

Washtenaw Community College
Pharmacy Technology (CTPHAR)
Fall 2018 Entry (2018-19 Academic Year)
Application Deadline: May 4, 2018 (or until all accepted and/or alternate seats are filled)
PROGRAM APPLICATION AND REQUIREMENTS CHECKLIST

WCC Student ID: _____ Date: _____
Last Name: _____ First Name: _____ Middle Name: _____
Former/Previous Names: _____
*Street Address: _____ Apt: _____
City: _____ State: _____ Zip: _____ County: _____
Home Phone: (____) _____ Cell Phone: (____) _____ Work Phone: (____) _____
WCC Email/netID: _____ Other Email: _____

*The contact information provided above MUST match WCC's records. You can confirm and/or change your contact information at any time by logging into your *WCC Gateway* account and clicking on *MyWCC* and then *Personal Information*. Your address MUST match your current "Basic" address on record. (Your "Mailing" address is NOT sufficient for residency verification.)

Program Description

This certificate program prepares students for pharmacy technician entry-level positions in hospitals, retail stores, and other specialty areas of pharmacy practice, where they work under the supervision of a registered pharmacist. Students learn to blend a high attention to detail with patient care. This is a full time program and courses are required to be completed in sequence.

Articulation

WCC has articulation agreements with four-year institutions. Copies can be obtained from the Counseling Office, a program advisor, or from the Curriculum and Assessment Office Web Site:

<http://www4.wccnet.edu/departments/curriculum/articulation.php?levelone=colleges>

Important Information

The requirements below are based on the academic year stated on the top of this document. Prerequisite and program requirements along with WCC's point system and scales are reviewed annually and subject to change. Students are expected to meet the prerequisite and program requirements of the catalog term for the semester in which they **first begin** the program.

Admission Process

WCC has a competitive admission process. Applicants are required to meet all admission criteria and will be ranked based on a point system. The best qualified applicants will be selected for admission to the program. Details regarding WCC's

Admission to High Demand Programs policy including priority levels can be found on WCC's website at

<http://www.wccnet.edu/trustees/policies/2005/>. Details regarding WCC's point scales that are used to calculate points can be found on WCC's Enrollment Steps for Health and Second Tier Program Students website at

<http://www.wccnet.edu/studentconnection/admissions/health-second-program/>.

Applying to the Program

Each year, approximately 24 students are accepted to the program for a Fall semester start. A formal application to the program is required after the student has been accepted to the school. Completed applications can be submitted anytime during the application window. Students are encouraged to complete required support courses prior to beginning the program.

Requirements After Acceptance

Upon notification of acceptance to the program, students must purchase an account for a college-designated vendor to obtain a criminal background check, drug testing, and track their health records. The criminal background check must be submitted to the designated vendor before attending the program mandatory orientation session. These requirements must be completed by November 1.

Extenuating Application Process

If there are not enough applicants to fill all accepted and/or alternate seats in the program by the initial application deadline, the application will remain available on the website after this deadline until all seats are filled. Once all seats are filled, the application will be removed from the website and applications will no longer be accepted for the current admission cycle.

If the application remains available on the website after the initial application deadline, students who anticipate meeting all program admission requirements by the end of the Spring/Summer 2018 semester are encouraged to submit an incomplete application to be considered for an accepted and/or alternate seat on a conditional basis. Students submitting an incomplete application after the initial application deadline will be considered for a seat based on the date the application was received by the Health and Second Tier Admissions Office. If multiple applications are submitted in a day, applicants will be chosen based on a lottery for their position. Please contact the Health and Second Tier Admissions Office for clarification of this process.

Transcripts

Only official transcripts will be evaluated for transfer credit and applied towards your application. If course work (including prerequisites, support courses, and/or other applicable admission requirements/criteria) was completed at multiple institutions, an official transcript must be **received** from each institution. Incoming official transcripts must have appropriate signatures and/or official college seals. **Transcripts must be sent directly to WCC from an issuing institution or sealed if issued to the student.** Official transcripts are not needed for course work completed at WCC. Foreign high school transcripts will **not** be used for validation of course work when high school course work is applicable. For additional details regarding transfer credit and credit for prior learning (including foreign education, portfolio review, AP, CLEP, articulation, military, etc.) please visit WCC's website at <http://www.wccnet.edu/services/transferresources/credittowcc/>.

