

# DSH-A/CUESTA COLLEGE PSYCHIATRIC TECHNICIAN PROGRAM

## Work Experience Verification Form (Page 1)

- Dates of employment must be between **5/3/2022 – 5/3/2024**
- To be eligible for points: BOTH Part A and Part B must be submitted
- No form variations can be accepted, and forms must be submitted with completed application.

### Work Experience Criteria

The intent of awarding points in the work experience category is to recognize relevant work experience that would allow students to be well-prepared for success in the Psych Tech program. Work duties that facilitate knowledge, understanding, and experience with the Psych Tech role, the Psych Tech-patient relationship, and the practice of skills in the human healthcare setting may be considered. The following work experiences are examples of work experience that would be considered for points.

- LVN, medical assistant, nurse assistant, paramedic, and phlebotomist\*
- Multidisciplinary teamwork that includes collaboration with a Psych Tech
- Patient health & hygiene (including custodial services), vital signs, feeding/food preparation, daily living, mobility/transfer techniques, organizing therapeutic groups

Personal caregiving positions in private homes without a business license are not able to be considered.

\*Phlebotomy in a clinic alone does not qualify, but may be considered depending on the job description and duty list if in a healthcare setting where collaboration with PT's or LVN's is evident.

### Part A. To be completed by applicant

**Applicant Name:** \_\_\_\_\_

**Applicant Address:** \_\_\_\_\_

**Applicant Phone Number:** \_\_\_\_\_

**Place of employment:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Job title:** \_\_\_\_\_

**Start date of employment under this job title:** \_\_\_\_\_

**End date of employment under this job title:** \_\_\_\_\_

**List of duties in your own words that meet the intent of work experience points (applicant's words):**

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## Work Experience Verification Form (Page 2)

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Part B: To be completed by your direct supervisor

Name & Title of Supervisor: \_\_\_\_\_

Supervisor phone number: \_\_\_\_\_

Supervisor email: \_\_\_\_\_

Title of position held by applicant: \_\_\_\_\_

Start date of employment under this job description: \_\_\_\_\_

End date for this job description, or indicate if still employed: \_\_\_\_\_

**Criteria 3a: Work Experience.** Sign here to verify that the applicant has worked over 200 hours between May 3, 2022, and May 3, 2024, under the healthcare job description that meets PT application work experience criteria:

Direct supervisor signature: \_\_\_\_\_

**Criteria 1c: CNA Work Experience Credit.** Sign here if the applicant has worked over 200 hours between May 3, 2022, and May 3, 2024 as a CNA to receive education credit for this work experience:

Direct supervisor signature: \_\_\_\_\_

**IMPORTANT!** Attach the official job description the applicant was hired for that meets the Psych Tech work experience point criteria AND write a description of duties performed that meet the criteria in this box or on official letterhead.

**Signature of Supervisor:** \_\_\_\_\_ **Date:** \_\_\_\_\_