



WAYNE COMMUNITY COLLEGE

# **MEDICAL ASSISTING Advanced Standing**

## **Spring Semester 2026 Admission Policies and Procedures**

This application packet can be accessed at:  
<https://www.waynecc.edu/admissions/allied-health/>

This information supersedes all previously published information.

**Apply September 2, 2025 – November 6, 2025 for earliest consideration.**  
Applications received after November 6, 2025 will be considered on a monthly basis.  
Applicants may apply for only one limited health occupations program per semester.

It is the policy of Wayne Community College that all persons have equal opportunity and access to its educational programs, services, activities, and facilities without regard to race, religion, color, sex, age, national origin or ancestry, marital status, parental status, sexual orientation, disability or status as a veteran. WCC is an Affirmative Action institution. This material may be available in alternative formats.

Wayne Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award associate degrees. Degree-granting institutions also may offer credentials such as certificates and diplomas at approved degree levels. Questions about the accreditation of Wayne Community College may be directed in writing to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, GA 30033-4097, by calling (404) 679-4500, or by using information available on SACSCOC's website ([www.sacscoc.org](http://www.sacscoc.org)).

The Commission on Colleges may be contacted only if there is evidence that Wayne Community College is significantly non-compliant with a requirement or standard. Accreditation standards are located at: <http://www.sacscoc.org/principles.asp>

The purpose for publishing the Commission's access and contact numbers is to enable interested constituents (1) to learn about the accreditation status of the institution, (2) to file a third-party comment at the time of the institution's decennial review, or (3) to file a complaint against the institution for alleged non-compliance with a standard or requirement.

Inquiries about Wayne Community College, such as admission requirements, financial aid, educational programs, etc. should be addressed directly to Wayne Community College and not the Commission's office.

**Student Right-to-Know:** Information regarding the persistence rate of enrolled students toward graduation and transfer-out-rate is available in the Office of Admissions and Records. Student rights under FERPA are available at [ed.gov/policy/gen/guid/fpco/ferpa/index.html](http://ed.gov/policy/gen/guid/fpco/ferpa/index.html) or in the Office of Admissions and Records and in the Office of Counseling Services.

For more information about our graduation rates, the median debt of students who completed a program, and other important information, please visit our Web site at: [waynecc.edu/gainful-employment/](http://waynecc.edu/gainful-employment/).

Wayne Community College is a tobacco-free institution.

**MEDICAL ASSISTING ADVANCED STANDING  
SPRING 2026 ADMISSIONS POLICIES AND PROCEDURES**

**INFORMATION IN THIS PACKET SUPERCEDES ALL PREVIOUSLY  
PUBLISHED INFORMATION**

Thank you for your interest in the Medical Assisting (MA) program. We will begin accepting applications for the spring semester class of 2026 MA Advanced Standing program starting **September 2, 2025**. Deadline for a completed application, all transcripts and/or letters verifying non-attendance, and official interview is **November 6, 2025 by 4:00 p.m.**

Applicants completing all requirements after the deadline will be considered by the Admissions Committee at their next regularly scheduled monthly meeting until the program is filled. Admission to the Medical Assisting program is a selective process, based on the highest point count.

**Please use the following checklist to ensure you complete the admissions requirements.**

You will need to complete and submit the following to the Office of Admissions and Records:

- 
1. Completed application must be submitted to the Office of Admissions and Records along with the Letter of Understanding. **A faxed application and Letter of Understanding will not be accepted.**

All students must have a valid RCN to submit application. To verify your RCN please visit [ncresidency.org](http://ncresidency.org). If you have any questions please contact the Office of Admissions and Records at ext. 6720.

**Note:** If you are planning to take the general education requirements for Medical Assisting in a semester prior to Spring 2026, also submit a general application to the college for Associate in Arts to the Office of Admissions and Records.

**Undocumented Immigrants**

- Federal law prohibits states from granting professional licenses to undocumented immigrants.
- Undocumented immigrants shall not be considered a North Carolina resident for tuition purposes. Undocumented immigrants must be charged out-of-state tuition whether or not they reside in North Carolina.
- Students lawfully present in the United States shall have priority over any undocumented immigrant in any class or program of study when there are space limitations.

- 
2. Request that an official high school transcript or equivalent be sent to Wayne Community College. Also request that an official transcript from **ALL** post secondary schools, colleges and/or universities be sent to Wayne Community College. These transcripts **must** be requested by you and must be received by WCC in order to complete your application. (Note: An official transcript is one that is sent by one school, college or university to another. The official transcript has the school's seal and the appropriate signature. **A faxed copy is not considered to be an "official" transcript**). If you are enrolled in the Summer 2025 semester, you will need to send an updated transcript by the November 6<sup>th</sup> deadline. If you have any Advanced Placement (AP), CLEP or DANTES credit, you must request the scores to be sent directly from the testing company.

