limited to, fringe benefits, unemployment compensation, minimum wage laws, social security and worker's compensation coverage.

B. Non-Discrimination. Neither Carondelet Health nor the School will discriminate against any applicant to, or Student in, the Clinical Experience on the basis of race, color, age, religious affiliation, gender, national origin, sexual orientation or disability.

C. Mutual Benefit. The parties acknowledge that there is no monetary consideration paid by either party under this Agreement, it being acknowledged that the Clinical Experiences provided hereunder are mutually beneficial. Further, the parties acknowledge that no Student or Instructor will receive monetary compensation in exchange for patient care activities and services performed as a part of and within the scope of a Clinical Experience. The parties acknowledge and agree that there is no intention, express or otherwise, to create any rights or interests for any party or person under this Agreement other than the parties hereto.

D. Other Affiliations. The parties agree that either party may enter into agreements for educational experiences with other institutions at any time.

E. Non-Teaching Patients. No provision of this Agreement will prevent any patient of a Carondelet Health Facility from requesting to not be a teaching patient or prevent any member of the Medical Staff from designating any patient as a non-teaching patient.
F. **Notices.** Any notice required by this Agreement shall be in writing and delivered in person, evidenced by a signed receipt, or mailed certified mail to the persons indicated below:

**If to Carondelet Health:**
Carondelet Health  
Attn: Chief Financial Officer  
1000 Carondelet Drive  
Kansas City, Missouri 64114

**With a Copy To:**
Carondelet Health  
Attn: General Counsel  
1100 Walnut, Suite 2925  
Kansas City, Missouri 64106

**If to School:**
Moberly Area Community College,  
c/o MHPC OTA Program  
Attn: Lea Brandt, Director  
203 Clark Hall  
Columbia, MO 65211

G. **Miscellaneous.** The invalidity or unenforceability of any term or provision hereof shall in no way affect the validity or enforceability of any other term or provision of this Agreement. This Agreement contains the entire agreement between the parties relating to the rights herein granted and obligations herein assumed, and supersedes any prior arrangement, understanding or communication between the parties regarding the subject matter hereof, and there are no oral agreements existing between the parties related to this transaction that are not expressly set forth herein. Any assignment, modification, alteration, revision, amendment or extension of this Agreement shall be in writing and signed by all parties. A waiver by either of the parties of any provision shall not waive any other provision or be construed as a waiver of any subsequent breach hereof. No person or entity, except the parties shall be beneficiaries of any kind of the terms to this Agreement. The terms and provisions of this Agreement shall be governed by the laws of the State of Missouri, without regard to any conflict of law provisions. The headings in this Agreement are inserted for convenience of reference only and shall not affect the meaning or interpretation of this Agreement. This Agreement may be executed in two or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument.

**IN WITNESS THEREOF,** the parties hereto have made and executed this agreement as indicated below.

**MOBERLY AREA COMMUNITY COLLEGE**

By: ______________________________  
Its: **Evelyn Jorgenson, President**

**CARONDELET HEALTH**

By: ______________________________  
Steven R. Cleary, VP & CFO

9
## EXHIBIT A

**Listing of the Accredited Program(s) and Clinical Requirements of the Program(s) or Clinical Experience**

<table>
<thead>
<tr>
<th>Educational Program (i.e., type of program)</th>
<th>Duration of Rotation or Clinical Experience</th>
<th>Clinical Program Requirements</th>
<th>Results (i.e., degree awarded)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational Therapy Assistant</td>
<td>Eight (8) Weeks</td>
<td>Level I fieldwork = 32 hours</td>
<td>Associate of Applied Science in Occupational Therapy Assistant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Level II fieldwork = 320 hours</td>
<td></td>
</tr>
</tbody>
</table>
EXHIBIT B

Verification of Required Documentation Statement

Please complete the following information for each student scheduled to participate in clinical rotations at SJMC or SMMC and return to the appropriate CH Education Coordinator at least two weeks prior to the first day of the clinical rotation.

