



# Workforce Investment Act Eligible Training Program

Provider Name: Community College of Rhode Island

Contract #: 4050-62

Address: 400 East Avenue  
Warwick, RI 02886

Address if program is held at a another site:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Program Name: Medical Transcription Certificate

Office use only: ONET CODE 31-9094

### CONTACT INFORMATION

Program Contact Person: Teresa Squizzero, Chairperson

Phone: 401-825-2155  
Email: tsquizzero@ccri.edu

Fax: 401-825-2283 OFTD Dept  
Website: www.ccr.edu/oftd

### Course Outline/Topics to be Covered

The Medical Transcription Certificate Program prepares students for employment in the health field. Students are trained in the use of medical terminology, the transcription of various types of medical reports and the handling of medical office duties. Cooperative work experience in a medical office is a requirement of this program. Job opportunities for graduates are projected to remain constant.

### Required academic grade levels to enter program

Reading Grade Level 9  
Math Grade Level 9  
English Proficiency Grade 9

### Required to enter training program

Physical  Yes  No  
Vaccinations  Yes  No  
Drug test  Yes  No  
BCI  Yes  No  
License  Yes  No  
Tools  Yes  No  
Experience  Yes  No

Other : \* High School Graduate or GED

\* Must be able to type at a minimum rate of 25 net words per minute or take additional semester to complete.

### MAY be required for employment

Physical  Yes  No  
Vaccinations  Yes  No  
Drug test  Yes  No  
BCI  Yes  No  
Certification  Yes  No  
License  Yes  No  
Tools  Yes  No  
Experience  Yes  No  
Other :

### Participants will be qualified to seek employment in the following occupations:

- 1) Medical Transcriptionist 2) \_\_\_\_\_
- 3) \_\_\_\_\_ 4) \_\_\_\_\_

### Is this program Pell grant eligible?

Yes  No

### PROGRAM COSTS:

TUITION INCLUDES:	
Tuition	\$4,000.00
Fees	\$420.00
Books	\$1,900.00
Licensing	
Certificate (graduation)fees	\$40.00
Other, provide explanation	
Lab Fees	\$100.00
<b>Total Tuition Cost</b>	<b>\$6,460.00</b>

These are expenses that <u>MAY</u> be reimbursed after successful completion of training.			
Please indicate Yes, No or enter the amount			
	YES	NO	AMOUNT
Books	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Licensing	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Tools	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Uniforms	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Travel	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Miscellaneous	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>Total</b>			<b>\$0.00</b>

Participant is responsible for :	
Prerequisites	_____
Memberships	_____
_____	_____
_____	_____
_____	_____
<b>Cost above tuition cap</b>	<b>\$960.00</b>
<b>Expenses that <u>MAY</u> be reimbursed</b>	<b>\$0.00</b>
<b>Total</b>	<b>\$960.00</b>

**Maximum ITA Responsibility (Max. \$5500)**  
  
**\$5,500.00**

### PROGRAM LENGTH

Weeks and Hours and Additional Information

This is a 2 semester program; 15-17 credits per semester  
\* High School Graduate or GED  
\*Must be able to type at a minimum rate of 25 net words per minute or take additional semester to complete.

### What type of certificate will be awarded and by whom?

Medical Transcription Certificate, Community College of RI  
VA Approved