**It is the applicant's responsibility to make sure that all transcripts are up to date and on file with the Admissions Office by the published deadline.**

**Failure to submit all transcripts to the Admissions Office by the published deadline will result in removal of the application from consideration or the applicant's dismissal from the program.**

**The National Student Clearinghouse is used to verify students' prior enrollment.**

**NOTE:** Students with foreign transcripts must complete at least eight (8) semester hours of college credit **(not including pre-curriculum courses)** from an American regional accrediting agency. Of these eight (8) semester hours, there must be at least three (3) hours of life science, biology or chemistry. **No transfer credit will be accepted from institutions not accredited by an American regional accrediting agency.**

**3. A. Meet Math proficiency with one of the following:**

- ☐ Have an unweighted **final**\*\*\* high school GPA of 2.8 or higher within 10 years from the program start date (1/26)\* (GED/HiSET/CCRG)
- ☐ Meet appropriate scores on placement test within 10 years from the program start date (1/26)\* (ACT/SAT/NCDAP/NROC/Accuplacer)
- ☐ Complete MAT 025 or MAT 035 with a "C" or better
- ☐ Complete DMA 025 or a college level math class with a "C" or better\*\*

\*see a full list of acceptable scores on page 7

\*\*see a full list of acceptable college math classes on page 7

\*\*\*referral is made provisionally with midyear gpa

**B. Meet English/Reading proficiency with one of the following:**

- ☐ Have an unweighted **final**\*\* high school GPA of 2.8 or higher within 10 years from the program start date (1/26)\* (GED/HiSET/CCRG)
- ☐ Meet appropriate scores on placement test within 10 years from the program start date (1/26)\* (ACT/SAT/NCDAP/NROC/Accuplacer)
- ☐ Complete ENG 111 or equivalent with a "C" or better

\*see a full list of acceptable scores on page 7

\*\*referral is made provisionally with midyear gpa

**Please plan ahead as Allied Health applicants are not permitted to take placement tests on the application deadline date.**

\_\_\_\_\_ 4. (OPTIONAL) Complete and submit Medical Education or Training Form and documentation to Admissions and Records as an EMT (Basic, Intermediate or Paramedic), Nursing Assistant I or II, Phlebotomy, Pharmacy Tech. Cert. or Diploma or Degree in health science. Health science diploma/degree list can be found here: <https://www.nccommunitycolleges.edu/academic-programs/curriculum-standards> **A new experience form must be submitted each year you apply to the program.**

\_\_\_\_\_ 5. The final step in the process is to complete an application review of all previous steps. This must be done with a Career Pathways Specialist in the WLC Building for referral to the Limited Admissions Committee for the year of application.

It is not necessary to schedule an appointment for the final review.  
Walk ins are accepted.

\_\_\_\_\_ 6. Submit official transcript or equivalent reflecting completion of the following courses (with a minimum grade of C):

|         |                         |
|---------|-------------------------|
| ACA 111 | College Student Success |
| ENG 111 | Expository Writing      |
| MED 121 | Medical Terminology I   |

The following courses are recommended:

|         |                                       |
|---------|---------------------------------------|
| BIO 163 | Basic Anatomy and Physiology          |
| MAT 110 | Mathematical Measurement and Literacy |
| OST 136 | Word Processing                       |

Applicants desiring to be considered at the first Admissions Committee meeting must complete and submit all of the above information to the Office of Admissions and Records by the application deadline date, **November 6, 2025 by 4:00 p.m.** Applicants completing all requirements after the deadline will be considered by the Admissions Committee at their next regularly scheduled monthly meeting until the program is filled. Please do not call for results after the Admissions Committee meetings. Letters will be sent to all applicants considered for the program notifying them of their status.

**Note: Please do not send letters of recommendation. They are not considered by the Admissions Committee.**

Prior to final acceptance, applicants should submit results of a physical exam and the required immunization records on the Student Medical Form as determined by a physician, physician assistant or nurse practitioner. Health forms will be provided by WCC after your conditional acceptance to the Medical Assisting program.

All applicants should read the Wayne Community College General Catalog 2025 - 2026 for the following information: policies on advanced placement, transfer of credits and experimental learning, number of credits to complete the program, policies and processes for withdrawal and for refund of tuition/fees.

### **Criminal Background Checks and Drug Testing**

Affiliating health care agencies with which the college has contracted to provide clinical experiences for Medical Assisting students require students to submit to criminal background checks and/or drug testing prior to or during participation in clinical experiences at the site. In the event that a positive history is identified, the clinical agencies will determine if the student is allowed in the agency for clinical learning experiences. When a clinical agency does not allow the student in the agency for clinical learning experiences, the student will not be allowed to progress in the curriculum. Refusal to submit to testing or background checks will result in dismissal from the program.

A student convicted of a felony will not be eligible for the certification examination administered by the American Association of Medical Assistants (AAMA). However, the certifying board may grant a waiver based upon mitigating circumstances.

Medical Assisting students must obtain current American Heart Association (AHA) – Basic Life Support (BLS) Provider certification by the date set by program director. Must stay current while enrolled in classes. Note: AHA BLS certification must have included a “hands-on” skills demonstration component to be accepted.

**\*Acceptable Test Scores listed below:**

**NC DAP**

DRE 151  
DMA 010 7  
DMA 020 7  
DMA 030 7

**NROC**

English Tier 2  
Math Tier 1

**SAT**

Reading/Writing 480  
Mathematics 530

**ACT**

Reading 22  
English 18  
Math 22

**ACCUPLACER**(NEXT GEN.)

Reading 253  
Math: QRAS 254

**GED 165**

(all sections)

**HiSET 15**

**Essay 4**

**CCRG/CCG**

E2 and M2

**\*\* Acceptable College Math Classes listed below:**

MATH 110, 115, 121, 122, 140, 143, 151, 152, 161, 171, 172, 263, 271, 272, 273, 285

Math classes taken outside the NC Community College System, other than the courses listed above, will be evaluated on a case by case basis.