Date/Term: ____________________

Name of School Representative/Instructor: ____________________ Title: ____________________

Academic Institution: ____________________ Program: ____________________

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Criminal Background Check</th>
<th>Safety/Infect. Control &amp; HIPAA/Confidentiality</th>
<th>Current BLS Expiration Date</th>
<th>Hep B or Waiver Dates of vaccination or titer</th>
<th>MMR Dates of vaccination or screen/titer</th>
<th>Tetanus &amp; Diphtheria Dates of booster</th>
<th>Tb Skin Test Date of negative skin test or chest x-ray</th>
<th>Chicken Pox Date of vaccination or titer</th>
</tr>
</thead>
<tbody>
<tr>
<td>EXAMPLE: John Doe</td>
<td>Completed 8/08</td>
<td>Lab: 6/4 &amp; 12/08; Passed KCANE Orientation exam</td>
<td>Exp. 3/30/10</td>
<td>1st 1/14/08 2nd 3/25/08 3rd 7/3/08</td>
<td>Titer 1/8/08</td>
<td>Booster 5/9/07</td>
<td>Neg. skin test 8/08</td>
<td>Titer 2/4/07</td>
</tr>
<tr>
<td>Student Name</td>
<td>Criminal Background Check Date of completion</td>
<td>Safety/Infect. Control &amp; HIPAA/Confidentiality Date training completed</td>
<td>Current BLS Expiration Date</td>
<td>Hep B or Waiver Dates of vaccination series or titer</td>
<td>MMR Dates of vaccination or screen/titer</td>
<td>Tetanus &amp; Diphtheria Dates of booster</td>
<td>Tb Skin Test Date of negative skin test or chest x-ray</td>
<td>Chicken Pox Date of vaccination or titer</td>
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</tbody>
</table>
EXHIBIT C

STUDENT AGREEMENT – CLINICAL EXPERIENCE

I, ______________________, a student at _______________________________ ("School") in the _______________________________ Program desire the opportunity to obtain clinical experience through participation in a clinical rotation at Carondelet Health (hereinafter referred to as "Clinical Experience"), and hereby agree to the following:

1. I understand and agree to abide by: (i) the applicable terms and conditions of the Educational Affiliation Agreement between my School and Carondelet Health; (ii) all applicable Carondelet Health policies and procedures; and (iii) the Ethical and Religious Directives for Catholic Health Care Services as found at www.usccb.org/bishops/directives.shtml. I further understand and agree that failure to do so may result in the immediate termination of my participation in the aforementioned Clinical Experience.

2. I understand and agree that I shall not use or disclose to any third party any trade secrets and/or confidential information, facts or documents relating in any way to Carondelet Health's business operations, patients, suppliers, vendors, personnel, contracts or financial condition or any other confidential or proprietary information except as necessary to the completion of my Clinical Experience. I understand the foregoing does not apply to publicly available information or information required by court order or applicable law.

3. I have been provided the necessary HIPAA training and understand and agree to: (i) appropriately access and disclose patient information; (ii) appropriately use the Carondelet Health information system; and (iii) use reasonable safeguards to prevent unauthorized access to or disclosure of Carondelet Health patient information.

4. I understand and agree that when I am participating in the Clinical Experience, I am not, and will not be, an employee of Carondelet Health and will therefore not be eligible for any of the compensation or benefits that Carondelet Health employees receive.

5. I authorize all necessary exchanges of information between Carondelet Health and my School related to me and my participation in the Clinical Experience.

6. I agree to clearly identify myself as a student, both visually by the wearing of a name badge and in all written and verbal communication, to all patients, providers, and staff during my Clinical Experience.

7. I agree to act only within the scope of my Clinical Experience and, at such times as are necessary, will immediately attempt to resolve any question or doubt I have as to the extent of that scope with the appropriate Carondelet Health supervisor.

8. I have been appropriately immunized as required under the Educational Affiliation Agreement and agree to submit to any additional health examinations that might be necessary to my participation in the Clinical Experience and further agree to make the results of any such additional examinations available to Carondelet Health upon request.

9. I understand that Carondelet Health may make emergency care available to me during the term of my Clinical Experience and that such emergency care will not be given without charge. I agree that I will be financially responsible for any medical care provided by any Carondelet Health Facility, including any emergency care.

10. I understand and agree that Carondelet Health retains the right to remove me at any time, if Carondelet Health deems such removal to be in the best interests of Carondelet Health and its patients.

11. I agree to release Carondelet Health from any liability for the loss of or damage to my personal property while on Carondelet Health property. I agree to be liable for and indemnify Carondelet
Health for any claims made against Carondelet Health which are based solely on any of my activities. By signing this Agreement, I, and my parent or guardian if applicable, acknowledge that I understand the dangers of participating in the Clinical Experience and hereby release Carondelet Health, its administration, board of directors, employees and agents from any and all liability from my participating in the Clinical Experience. I agree that this Student Agreement shall be binding and of full force and effect upon my heirs, assigns, executors, personal representatives, and guardians, including parents, durable powers of attorney or next of kin.

