

Medication Aide



The purpose of the Medication Aide position is to provide a safe way for individuals other than licensed health care professionals (doctors, nurses, etc.) to provide medications to individuals who are not able to take medications by themselves. Medication Aides assist with the provision of medications. You must be at least 18 years of age or older to be employed as a medication aide in the state of Nebraska.

State laws control the activities of a Medication Aide. These laws ensure the health, safety, and welfare of people by providing for the accurate, cost-effective, efficient, and safe utilization of Medication Aides to assist in administration of medications.

Book 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 at least 7-10 working days in advance.

QUESTIONS?

Natasha Holly

402-437-2552 or nholly@southeast.edu

Aug. 19-Oct. 9, 2025 Nebraska City, NE

(Hybrid Course—Must have internet access)

Lab Location:

Learning Center at Nebraska City,
Room 101
1406 Central Ave. • 402-323-3636

Lab Schedule:

Tues. & Thurs. from 5:30-8:30 p.m.

Semester Credits: 2.5

Cost: NE Resident: \$312.50
Non-Resident: \$365
(includes credit class fee)

Course Number: HLTH-1040-HBNC8

For full details or
to see other class
location offerings





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:		
High School Attended / GED*:	City	State	Start Date (mo/year)
College Attended Post High School:	City	State	Start Date (mo/year)

TERM

Year: 20 **25** —
☒ Fall ☐ Spring ☐ Summer

☐ Undeclared
☐ Declared (list program of study)

VETERAN OR DEPENDENT
UTILIZING MILITARY BENEFITS

☐ Yes ☐ No

Day designations when class meets are:
M = Monday, T = Tuesday,
W = Wednesday
R = Thursday, F = Friday
S = Saturday, U = Sunday
**(T R means class meets
Tuesday AND Thursday)**

[illegible]

Completed form should be submitted to the Registration & Records Office in person or by FAX at 402-437-2670. To upload electronically, contact the Registration & Records Office at 402-437-2605 for the secure upload link.

Program Chair/Advisor Signature _____	
<p>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.</p> <p>*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.</p>	<p>La política publica de Southeast Community College es de proveer equidad, y prohíbe discriminación, en todos asuntos referentes a la raza, 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, u otros factores prohibidos por ley o política del colegio.</p> <p>*La 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.</p>

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.

A0029 - Reg & Records (10/24)