# ALLIED HEALTH STUDENT ADMISSION REPORT

Wayne Community College  
P.O. Box 8002 • Goldsboro, NC 27533-8002  
919-735-5151 • waynecc.edu  
*An Equal Opportunity Employer*

Student Name: \_\_\_\_\_

Last

First

Middle

Maiden/Former

Datatel ID Number: \_\_\_\_\_

Allied Health program applying for:

- |                                                                                                         |                                                                                                                  |                                                                                                          |
|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| <input type="radio"/> Associate Degree Nursing<br><input type="checkbox"/> Deadline: March 4, 2026      | <input type="radio"/> Licensed Practical Nursing<br><input type="checkbox"/> Deadline: April 2, 2026             | <input type="radio"/> Advanced Standing LPN to RN<br><input type="checkbox"/> Deadline: November 6, 2025 |
| <input type="radio"/> Dental Hygiene<br><input type="checkbox"/> Deadline: March 19, 2026               | <input type="radio"/> Dental Assisting<br><input type="checkbox"/> Deadline: April 16, 2026                      | <input type="radio"/> Medical Assisting<br><input type="checkbox"/> Deadline: June 11, 2026              |
| <input type="radio"/> Medical Laboratory Technology<br><input type="checkbox"/> Deadline: June 11, 2026 | <input type="radio"/> Advanced Standing Medical Assisting<br><input type="checkbox"/> Deadline: November 6, 2025 |                                                                                                          |
- ☐ Practical Nurses seeking Advanced Standing:  
Schedule an interview with the Nursing Department Head to review additional requirements.
- ☐ Readmission \*Pending space availability and meeting departmental criteria. Student will contact respective Department Head.  
Name: \_\_\_\_\_ Number: 919-739- \_\_\_\_\_

Refer to Allied Health Admissions Department

☐ Yes ☐ No

Hold until further action:

- ☐ Missing Transcripts per Clearinghouse / personal disclosure
- ☐ Old / Incomplete / Missing / Low Test Scores  
☐ Reading \_\_\_\_\_ ☐ English \_\_\_\_\_ ☐ Math \_\_\_\_\_ ☐ CIS 070 \_\_\_\_\_ ☐ ACT/SAT \_\_\_\_\_
- ☐ Missing / not completed chemistry class within ten years of program start date (Nursing only)
- ☐ Missing proper work-related experience documentation (DH / DA / Med Lab Tech / Med Assisting)

**It is the student's responsibility to make sure all requirements are met by program deadline.**

Counselor Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

WHITE - ADMISSIONS

PINK/YELLOW - STUDENT

Wayne Community College encourages persons with disabilities to participate in its programs and activities. If you anticipate needing accommodation or have questions about access, please contact the Disability Services Counselor at 919-739-6729. Please allow sufficient time to arrange accommodation.

Wayne Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award associate degrees, diplomas, and certificates. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097, 404-679-4500, <http://www.sacscoc.org> for questions about the accreditation of Wayne Community College.

Student Right-to-Know: Information regarding the persistence rate of enrolled students toward graduation and transfer-out rate is available in the Office of Admissions and Records. Student rights under FERPA are available at [ed.gov/policy/gen/guid/fpco/ferpa/index.html](http://ed.gov/policy/gen/guid/fpco/ferpa/index.html) or in the Office of Admissions and Records and in the Office of Counseling Services.

RV06/21JM

## **MEDICAL ASSISTING ADVANCED STANDING ADMISSION RATING TOOL**

Enclosed in this package of information is the Admission Rating Tool used by the Medical Assisting program staff, counselor and the Limited Admissions Committee to select applicants for the Medical Assisting program. A point count tool was developed as an objective means of evaluating applicants. (See next page.) It is the total rating score that is used in the selection process.

This tool was developed as an objective means of evaluating applicants. Criteria used to select applicants for admission to the Wayne Community College Medical Assisting program are: (Part I) Placement Test Scores, Multiple Measures/RISE Placement, or Course Equivalent (Part II) General Education Courses and (Part III) Medical Experience.

Your admission rating is confidential information. At no time and with no exceptions will your admission rating be discussed with anyone other than yourself. **PLEASE DO NOT CALL TO INQUIRE ABOUT YOUR POINT COUNT.** There will be no discussion of point count totals by phone.

**Wayne Community College**  
**Medical Education or Training Form**  
**Fall 2026**

1. Name of Applicant: \_\_\_\_\_
2. Student ID # or Date of Birth: \_\_\_\_\_
3. Program you are applying to: \_\_\_\_\_
4. Type of Medical Education or Training (Please check appropriate description)
  - a. \_\_\_\_\_ EMT-Basic, Intermediate, Paramedic (2 points)
  - b. \_\_\_\_\_ Nursing Assistant- I or II (2 points)
  - c. \_\_\_\_\_ Phlebotomy (2 points)
  - d. \_\_\_\_\_ Pharmacy Tech. Certificate (2 points)
  - e. \_\_\_\_\_ Diploma or Degree in Health Science (3 points)
5. Where was your Medical Education or Training completed?  
\_\_\_\_\_

(Please provide documentation to Admissions & Records)