STUDENT:

Signature ___________________________ Date ___________________________

Printed Name ___________________________ Program ___________________________

PARENT/GUARDIAN (If Student is a minor): I hereby agree to the above terms on behalf of the above-named student.

Signature ___________________________ Date ___________________________

Printed Name ___________________________ Program ___________________________
Presented to Board of Trustees
June 26, 2012

TestMart Package T2310421
ORDER NO: ____________

TestMart Package Date: 5/11/2012
TestMart Package Quote Valid Until: 8/9/2012

Elsevier Sales Rep: Carol E Thomas
Elsevier Phone: (636) 391-2317

Moberly Area Comm College
Primary Contact: Terry Bichsel

IT contact is used to test the secure browser
IT Contact: Amy Johns or Justin Forte'
IT Email: amyj@macc.edu
IT Phone: 660-263-4110

Account Name: Moberly Area Comm College
Customer Service 800-950-2728
Fax order to Houston 713-346-6975

Access Code Recipient: Terry Bichsel
Access Code Email: terryb@macc.edu
Access Code Phone: 660-263-4110
Alt Access Code Recipient: Terry Bichsel
Alt Access Code Email: terryb@macc.edu
Alt Access Code Phone: 660-263-4110

Special Instructions:
IT contact is used to test the secure browser
IT Contact: Amy Johns or Justin Forte'
IT Email: amyj@macc.edu
IT Phone: 660-263-4110

Purchase Order: ____________

Need Quote by 5/25/12 no later than 5/28/12
June for for July 2012 Board Meeting.

T2310421 LVN Moberly 32 Grad Jul 2013

<table>
<thead>
<tr>
<th>Format</th>
<th>Program Type</th>
<th>Billing</th>
<th>Invoice Timing</th>
<th>Paid By</th>
<th>Total Student Cost</th>
<th>Terms</th>
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<tr>
<td>iNet</td>
<td>LVN</td>
<td>Program</td>
<td>3</td>
<td>Institution</td>
<td>$248.00</td>
<td>30 Days</td>
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PNCCP
Moberly Area Comm College PN Custom Testing Package

Exams

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<thead>
<tr>
<th>Exams</th>
<th>Term</th>
<th>Test1:</th>
<th>Test2:</th>
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<tr>
<td>CPNSPDC PN Specialty Dosage And Calculation</td>
<td>1</td>
<td>11/13/2012</td>
<td>11/14/2012</td>
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<td>CPNSPFUN (+V V2') PN Specialty Fundamentals of Nursing (V1 &amp; V2')</td>
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<td>11/15/2012</td>
<td>11/15/2012</td>
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<td>CPNSSPEDI PN Specialty Pediatric Nursing</td>
<td>2</td>
<td>03/12/2013</td>
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<td>CPNSPPHARM (V1 &amp; V2') PN Specialty Pharmacology</td>
<td>2</td>
<td>03/14/2013</td>
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<tr>
<td>CPNSPMAT PN Specialty Maternity Nursing</td>
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<tr>
<td>CPNSPMS (+V2') PN Specialty Medical-Surgical Nursing (V1 &amp; V2')</td>
<td>3</td>
<td>07/09/2013</td>
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<tr>
<td>CPNSPPSY PN Specialty Psychiatric/Mental Health Nursing</td>
<td>3</td>
<td>07/11/2013</td>
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<tr>
<td>CNEXIT (+V2') PN Exit (V1 &amp; V2')</td>
<td>3</td>
<td>07/11/2013</td>
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Evolve Products

<table>
<thead>
<tr>
<th>Evolve Products</th>
<th>Term</th>
<th>Test1:</th>
<th>Test2:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>CPNSPST PN Practice Test and Case Studies</td>
<td>1</td>
<td>07/30/2012</td>
<td>07/30/2012</td>
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</tr>
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</table>

INSTALLMENT PAYMENT PLAN BILLING DATES
Any increase in Cohort after billing starts will be prorated