Course Clarification

All defined courses plus substitutions that are approved by the department prior to the application deadline will be used to meet prerequisite and/or support course requirements. If a course is not clearly stated on your transcript and/or the course cannot be determined an equivalent based on the course description, you must provide a course syllabus for further review by the application deadline. If two (2) or more transfer courses are completed to meet the equivalent of one (1) of WCC's required prerequisite or support courses, students **must** meet the minimum grade requirement in **each** course. **Grades will not be averaged.** WCC is **not** responsible for your application being delayed due to lack of clarification or approval of a substitution.

Required Checklist

All of the requirements below **must** be successfully completed **before** submitting an application to the program. All prerequisite courses must be successfully completed with grades posted to your transcript and all required forms and supporting documentation needs to be submitted with your application. **This includes all necessary official transcripts unless previously submitted and received by WCC's Records Office.** WCC transcripts are not required.

___ 1. Admission to WCC

An admission application to the school can be submitted on WCC's website at www.wccnet.edu/apply.

___ 2. Program Prerequisite Courses

___ a. MTH 160 (Basic Statistics) or MTH 167 (Math Applications for Health Sciences) or MTH 169 (Intermediate Algebra) or any Academic Math Level 4 or higher level course with a minimum grade of C+/2.3

- Level I Prereqs (MTH 160, 167, 169): Academic Reading and Writing Levels of 6; Academic Math Level 3*

___ Course Completed: _____ School: _____

*Academic Math Levels 1-3 expire to 0 one year after the calculation date (the date of COMPASS testing, the date the student's WCC Math Level was established based on an outside assessment, or based on successful course completion). ACT and SAT math scores expire to 0 two years after the date of completion. Math Levels 4-7 do not expire. **Students should meet with an advisor/counselor to discuss the timing of math courses.**

___ b. **BIO 101 (Concepts of Biology) or Higher Level College Biology Course (including Lab) with a minimum grade of C+/2.3**

• *Level I Prereqs (BIO 101): Academic Reading and Writing Levels of 6*

___ Course Completed: _____ School: _____

___ c. **ENG 111 (Composition I) with a minimum grade of C+/2.3**

• *Level I Prereqs (ENG 111): Academic Reading and Writing Levels of 6*

___ Course Completed: _____ School: _____

___ 3. **Minimum Cumulative College GPA of 2.3**

The total cumulative GPA of all schools that provide a required program prerequisite course will be included in the calculation.

___ 4. **Verification of High School Diploma or GED***

___ GED, High School Equivalency Certificate, high school diploma, high school transcript with posted graduation date, or if enrolled in Washtenaw Technical Middle College (WTMC)** , a current high school transcript **must be submitted with your application** unless previously submitted.

***Completion of college courses and/or a college degree DOES NOT meet this requirement.** If your high school is located outside the United States, verification **must** be in the English language. If a translation is done, it must be completed through a translation company. If you are unable to verify this requirement, you are welcome to contact the Pharmacy Technician Certification Board at contact@ptcb.org to determine if an exemption can be made based on your situation.

WTMC students **must submit verification of high school graduation to the program director prior to graduating from the Pharmacy Technology program.

___ 5. **Program Application and Requirements Checklist (this form)**

___ 6. **Communication Acknowledgement Form**

___ 7. **Additional Information Form**

___ 8. **Abilities Statement**

___ 9. **Residency Verification**

For more information on WCC's policies and procedures regarding residency or to learn of additional documentation that can be submitted to verify residency, please visit WCC's website at www.wccnet.edu/residency. **The student's residency status may be updated accordingly based on the documentation submitted.**

___ Must include a copy of the front and back of your **Driver's License or State ID Card**.

Optional Checklist

The items below are not required to apply to the program. However, by successfully completing and/or meeting these items by the application deadline, you can earn additional points which could give you a more competitive edge.