**WAYNE COMMUNITY COLLEGE  
MEDICAL ASSISTING ADMISSION RATING**

**Applicant Name:** \_\_\_\_\_  
**Date Reviewed:** \_\_\_\_\_

**Datatel #:** \_\_\_\_\_  
**Reviewed by:** \_\_\_\_\_

**PART I College Placement Tests** (Minimum scores must be attained. Not used for ranking purposes).

|            |          |                     |  |             |              |               |
|------------|----------|---------------------|--|-------------|--------------|---------------|
| <b>ACT</b> |          | <b>DMA</b>          |  | <b>NROC</b> |              | <b>NC DAP</b> |
| Reading    | 22 _____ | 010 _____ 020 _____ |  | English     | Tier 2 _____ | DRE 151 _____ |
| English    | 18 _____ | 030 _____           |  | Math        | Tier 1 _____ |               |
| Math       | 22 _____ |                     |  |             |              |               |

|                   |           |                            |                               |
|-------------------|-----------|----------------------------|-------------------------------|
| <b>SAT</b>        |           | <b>GED 165 (ALL)</b> _____ | <b>Accuplacer (Next Gen.)</b> |
| Reading/Writing   | 480 _____ |                            | Reading 253 _____             |
| Mathematics       | 530 _____ | <b>Hiset 15</b> _____      | QRAS 254 _____                |
|                   |           | <b>Essay 4</b> _____       |                               |
| <b>CCRG/CCG</b>   |           | <b>MAT 025</b> _____       |                               |
| E2 _____ M2 _____ |           | <b>MAT 035</b> _____       |                               |

Completion of ENG 111 or college equivalent with "C" or better \_\_\_\_\_  
Completion of college level math class with "C" or better \_\_\_\_\_

GPA: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

**PART II General Education Courses (Maximum of 36 points)**

**Scale: A-, A, A+ (6 points) B-, B, B+ (4 points) C, C+ (2 points)**

| COURSE (or equivalent) | GRADE | POINTS                     |
|------------------------|-------|----------------------------|
| BIO 163                | _____ | _____                      |
| MED 121                | _____ | _____                      |
| MAT 110 (or higher)    | _____ | _____                      |
| ENG 111                | _____ | _____                      |
| PSY 150                | _____ | _____                      |
| OST 136                | _____ | _____                      |
|                        |       | <b>Total Part II</b> _____ |

**PART III Medical Education or Training Form** (copy of a transcript, copy of a certificate, a license or a listing on registry). **(Maximum of 3 points).**

|                                                                                                                 |                 |
|-----------------------------------------------------------------------------------------------------------------|-----------------|
| EMT (Basic, Intermediate, Paramedic), Nursing Assistant (I or II), Phlebotomy,<br>Or Pharmacy Tech. Certificate | <b>2 points</b> |
| Diploma or Degree in Health Science                                                                             | <b>3 points</b> |

**Total Part III** \_\_\_\_\_

**Total Score (Maximum 39 points)**

**Total Points** \_\_\_\_\_

## MEDICAL ASSISTING

### Official Program Description registered with the N.C. Department of Community Colleges:

The Medical Assisting curriculum prepares the graduate to be a multi-skilled healthcare professional qualified to perform administrative, clinical and laboratory procedures. The administrative aspects of instruction include scheduling appointments; processing insurance accounts, reports, records, and billing and collections; coding medical records, transcribing and computer operations; and processing telephone calls, correspondence, reports and manuscripts. Clinical and laboratory aspects of instruction include preparing patients for examination and treatment; obtaining vital signs; assisting with examination and treatment; performing routine laboratory procedures, phlebotomy, electrocardiography, sterilization procedures; and administering medications under the supervision of a physician.

Graduates completing the associate degree develop additional competencies in effective communications and managerial and supervisory skills.

The *Wayne Community College AAS-Medical Assisting Program* is accredited by the Commission on Accreditation of Allied Health Education Programs ([www.caahep.org](http://www.caahep.org)) upon the recommendation of *Medical Assistant Education Review Board (MAERB)*."

Commission on Accreditation of Allied Health  
Education Programs  
9355 – 113<sup>th</sup> St N, #7709  
Seminole, FL 33775  
(727) 210-2350  
[www.caahep.org](http://www.caahep.org)

Individuals desiring a career in Medical Assisting should take biology, mathematics and keyboarding/computer courses prior to entering the program.

### Student Success and Retention

Student retention and success are a priority at Wayne Community College. Obstacles to success may include the academic rigor of the program, extracurricular demands or dissatisfaction with your choice of this career path. Job shadowing should be strongly considered so that you are keenly aware of the professional responsibilities and duties associated with your career choice. Extracurricular demands such as full time work schedules may also need to be reduced in order to allow the necessary study time required to be successful. A good support system is also important if you are involved in other extracurricular demands such as providing care for children or elders.

**WAYNE COMMUNITY COLLEGE  
MEDICAL ASSISTING PROGRAM  
TECHNICAL STANDARDS**

All students in the Medical Assisting Program are expected to perform assigned skills, class assignments, and clinical activities at the same level, with or without accommodations. It is the responsibility of the applicant/student to read the technical standards carefully and to ask for clarification of any standard that is not understood.

Wayne Community College complies with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. Therefore, any disability affecting an applicant's ability to comply with these technical standards must be evaluated by the Disability Services Counselor in conjunction with the Medical Assisting program director and health care provider(s) (if appropriate) for an applicant/student with a disability who is otherwise qualified. Demonstration of one or more technical standards may be required. Students with a disability should see the Disability Services Counselor in the Student Development/ Counseling Services Office.