<table>
<thead>
<tr>
<th>Billing Period</th>
<th>1st Invoice</th>
<th>2nd Billing</th>
<th>3rd Billing</th>
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</thead>
<tbody>
<tr>
<td>Invoice Date</td>
<td>7/30/2012</td>
<td>12/3/2012</td>
<td>6/3/2013</td>
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<tr>
<td>Per Student Per Invoice</td>
<td>$82.67</td>
<td>$82.67</td>
<td>$82.66</td>
</tr>
<tr>
<td>Last Day to change Cohort</td>
<td>7/16/2012</td>
<td>12/2/2012</td>
<td>6/2/2013</td>
</tr>
<tr>
<td>Institution Invoice Total</td>
<td>$2,645.44</td>
<td>$2,645.44</td>
<td>$2,645.12</td>
</tr>
</tbody>
</table>

Approval Signature: ________________

Per Student Testing Order Total $248.00 $7,936.00

The above outlines the financial commitment to your testing program. Signing the testing package indicates that you understand the billing related to the testing and review products. No Deliveries will be made until this signed Package is Faxed to Houston. A2 or Review books are to be paid in the 1st billing. All billing dates are nullified if deliveries are requested earlier.
Testing Package T2310424

ORDER NO: ____________

Testing Package Date 5/11/2012

Elsevier Sales Rep: Carol E Thomas
Elsevier Phone: 314-496-8928

Account Name: Moberly Area Community College
Primary Contact: Ryan House
Phone: 660-263-4110
Ship to Street: 2900 Dorell Ln
Ship to City: Mexico
Ship to State/Zip: MO 65265

Special Instructions:
Need Quote by 5/25/12 no later than 5/28/12
June for for July 2012 Board Meeting.

Testing Package Date 5/11/2012
Testing Package Quote Valid Until 8/9/2012

IT contact is used to test the secure browser
IT Contact: Donnie Meader
IT Email: dmeador@macc.edu
IT Phone: 573-582-0817

Summary Report Recipient: Ryan House
Report Email: 

Evolve Course Recipient: Ryan House
Begin: Fall 2012 Graduating: Sum 2013 7/26/2013 Cohort 30

T2310424_LVN Mexico 30 Grad Jul 2013

<table>
<thead>
<tr>
<th>Format</th>
<th>Program Type</th>
<th>Billing</th>
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PNCCP Moberly Area Community College PN Custom Testing Package

Exams

<table>
<thead>
<tr>
<th>Exam Code</th>
<th>Specialty</th>
<th>Term</th>
<th>Test 1</th>
<th>Test 2</th>
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</thead>
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<td>11/01/2012</td>
<td>11/01/2012</td>
</tr>
<tr>
<td>CPNSPFUN (+V1 &amp; V2)</td>
<td>PN Specialty Fundamentals of Nursing</td>
<td>1</td>
<td>11/01/2012</td>
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<tr>
<td>CPNSPEDI</td>
<td>PN Specialty Pediatric Nursing</td>
<td>2</td>
<td>03/01/2013</td>
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<tr>
<td>CPNSPPHARM (+V1 &amp; V2)</td>
<td>PN Specialty Pharmacology</td>
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<tr>
<td>CPNSPMMAT</td>
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<td>CPNSPPSY</td>
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<td>3</td>
<td>05/01/2013</td>
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<td>CNEXIT (+V2)</td>
<td>PN Exit</td>
<td>3</td>
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<td>07/11/2013</td>
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Evolve Products

<table>
<thead>
<tr>
<th>Exam Code</th>
<th>Product</th>
<th>Term</th>
<th>Test 1</th>
<th>Test 2</th>
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</thead>
<tbody>
<tr>
<td>CPNCSPT</td>
<td>PN Practice Test and Case Studies</td>
<td>1</td>
<td>07/30/2012</td>
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</tbody>
</table>

INSTALLMENT PAYMENT PLAN BILLING DATES - Any increase in Cohort after billing starts will be prorated

<table>
<thead>
<tr>
<th>Invoicing Period</th>
<th>1st Invoice</th>
<th>2nd Billing</th>
<th>3rd Billing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Invoice Date</td>
<td>7/30/2012</td>
<td>12/3/2012</td>
<td>6/3/2013</td>
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<tr>
<td>Per Student Per Invoice</td>
<td>$82.67</td>
<td>$82.67</td>
<td>$82.66</td>
</tr>
<tr>
<td>Last Day to change Cohort</td>
<td>7/16/2012</td>
<td>12/2/2012</td>
<td>6/2/2013</td>
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<tr>
<td>Institution invoice Total</td>
<td>$2,480.10</td>
<td>$2,480.10</td>
<td>$2,479.80</td>
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</tbody>
</table>

