



Nursing Assistant

Overview of the health care system and role of the nursing assistant as a health care team member. Discussions on the concepts of basic human needs, professional behavior, communication, legal/ethical issues, and multicultural diversity.

Teaches basic nursing skills, including:

- Ambulating
- Bathing
- Blood pressure
- Dressing
- Oral care
- Toileting

Included in this course are classroom and lab experiences in a health care setting.

Book and materials may be purchased online, at the SCC Campus Store or by phone. Students must bring book to the first class.

- sccbookstore.com
- SCC-Lincoln - 8800 O St.,
402-437-2560 or 800-642-4075, ext. 2560
- SCC-Beatrice - 4771 W. Scott Road,
402-228-8267 or 800-233-5027, ext. 1267

Please order book and materials at least 7-10 working days in advance.

Need assistance paying for your course? You may qualify for Gap assistance. Please reach out to Heather Bloomquist at 402-323-3394 or hbloomquist@southeast.edu before your class begins to see if you might qualify.

Students must be 16 years of age prior to the start of classes. Attendance is crucial to the success of this class. Absences may result in failure of the class. No-shows do not receive an automatic refund.

Course is approved by the Nebraska Department of Health and Human Services Regulation and Licensure. Upon successful completion of this course, the student is eligible to test for placement on the Nebraska Nursing Assistant Registry.

QUESTIONS?

Natasha Holly

402-437-2552 or nholly@southeast.edu

Aug. 18-Oct. 8, 2025 Plattsmouth, NE

(Hybrid Course—Must have internet access)

Lab Location:

Learning Center at Plattsmouth,
Room 101
537 Main St. • 402-437-2298

Lab Schedule:

Tues. & Thurs. from 4:30-9 p.m.

Semester Credits: 3.0

Cost: NE Resident: \$375
Non-Resident: \$438
(includes credit class fee)

Course Number: HLTH-1150-HBPL8

High school students in SCC's service area can register for the "HS" sections during the Fall and Spring terms. If you are a high school student outside of SCC's service area, please register for the regular Nursing Assistant sections.

For full details or
to see other class
location offerings





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|------------------------------------|--|--|--|---|--|---|--|
| Legal Name: Last | | First | | Middle | | SCC ID Number | |
| Former Last Name: | | Email Address: (required for students on class waitlists) | | | | | |
| Local / Preferred Mailing Address: | | City | | State | | Zip | |
| Permanent Address: | | City | | State | | Zip | |
| Birth Date: / / | | Sex assigned at birth: (federal reporting requirement) <input type="checkbox"/> Male <input type="checkbox"/> Female | | Ethnicity (select one): <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino | | Race (select one or more): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White | |
| Cell Phone: | | Home Phone: | | <input type="checkbox"/> Resident of Nebraska | | <input type="checkbox"/> Non-Resident | |
| High School Attended / GED*: | | City | | State | | Start Date (mo/year) | |
| | | | | | | Graduation Date (mo/year) | |
| College Attended Post High School: | | City | | State | | Start Date (mo/year) | |
| | | | | | | End Date (mo/year) | |

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Student
Signature

Program Chair/Advisor Signature

Written or digital signature required. Typed signatures (including cursive fonts) will not be accepted.

Submission of this form indicates that I understand:

1. My information is complete and I am accountable for the tuition and fees and subject to a grade in the courses listed;
2. To drop or withdraw from classes, I must submit an "Official Drop/Add Form for Credit Classes" in writing to the Registration Office located in Enrollment Management **or** drop the classes using Self Service Student Planning. Failure to attend a course does not constitute an official drop;
3. I understand tuition charges and refund policies are published in the College Catalog;
4. The personal information contained herein is correct as shown; and
5. Any changes in SSN, legal name, address, residency, etc., must follow the College procedures in the College Catalog.

Southeast Community College is an Equal-Opportunity co-educational college and does not discriminate based on race, color, religion, sex*, age, marital status, national origin, ethnicity, veteran status, sexual orientation, disability, or other factors prohibited by law or College policy.

*The U.S. Department of Education's Office for Civil Rights enforces Title IX's prohibition on discrimination on the basis of sex to also include discrimination based on gender identity.

La política pública de Southeast Community College es de proveer equidad, y prohíbe discriminación, en todos asuntos referentes a la admisión, participación, y empleo contra toda persona por motivo de raza, color, religión, sexo*, edad, estado civil, origen nacional, etnia, condición de veterano, orientación sexual, incapacidad, y otros factores prohibidos por ley o política del Colegio.

*Oficina de Derechos Civiles del Departamento de Educación de los Estados Unidos hace cumplir la prohibición del Título IX contra discriminación por motivos de sexo, que también incluye la discriminación basada en la identidad de género.

A0029 - Reg & Records (10/24)