The following skills/abilities include those cognitive, physical, and behavioral standards required for successful completion of the curriculum. (next page)

**WAYNE COMMUNITY COLLEGE  
MEDICAL ASSISTING PROGRAM  
TECHNICAL STANDARDS**

| <b>Standard</b>                                                                                                                                                                       | <b>Examples of Necessary Behaviors<br/>(not all inclusive)</b>                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Interpersonal abilities</b> sufficient to interact with co-workers, patients, families, and individuals from a variety of social emotional, cultural and intellectual backgrounds. | Establish rapport with clients, families and colleagues.                                                                                                                                         |
| <b>Communication abilities</b> sufficient for interaction with others in verbal and written form.                                                                                     | Collect and document assessment data. Explain treatment procedures. Obtain and disseminate information relevant to patient care and work duties.                                                 |
| <b>Critical thinking ability</b> sufficient for clinical judgment.                                                                                                                    | Identify cause and effect relationship in actual and simulated clinical situations. Apply knowledge from lecture, laboratory and clinical areas. Utilize basic mathematical skills.              |
| <b>Physical abilities</b> sufficient to maneuver in small spaces, and reach or lift needed equipment/supplies.                                                                        | Move around and within an exam room. Administer CPR. Transfer patients from stretchers and wheelchairs to OR exam table and back.                                                                |
| <b>Gross and fine motor abilities</b> sufficient to provide safe and effective patient care.                                                                                          | Move, calibrate, pass equipment and supplies including sharp instruments. Lift, transfer, and position mobile and immobile clients. Lift and carry at least thirty (30) pounds of weight safely. |
| <b>Auditory ability</b> sufficient to monitor and assess health needs.                                                                                                                | Hear patients, cries of distress, sound of instruments and equipment being properly utilized, monitor vital signs.                                                                               |
| <b>Visual ability</b> sufficient for physical assessment, performance of medical office/clinical procedures, and maintenance of environmental safety.                                 | Observe client responses such as skin color and facial expression. Monitor vital signs. Reads records. Observe color involved in specimen testing.                                               |
| <b>Tactile ability</b> sufficient for assessment, and performance of medical office/clinical procedures.                                                                              | Perform palpation techniques (venipuncture).                                                                                                                                                     |
| <b>Emotional stability and mental alertness</b> in performing in the medical assisting role.                                                                                          | Maintain a calm and efficient manner in high stress/pressure situations with patients, staff, supervisors and colleagues.                                                                        |
| <b>Olfactory ability</b> sufficient to perform medical office/clinical procedures.                                                                                                    | Distinguish drugs and liquids or chemicals.                                                                                                                                                      |

## OCCUPATIONAL RISKS

Medical Assisting is a profession with many rewards, as practitioners can perform both administrative and clinical services, filling several roles in a variety of healthcare environments. The Bureau of Labor Statistics clearly outlines that it is a growth field, with an anticipated 18% growth from 2020 to 2030.

Medical Assistants work directly with providers and patients, with the goal of providing healthcare and ensuring patient safety. It is a position with a great deal of responsibility.

As with any healthcare position, there are certain occupational risks that come into play with being a medical assistant, and those hazards include the following:

- Exposure to infectious diseases
- Sharps injuries
- Bloodborne pathogens and biological hazards
- Chemical and drug exposure
- Ergonomic hazards from lifting, sitting, and repetitive tasks
- Latex allergies
- Stress

At the same time, there are protections set up with the Occupational Safety and Health Act (OSHA), and those protections are particularly important within a healthcare environment. OSHA has a series of standards that protect the safety of healthcare workers and patients.

Accredited medical assisting programs are required to teach students about the hazards that they face on the job and the protocols that can be put into place to ensure a workplace culture that prioritizes safety.

## **WAYNE COMMUNITY COLLEGE COMMUNICABLE DISEASE POLICY OF STUDENTS**

Wayne Community College is committed to assuring that all necessary training and precautions are taken with regard to communicable diseases. The Biohazard Exposure Control Plan and the Pandemic Preparedness Plan of Wayne Community College reflect our efforts to ensure the good health and safety of all employees and students. The College adopts this communicable disease policy for students in an effort to control communicable diseases and the threat of pandemics on campus based upon established rules and regulations of the N.C. Division of Health Services. Employees and employees of contractors or contracted services infected with a communicable disease have the responsibility of reporting this fact to the Director of Human Resources. Students infected with a communicable disease have the responsibility of reporting this fact to the Associate Vice President of Academic and Student Services or the Vice President of Continuing Education, as appropriate.

Communicable disease is an illness resulting from an infectious agent or its toxic products being transmitted directly or indirectly to a person from an infected person or animal through the agency of an intermediate animal, host, or vector, or through the inanimate environment. [N.C.G.S. 130A-2(1c)] Communicable Disease shall include, but is not limited to: Chickenpox, influenza, Infectious Mononucleosis, Conjunctivitis, Hepatitis A, B & D, Acquired Immune Deficiency Syndrome (AIDS), Aids-related complex (ARC), positive HIV antibody status, Influenza, Measles, Meningitis, Tuberculosis, Whooping Cough, and sexually transmitted diseases.(N.C.G.S. 130A)

Persons who are infected with a communicable disease are expected to seek expert medical advice and are encouraged to advise local health authorities. Local health authorities should offer counseling to these persons about measures that can be taken to prevent the spread of infection and to protect their own health.