Per Student Testing | $248.00

Approval Signature: ____________________________

The above outlines the financial commitment to your testing program. Signing the testing package indicates that you understand the billing related to the testing and review products. No Deliveries will be made until this signed Package is Faxed to Houston. A2 or Review books are to be paid in the 1st billing. All billing dates are nullified if deliveries are requested earlier.
1. Program or Certificate Name:

Industrial Electrical Technician Certificate

2. Check Degree Type: AA ___ AAS ___ ADN ___ AS ___ AAT ___ Certificate ___ X ___

3. CIP Code: 15.0303

4. List of Supporting Courses: (and, if new, new/piloted, or revised, attach relevant proposal forms):

The Industrial Electrical Technician Certificate would be awarded upon successful completion of all the required courses listed below plus directed elective courses totaling a minimum of 32 credit hours.

**Required Courses**
- EET100 DC/AC Electronics 3
- EET101 Industrial Electricity 3
- EET104 Electrical Print Reading 3
- EET111 Electric Motor Controls 3
- CIT102 Introduction to Information Technology 3
- CIT105 Programming I 3

  Note: It is recommended that students take CIT102 prior to enrolling in CIT105

- DDT112 Computer-Aided Design I 3
- IND101 Fundamentals of Industrial Maintenance 3
- IND105 Fluid Power Principles 3
- MTH130 Technical Mathematics 3

**Directed Electives**
- IND103 Industrial Safety and Health 3
- IND104 Industrial Materials and Processes 3
- IND 295 Industrial Technology Internship 2-6
- MSP101 Machine Tool I 3
5. **Justification for New Program or Certificate (e.g., Advisory Committee and Division minutes):**

Area employers have indicated a desire for MACC to offer an electrical certificate since the deactivation of the EET degree program. With the economy slowly regaining momentum and the increased interest in advanced manufacturing in the area, requests for this type of training are increasing and demand for workers with this specialized skill set is much greater than the number of qualified job applicants.

6. **Budgetary Implications: (equipment, research, software, instructor development/training and promotion/advertising, added instructors, consultant, etc.)**

None. All courses required for this certificate are required for other Career and Technical degree programs.

7. **Funding Source for Associated Costs: (grant, donations, restricted funding, department budget, etc.)**

