



**CAREER & TECHNICAL EDUCATION - CERTIFICATE**

**Gerontology Aide\***

**PROGRAM WORKSHEET AND GRADUATION REQUIREMENTS**

**Student Name:** \_\_\_\_\_ **Aims #:** \_\_\_\_\_ **Graduation Evaluator:** \_\_\_\_\_

**Advisor:** \_\_\_\_\_ **Ext:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<u>Course Number</u>	<u>Requirements</u>	<u>Required Credits</u>	<u>Term Completed</u>	<u>Transfer Credits</u>	<u>Transfer School</u>	<u>Needs</u>
HWE 112	Health and Wellness for the Elderly	3	_____	_____	_____	_____
EMS 134	The Geriatric Patient	1	_____	_____	_____	_____
EMS 151	Geriatric Emergencies	3	_____	_____	_____	_____
<b>TOTAL CREDITS FOR CERTIFICATE:</b>		<b>7</b>				