Persons who know, or have a reasonable basis for believing, that they are infected with a communicable disease have an ethical and legal obligation to behave in accordance with such knowledge to protect themselves and others. Medical information relating to the communicable disease of a student or employee will be disclosed to responsible college officials only on a strictly limited need-to-know basis. No person, group, agency, insurer, employer, or institution should be provided any medical information without the prior specific written consent of a student unless required by state and/or federal law. Furthermore, all medical information relating to the communicable diseases of students and employees will be kept confidential, according to state and federal law, including the Family Education Rights and Privacy Act.

If a student reports a communicable disease condition, the student may be excluded from the institution until an appropriate evaluation of the student's medical condition can be made. The evaluation may be made by a physician or a health department official and testing may be required if appropriate. Students in any Allied Health program may have additional requirements, as specified in each program's student handbook; therefore, these students should report all suspected communicable diseases.

The final determination of student's ability to remain in school will be made by the Vice President or Associate Vice President based upon professional medical evaluation results and recommendations. If a student is found to have a communicable disease, then the attendance of the student on campus or at any College activity will be prohibited until a satisfactory letter or certificate is obtained from one or more licensed physicians or public health officials stating that the student is not a health risk to employees and other students at the College.

The College's Biohazard Control Plan defines guidelines that will be followed in the event of an accidental exposure to bodily fluids or biohazards. Any such exposure should be reported immediately to the responsible faculty or staff person associated with the WCC activity involving such exposure and to the Student Activities Coordinator and an incident report must be completed.

Reference: WCC General Catalog and Student Handbook 2025-2026, page 254-255  
<https://waynecc.smartcatalogiq.com/en/2025-2026/general-catalog-and-student-handbook/student-handbook/communicable-disease-policy-for-students/>

**WAYNE COMMUNITY COLLEGE  
MEDICAL ASSISTING**

**Prerequisite/Transfer Credit**

|     |     |                                       | Contact<br>Hours | Semester<br>Credit Hours |
|-----|-----|---------------------------------------|------------------|--------------------------|
| ACA | 111 | College Student Success               | 1                | 1                        |
| BIO | 163 | Basic Anatomy & Physiology            | 6                | 5                        |
| MAT | 110 | Mathematical Measurement and Literacy | 4                | 3                        |
| MED | 110 | Orientation to Medical Assisting      | 1                | 1                        |
| ENG | 111 | Writing and Inquiry                   | 3                | 3                        |
| OST | 136 | Word Processing                       | 4                | 3                        |
| MED | 121 | Medical Terminology I                 | 3                | <u>3</u>                 |
|     |     |                                       |                  | 19                       |

|                        |     |                                    | Contact<br>Hours | Semester<br>Credit Hours |
|------------------------|-----|------------------------------------|------------------|--------------------------|
| <b>SPRING SEMESTER</b> |     |                                    |                  |                          |
| ENG                    | 114 | Professional Research& Reporting   | 3                | 3                        |
| MED                    | 122 | Medical Terminology II             | 3                | 3                        |
| MED                    | 140 | Exam Room Procedures I             | 7                | 5                        |
| PSY                    | 150 | General Psychology                 | 3                | 3                        |
| MED                    | 130 | Administrative Office Procedures I | 3                | <u>2</u>                 |
|                        |     |                                    |                  | 16                       |

|                        |     |                                     |   |          |
|------------------------|-----|-------------------------------------|---|----------|
| <b>SUMMER SEMESTER</b> |     |                                     |   |          |
| MED                    | 131 | Administrative Office Procedures II | 3 | 2        |
| MED                    | 150 | Laboratory Procedures I             | 7 | <u>5</u> |
|                        |     |                                     |   | 7        |

|                      |     |                                      |   |          |
|----------------------|-----|--------------------------------------|---|----------|
| <b>FALL SEMESTER</b> |     |                                      |   |          |
| MED                  | 230 | Administrative Office Procedures III | 3 | 2        |
| MED                  | 240 | Exam Room Procedures II              | 7 | 5        |
| MED                  | 250 | Laboratory Procedures II             | 7 | 5        |
| MED                  | 272 | Drug Therapy                         | 3 | <u>3</u> |
|                      |     |                                      |   | 15       |

|                        |     |                               |    |          |
|------------------------|-----|-------------------------------|----|----------|
| <b>SPRING SEMESTER</b> |     |                               |    |          |
| MED                    | 118 | Medical Law and Ethics        | 2  | 2        |
| MED                    | 260 | Medical Clinical Practicum    | 15 | 5        |
| MED                    | 264 | Medical Assisting Overview    | 2  | 2        |
| MED                    | 262 | Clinical Perspectives         | 1  | 1        |
|                        |     | Humanities/Fine Arts Elective | 3  | <u>3</u> |
|                        |     |                               |    | 13       |

Total Credit Hours    70

Effective Fall 2016

\*includes all previous coursework

**WAYNE COMMUNITY COLLEGE  
MEDICAL ASSISTING  
ESTIMATED COSTS**

**TUITION:** **PER SEMESTER**

|              |                                                  |                 |
|--------------|--------------------------------------------------|-----------------|
| In-State     | \$76.00/Semester Hour*<br>(Full-time = 16 hours) | \$1,216.00      |
|              | Student Activity Fee                             | \$ 35.00        |
|              | Technology Fee                                   | <u>\$ 48.00</u> |
|              |                                                  | \$1,299.00      |
| Out-of-State | \$268.00/Semester Hour*                          | \$4,288.00      |
|              | Student Activity Fee                             | \$ 35.00        |
|              | Technology Fee                                   | <u>\$ 48.00</u> |
|              |                                                  | \$4,371.00      |