Department budget

8. **Describe implications for Articulation Agreements:**

None

9. **Recommended Effective Date of Implementation:**

Fall 2012

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Revised 3/10/11
<table>
<thead>
<tr>
<th>Item Description</th>
<th>Period</th>
<th>Quantity</th>
<th>Required Retention Period</th>
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</thead>
<tbody>
<tr>
<td><strong>Financial Aid:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial Aid Documents</td>
<td>Prior to FY09</td>
<td>20 boxes</td>
<td>Three (3) years after graduation or last date of attendance</td>
</tr>
<tr>
<td>Canceled Checks - Financial Aid</td>
<td>Prior to FY07</td>
<td>4 boxes</td>
<td>Five (5) years including completion of audit</td>
</tr>
<tr>
<td>Scholarship Applications</td>
<td>Prior to FY07</td>
<td>2 boxes</td>
<td>Five (5) years after graduation or date of last attendance</td>
</tr>
<tr>
<td>FAFSA import/receipt records</td>
<td>Prior to FY09</td>
<td>2 boxes</td>
<td>Three (3) years after graduation or last date of attendance</td>
</tr>
<tr>
<td>Return of Federal Funds reports</td>
<td>Prior to FY09</td>
<td>2 boxes</td>
<td>Three (3) years after graduation or last date of attendance</td>
</tr>
<tr>
<td>A+ enrollment forms, documentation</td>
<td>Prior to FY07</td>
<td>5 boxes</td>
<td>Five (5) years after graduation or date of last attendance</td>
</tr>
<tr>
<td><strong>Office of Student Services:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Documents for Applicants who never enrolled:</strong></td>
<td></td>
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</tr>
<tr>
<td>Applications for admission</td>
<td>Prior to FY11</td>
<td>10 boxes</td>
<td>One (1) year after application term</td>
</tr>
<tr>
<td>Correspondence, student</td>
<td>Prior to FY11</td>
<td>2 boxes</td>
<td>One (1) year after application term</td>
</tr>
<tr>
<td>Transcripts - High School</td>
<td>Prior to FY11</td>
<td>3 boxes</td>
<td>One (1) year after application term</td>
</tr>
<tr>
<td>Transcripts - Other Colleges</td>
<td>Prior to FY11</td>
<td>3 boxes</td>
<td>One (1) year after application term</td>
</tr>
<tr>
<td><strong>Documents for Applicants who entered:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applications for admission</td>
<td>Prior to FY04</td>
<td>15 boxes</td>
<td>Five (5) yrs after graduation or last date attendance</td>
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<tr>
<td>Correspondence, student</td>
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<td>5 boxes</td>
<td>Five (5) yrs after graduation or last date attendance</td>
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<tr>
<td>Enrollment forms</td>
<td>Prior to FY11</td>
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<td>One (1) year after graduation or date of last attendance</td>
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<tr>
<td>Transcripts - High School</td>
<td>Prior to FY07</td>
<td>15 boxes</td>
<td>Five (5) yrs after graduation or last date attendance</td>
</tr>
<tr>
<td>Transcripts - Other Colleges</td>
<td>Prior to FY07</td>
<td>15 boxes</td>
<td>Five (5) yrs after graduation or last date attendance</td>
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<tr>
<td><strong>Registration and Records Data Documents:</strong></td>
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</tr>
<tr>
<td>Application for Graduation</td>
<td>Prior to FY12</td>
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<td>One (1) year after graduation or date of last attendance</td>
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<tr>
<td>Change of Course Forms</td>
<td>Prior to FY12</td>
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<td>One (1) year after date submitted</td>
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<tr>
<td>Graduation Authorizations</td>
<td>Prior to FY07</td>
<td>6 boxes</td>
<td>Five (5) yrs after graduation or last date attendance</td>
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<tr>
<td>Transcript request forms</td>
<td>Prior to FY12</td>
<td>15 boxes</td>
<td>One (1) year after date submitted</td>
</tr>
</tbody>
</table>
ADMISSION

M.020.2

7. Veterans' Benefits
   Students who are eligible for veterans' benefits should contact the Moberly Area Community College Financial Aid Office or their local Veterans Administration Office. Veterans' benefits may be affected if the minimum standards of progress as required by the Veterans Administration and Public Law 94-502 are not met.

   Veterans may receive two credit hours of Physical Education for military training programs according to eligibility, application and submission of qualifying documentation. Academic credit for military/educational training earned while serving in the armed forces based on evaluation and recommendation from the American Council on Education (ACE). Veterans requesting credit for military experience must submit an official copy of their ACE transcript to the MACC Registrar. This information will then be evaluated by the Registrar and the Dean of Academic Affairs or the Dean of Career and Technical Education.
Presented to Board of Trustees  
June 26, 2012  
MUS135 MACC Jazz Ensemble  
MUS136 MACC Jazz Ensemble  
MUS235 MACC Jazz Ensemble  
MUS236 MACC Jazz Ensemble  
April 18, 2012  

MOBERLY AREA COMMUNITY COLLEGE  

REVISED COURSE PROPOSAL FORM  
http://www.macc.edu/~aa/cc_info  

1. Check all that apply to reflect the proposed revisions:  
   ___ Revised course name  
   ___ Revised prefix  
   ___ Revised course number  
   ___ Revised number of lecture, lab, contact, and/or credit hours  
   ___ Revised Pre-requisite  
   ___ Revised Co-requisite  
   [X] Revised course description  
   ___ Revised number of times a course may be repeated for credit  
   ___ Revised type of degree: AA ___ AAS ___ ADN ___ AS ___ AAT ___ Certificate ___  
   ___ Revised type of Program Major for:  
      AA ___ AAS ___ ADN ___ AS ___ AAT ___ Certificate ___  
   ___ Revised requirement, elective, or humanities elective status  
   ___ Revised Assessment/General Education Outcomes  
   ___ Revised request for 42-hour-block consideration  
   ___ Other (explain)  

2. State the proposed revision(s) in terms of From and To:  
   
   From: The application of style and technique of all types of jazz is approached. Students learn the development of jazz from its beginning to styles being performed today. Course is open to all students. As a laboratory experience, the jazz band performs at all home basketball games, plays several concerts for local civic organizations, and tours with the MACC Singers in the surrounding area. Course may be repeated for credit four times. (IN)  

   To: Students will study and apply the fundamentals of the various styles of Jazz Music. Historical and theoretical aspects associated with the performance of Jazz will be incorporated into each rehearsal. Performances will be an integral part of the class and vital to student success. Performances will be scheduled for selected home basketball games, community events and other opportunities. The course may be repeated for credit four times. (IN)
3. Justification for the proposed revision(s):

With this being the first time in several years that an instrumental ensemble has been offered, it will be necessary to amend the course description to more adequately reflect the content and performance obligations of a beginning band program.

