

Student Name:_

Certified Medication Aide (CMA)

Total Credit Hours 5					
REQ	UIREMENTS				
	NAID 1235	Medication Aide			5
Tota	l				5
ide t fter	raining) successful completi	Certified Nurse Aide ce	students will be el		
dus	try certification: Ka	nsas CMA Examination			
					Review Date: 09/2
					Effective Date: 08/2

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Placement Scores: ___English ___Math ___Reading

ID#:__