Textbooks\*\* \$600.00

**OTHER COSTS:** **ONE TIME FEE**

|                                         |                    |
|-----------------------------------------|--------------------|
| Health/Medical Requirements***          |                    |
| Physical Exam                           | \$35.00 - \$120.00 |
| Hepatitis vaccine                       | \$90.00 - \$150.00 |
| Uniforms                                | \$150.00           |
| Shoes                                   | \$60.00            |
| Equipment                               |                    |
| Watch (with second hand)                | \$25.00            |
| Stethoscope                             | \$30.00            |
| Criminal Background Check & Drug Screen | \$44.00 (minimum)  |
| Graduation (Cap and Gown)               | \$39.00            |
| Application for AAMA Certification Exam | \$125.00           |
| CPR AHA BLS Provider                    | \$75.00            |

\* Tuition is based on the 2025-2026 school year tuition rates. This is subject to change.

\*\* Cost of books is constantly changing. Costs vary, according to number of courses taken each semester. This estimate is for Medical Assisting courses only.

\*\*\* Costs vary, depending on health care provider and insurance coverage.

**MEDICAL ASSISTING  
LETTER OF UNDERSTANDING**

NAME \_\_\_\_\_ Student ID# or DOB: \_\_\_\_\_

I affirm that all information submitted during the general and/or allied health application process(es) is true and complete to the best of my knowledge. I affirm that I have read and understand the Medical Assisting Advanced Standing program admission policies and procedures as stated by Wayne Community College in the Medical Assisting Spring Semester 2026 Admission Policies and Procedures packet online.

I understand that it is my responsibility as an applicant to submit all the necessary admission requirements prior to the deadline and that failure to comply with all application requirements will result in removal from consideration or dismissal from the program. (Please refer to the application package for more detailed information.)

I have read and I understand the Wayne Community College Medical Assisting – Advanced Standing Program Technical Standards section within this packet.

I have disclosed all schools attended and have requested official transcripts from each be sent to Wayne Community College. I understand that omissions of any school attended is grounds for removal from consideration or dismissal from the program.

I understand that no exceptions to the policies and procedures will be granted.

INITIAL APPLICATION DEADLINE – **MEDICAL ASSISTING ADVANCED STANDING**  
**November 6, 2025 by 4:00 p.m.**

Applicants completing all requirements after the deadline will be considered by the Admissions Committee at their next regularly scheduled monthly meeting until the program is filled.

After reading the above statement, please sign, date and return with your application.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Note: Your application will not be processed without this signed statement.

**Please be sure to inform the Office of Admissions and  
Records if your address or telephone number changes.**

AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER

# APPLICATION FOR ADMISSION/READMISSION



# WAYNE COMMUNITY COLLEGE

PO Box 8002 • Goldsboro, NC 27533-8002  
919-735-5151 • [www.waynecc.edu](http://www.waynecc.edu)

It is the policy of Wayne Community College that all persons have equal opportunity and access to its educational programs, services, activities, and facilities without regard to race, religion, color, sex, age, national origin or ancestry, marital status, parental status, sexual orientation, disability or status as a veteran. WCC is an Affirmative Action institution. This material may be available in alternative formats. Wayne Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award associate degrees, diplomas, and certificates. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097, 404-679-4500, <http://www.sacscoc.org> for questions about the accreditation of Wayne Community College. Inquiries about Wayne Community College, such as admission requirements, financial aid, educational programs, etc. should be addressed directly to Wayne Community College and not the Commission's office. The Commission on Colleges may be contacted only if there is evidence that Wayne Community College is significantly non-compliant with a requirement or standard. Accreditation standards are located at: <http://www.sacscoc.org/principles.asp>. The purpose for publishing the Commission's address and contact numbers is to enable interested constituents (1) to learn about the accreditation status of the institution, (2) to file a third-party comment at the time of the institution's decennial review, or (3) to file a complaint against the institution for alleged non-compliance with a standard or requirement. Inquiries about Wayne Community College, such as admission requirements, financial aid, educational programs, etc. should be addressed directly to Wayne Community College and not the Commission's office. Student Right-to-Know: Information regarding the persistence rate of enrolled students toward graduation and transfer-out-rate is available in the Office of Admissions and Records. Student rights under FERPA are available at [ed.gov/policy/gen/guid/fpco/ferpa/index.html](http://ed.gov/policy/gen/guid/fpco/ferpa/index.html) or in the Office of Admissions and Records and in the Office of Counseling Services. For more information about our graduation rates, the median debt of students who completed a program, and other important information, please visit our Web site at: [waynecc.edu/gainful-employment/](http://waynecc.edu/gainful-employment/). Wayne Community College is a tobacco-free institution.