4. Recommended Effective Date of Implementation:

Fall 2012 semester.

Revised 4/18/12
MOBERLY AREA COMMUNITY COLLEGE
New Course Proposal Form
http://www.macc.edu/~aa/cc_info

Check all that apply:

___ x New course
___ New course that has already been piloted successfully for one term

1. Course Prefix, Number, and Name:
   (Please consult the Registrar for the recommended course number and CIP code).
   DEV019 Computer Assisted Prealgebra IV

2. CIP Code: 32.0104

3. Intended level
   ___ 100 level ___ 200 level ___ x Developmental course

4. Number of Lecture Hours: 1

5. Number of Lab Hours: 0

6. Number of Contact Hours: 1

7. Number of Credit Hours: 1

8. Term(s) to be offered (check all that apply): FA ___ SP x SU x IN

9. Number of times course may be repeated for credit:

10. Will there be a Pre-requisite___ yes ___ Co-requisite ______ for this course:
    If so, what?

    Successful completion of DEV016, DEV017 or DEV018 and instructor approval.

11. Will this course be a Pre-and/or Co-requisite Courses/Skills for a course: yes
    If so, what?

    Successful completion of module 8 satisfies the prerequisite for any math class for which
    DEV010 is a prerequisite and successful completion of module 16 satisfies the
    prerequisite for any class for which DEV011 is a prerequisite.

12. Catalog Course Description: DEV 019 Computer Assisted Pre-Algebra IV

    Students who need 3 or fewer modules to satisfy the prerequisite for a subsequent
math class may enroll in this class to complete those modules. Instructor approval is required. Students who pass module 16 have met the prerequisite for MTH100. Students who pass module 8 have met the prerequisites for any class for which DEV010 is a prerequisite.

13. Check the type of Degree this course would support:

   AA  x  AAS  x  ADN  x  AS  x  and/or Certificate Program  x  

14. Name of Program Major that this course would support (if applicable):

15. Check all that are relevant:

   Required  ____  Elective  ____  or Humanities elective  ____

16. Justification for curricular change (if Career and Technical, e.g. advisory committee support; also show comparable courses taught in state):

   This course is being set up as an additional shell for those students who have three or fewer modules to complete in order to reach the prerequisite for a subsequent mathematics class. This will potentially allow students to save money when they have minimal work left to complete the necessary prerequisites.

17. Explanation of research done to ensure compatibility with courses (100 and 200 level) in Missouri institutions of higher learning (e.g., MU offers Korean language and literature courses, KOR 101-204) or accrediting agencies.

   This course content is the same as our current DEV010 and DEV011 courses.

18. For AA courses, explain the direct connection to the Assessment/General Education Outcomes.

   This course remediates gaps in mathematical knowledge to prepare students for college level coursework.

19. For Career and Technical courses, explain the direct connection to Program Assessment Plan Student Outcomes.

20. What will be the extra cost to student: (e.g., digital camera; welding helmet)

   None.

21. What will be the extra cost to the college: (e.g., lab, equipment, etc.)

   We will be utilizing current multimedia classrooms and portable laptops acquired through the B-TOP grant.
22. Describe new course's evaluation component for assessment of student learning as well as assessment of the course:

Students will be required to earn 75% on each content module before moving to the next. Students will be keeping a notebook, working homework problems and testing on each module. Students will be tracked through College Algebra to compare their success with students in traditional developmental math courses.

23. Do you want this course to be considered for the 42-hour block? ____ yes; ___ no.

24. Will this course be cross-listed? If "yes," explain: ____ yes; ___ no.

25. Will this course be cross-scheduled? If "yes," explain: ___ yes; ____ no.

The course will be cross-scheduled with DEV016 and DEV017 and DEV018.

26. Other

Students must have instructor approval to enroll in this course.