# APPLICATION FOR ADMISSION/READMISSION

P.O. BOX 8002  
GOLDSBORO, NC 27533-8002  
919-735-5151 | waynecc.edu  
An Equal Opportunity Institution

Do Not Write In This Space

RCN \_\_\_\_\_  
RCVD \_\_\_\_\_

NOTICE TO APPLICANT: The information that you provide below will be placed in our master file. If any of this data changes, you must notify the Office of Admissions and Records immediately. Information on race and sex is requested for data gathering purposes only. Disclosure of social security number is voluntary and is used to verify the identity of an individual. Answer all questions completely and accurately. Use your legal name. Incomplete forms may delay your acceptance. Please print or type.

|                           |                       |                          |                            |                                                                |     |
|---------------------------|-----------------------|--------------------------|----------------------------|----------------------------------------------------------------|-----|
| Last Name Jr./Sr./III     |                       | First                    | Middle                     | Former                                                         |     |
| Address                   |                       |                          | City                       | State                                                          | Zip |
| County of legal residence |                       | State of legal residence | Country of legal residence | WCC College ID Number (If Applicable)                          |     |
| Home Telephone<br>( )     | Work Telephone<br>( ) | Cell Telephone<br>( )    |                            | Social Security Number                                         |     |
| Birthdate                 | Birthplace            | E-mail Address           |                            | Sex<br><input type="radio"/> Male <input type="radio"/> Female |     |

|                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                         |                                                                                                                                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Ethnicity and Race - Hispanic or Latino <input type="radio"/> Yes <input type="radio"/> No<br>If no, choose one or more:<br><input type="radio"/> White<br><input type="radio"/> Black or African American<br><input type="radio"/> Asian<br><input type="radio"/> Native Hawaiian or other Pacific Islander<br><input type="radio"/> American Indian or Alaska Native | Year and term entering 20 _____<br><input type="radio"/> Fall<br><input type="radio"/> Spring<br><input type="radio"/> Summer<br>I plan to attend<br><input type="radio"/> Full-Time<br><input type="radio"/> Part-Time | Enrolling as<br><input type="radio"/> Freshman<br><input type="radio"/> Transfer<br><input type="radio"/> Returning WCC Student<br>Last term registered at WCC _____<br>Name last enrolled under _____ |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Long-term goal at WCC? (Select one)<br><input type="radio"/> To obtain an Associate Degree, Diploma or Certificate<br><input type="radio"/> To enhance job skills in present field of work<br><input type="radio"/> To enhance employment skills for a new field of work<br><input type="radio"/> To take courses to transfer to another college<br><input type="radio"/> To take courses for personal enrichment or interest | Employment status while attending WCC (Select one)<br><input type="radio"/> Retired<br><input type="radio"/> Unemployed - not seeking employment<br><input type="radio"/> Unemployed - seeking employment<br><input type="radio"/> Employed 1-10 hours per week<br><input type="radio"/> Employed 11-20 hours per week<br><input type="radio"/> Employed 21-39 hours per week<br><input type="radio"/> Employed 40 or more hours per week | Highest educational level completed (Select one)<br><input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12<br><input type="radio"/> High School Equivalency<br><input type="radio"/> 13 Adult High School Diploma<br><input type="radio"/> 14 Post High School Vocational<br><input type="radio"/> 15 Associate Degree<br><input type="radio"/> 16 Bachelor's Degree<br><input type="radio"/> 17 Master's Degree or Higher |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

U.S. Citizen ☐ Yes ☐ No If no, a) give country of citizenship \_\_\_\_\_ b) immigration status \_\_\_\_\_

Indicate if any of the following apply to you

☐ Retired Military ☐ Active Duty Military ☐ Dependent of Active Duty Military ☐ Department of Defense Employee

High school last attended \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_

Graduation date or last date of attendance: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ ☐ Yes, I graduated ☐ No, I did not graduate

|                                                                                                                                                                                               |        |      |       |                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------|-------|------------------------------|
| <input type="radio"/> I received an Adult High school Diploma<br><input type="radio"/> I received the High School Equivalency<br><input type="radio"/> I am currently enrolled in high school | School | City | State | Date received or anticipated |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------|-------|------------------------------|

IF YOU ARE APPLYING TO A CURRICULUM PROGRAM, PLEASE COMPLETE THE ITEMS BELOW.

INITIAL HERE \_\_\_\_\_

All transcripts (high school or equivalent and college) must be on file in the admissions office before an applicant is officially accepted to the Program.  
Financial Aid and VA benefits will not be approved until all official transcripts are on file.

|                  |      |        |       |                    |
|------------------|------|--------|-------|--------------------|
| College attended | City | County | State | Date last attended |
|                  |      |        |       |                    |
|                  |      |        |       |                    |
|                  |      |        |       |                    |

Curriculum to which you are applying \_\_\_\_\_  
6-Digit Curriculum Code \_\_\_\_\_ INITIAL HERE \_\_\_\_\_

IF ADDITIONAL INFORMATION IS NEEDED, THE APPLICANT WILL BE NOTIFIED.

I hereby certify that all information I have set forth herein is true to the best of my knowledge, pursuant to my reasonable inquiry where needed. I hereby acknowledge that the institution may divulge the contents of this application only as permitted under the Family Educational Rights and Privacy Act of 1974 if I am, or have been, in attendance at this institution. I understand that work I complete and submit as a student may be used to assess college general education outcomes. Falsification of admissions documents resulting in incorrect information which could be used in consideration of admission to the college, admission to curriculum programs, or financial aid will result in removal of application from consideration or dismissal from the college/program.

Signature of Applicant

Signature of parent or guardian also, if applicant is under 18 years of age

Date