Revised 11/10/06
1. Program or Certificate Name: (include affected program emphasis areas also)

Business and Office Technology Medical Office Certificate

2. Check Degree Type: AA____ AAS____ ADN____ AS ____ AAT ____ Certificate X ____

3. CIP Code: 51.0716

4. Summary of Proposed Program or Certificate Changes: (Use attachments as necessary, i.e., draft of program course sequence, as well as a narrative summary)

- BOE 110 Intermediate Word Processing is being moved from the Directed Electives list to the Required Courses list.
- Course prefix of BOE 171 Medical Terminology has been changed to HSC 171 Medical Terminology (approved at the March 21, 2012 Curriculum Committee meeting).

**Current Certificate Requirements**

<table>
<thead>
<tr>
<th>Required Courses</th>
<th>Proposed Certificate Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>BOE 106 Business &amp; Office Tech Essentials 3</td>
<td>BOE 106 Business &amp; Office Tech Essentials 3</td>
</tr>
<tr>
<td>BOE 171 Medical Terminology 3</td>
<td><strong>BOE 110 Intermediate Word Processing</strong> 3</td>
</tr>
<tr>
<td>BOE 175 Medical Office Coding 3</td>
<td>BOE 175 Medical Office Coding 3</td>
</tr>
<tr>
<td>BOE 273 Medical Office Insurance 3</td>
<td>BOE 273 Medical Office Insurance 3</td>
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<tr>
<td>BOE 284 Professional Transcription 3</td>
<td>BOE 284 Professional Transcription 3</td>
</tr>
<tr>
<td>BIO 205 Human Anatomy 4</td>
<td>BIO 205 Human Anatomy 4</td>
</tr>
</tbody>
</table>

**Directed Electives**

- BOE 110 Intermediate Word Processing 3
- BOE 120 Customer Service 3
- BOE 151 Records Management 3
- BOE 152 Business Math/Elect. Calculations 3
- BOE 261 Spreadsheet Applications 3
- BOE 263 Business Software Applications 3
- BOE 264 Database Management 3
- BOE 295 Business & Office Tech Internship 2-3
- ACC 100 Small Business Accounting 3
- BUS 150 Business English/Comm. 3
- SKL 101 College Orientation 1
- SKL 250 Employment Seminar 1

**Proposed Certificate Requirements**

<table>
<thead>
<tr>
<th>Required Courses</th>
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</tr>
</thead>
<tbody>
<tr>
<td>BOE 106 Business &amp; Office Tech Essentials 3</td>
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</tr>
<tr>
<td><strong>BOE 110 Intermediate Word Processing</strong> 3</td>
<td>BOE 110 Intermediate Word Processing 3</td>
</tr>
<tr>
<td>BOE 175 Medical Office Coding 3</td>
<td>BOE 175 Medical Office Coding 3</td>
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<tr>
<td>BOE 273 Medical Office Insurance 3</td>
<td>BOE 273 Medical Office Insurance 3</td>
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<tr>
<td>BOE 284 Professional Transcription 3</td>
<td>BOE 284 Professional Transcription 3</td>
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<tr>
<td>BIO 205 Human Anatomy 4</td>
<td>BIO 205 Human Anatomy 4</td>
</tr>
<tr>
<td><strong>HSC 171 Medical Terminology</strong> 3</td>
<td>HSC 171 Medical Terminology 3</td>
</tr>
</tbody>
</table>

Certificate is granted upon successful completion of all required courses plus directed elective courses totaling a minimum of 32 credit hours.
5. List of Supporting Course Changes: (list course change/new course forms that will accompany this recommended program or certificate change)

None

6. Justification of Change(s) (Attach support information including the specific change(s) to and from):

Development of more advanced word processing skills acquired through successful completion of BOE 110 Intermediate Word Processing will more adequately prepare students for entry-level positions in a medical office setting. Additionally, this course is a pre-requisite for BOE 284 Professional Transcription. Including BOE 110 as a required course rather than a directed elective will facilitate advising and help ensure that students take courses following the recommended sequence.

7. Budgetary Implications: (equipment, research, software, instructor development/training and promotion/advertising, added instructors)

None

8. Funding Source for Associated Costs: (grant, donations, restricted funding, department budget, etc.)

Department budget

9. Describe the implications for Transfer/Articulation Agreements:

None

10. Number of Declared Program or Certificate Majors Now:

Business and Office Technology-AAS degree-Medical Option: 57
Business and Office Technology Medical Office Certificate: 2

11. Date of Most Recent Program Review:

2007

12. Recommended Effective Date of Implementation:

Fall 2012

Revised 3/10/11