___ 1. **Support Courses**

Please indicate the course(s) you have completed below.

___ a. **HSC 101 (Healthcare Terminology) or HSC 124 (Medical Terminology) with a minimum grade of C/2.0**

• *Level I Prereqs (HSC 101 & 124): Academic Reading and Writing Levels of 6*

___ Course Completed: _____ School: _____

___ 2. **Veteran Status**

___ Submit form **DD-214** to verify status.

___ 3. **Associate Degree or Higher Degree from an Accredited U.S. College or University**

___ Graduation Date: _____ Degree: _____ School: _____

___ 4. **Alternate Candidate Status**

Students who made alternate candidate status and did not make admission to the program based on a previous application will be awarded additional points. Students will only be awarded points for this status under WCC's competitive admission process and not the old waitlist process.

___ Previous Alternate Candidate Semester(s): _____

Entrance Requirements

1. Mandatory attendance at the new student orientation session upon acceptance into the program. Students who do not make admission but are given alternate candidate status will be required to attend orientation to be eligible to move to accepted status if a seat becomes available.
2. Upon acceptance in the program, a criminal background check must be obtained through the college-designated vendor before attending the mandatory orientation session. Specific information will be included in the program acceptance letter.
3. Students who fail to comply or meet the above requirements will forfeit their seat in the program.

Continuing Eligibility Requirements

1. Additional criminal background checks may be conducted at any time during the program. Students may be required to have drug testing as well as additional criminal background checks and/or fingerprinting prior to the start of a clinical sequence as requested by specific clinical facilities. Failure to receive an acceptable drug test and/or criminal background/fingerprinting check at any time, will result in dismissal from the program.
 - a. Students who have a felony conviction record are not allowed to continue in the program or sit for the National Pharmacy Technician Certification Exam administered by the Pharmacy Technician Certification Board.
2. The requirements below must be submitted by November 1st. Detailed information including any required forms will be provided to the student at the mandatory orientation.
 - a. Submit a completed Report of Medical History form (physical examination by licensed physician)
 - b. Submit proof of a negative TB skin test
 - c. Submit proof of a current vaccination record (you may be asked to update vaccines)
 - d. Submit proof of a current Flu vaccine
 - e. Submit proof of current health insurance (health insurance must remain active throughout the entire program)
 - f. Submit proof of negative drug screen.
3. Students must complete any other health requirements as designated by the clinical sites.
4. WTMC students must possess a valid high school diploma or GED by the end of the program.
5. Students must be at least 18 years of age to graduate from this program.
6. Demonstration of proficiency in the English language prior to placement in PHT 198 (Pharmacy Experience). See the *Abilities Statement* for further details.
7. All Pharmacy Technology (PHT) and support courses to the program must be completed with a minimum grade of C/2.0.
8. Students who are dismissed from the program may not be eligible to reapply to the program.

PROGRAM APPLICATION AND REQUIREMENTS CHECKLIST continued for CTPHAR Fall 2018 (2018-19 Academic Year)

Students with questions or concerns regarding WCC's competitive admission process or applying to the program should contact the Health and Second Tier Admissions Office.

Program applications along with all documentation needed to verify completion of requirements can be mailed to the address below or submitted to Student Connection located on the 2nd floor of the Student Center Building (SC 203).

Health and Second Tier Admissions Office
Washtenaw Community College
4800 E Huron River Dr
Ann Arbor, MI 48105

I have successfully completed all required checklist items and I have included all documentation needed to verify these requirements.

Printed Name: _____

Student ID: _____

Signature: _____

Date: _____

Washtenaw Community College
Pharmacy Technology (APST)
Fall 2018 Entry (2018-19 Academic Year)
COMMUNICATION ACKNOWLEDGEMENT FORM

WCC sends **all communications** regarding a student's Health and Second Tier Admissions Application Status, beginning with the application process through the admission process, directly to the WCC student email address **ONLY**. Therefore, it is extremely important that students check their WCC student email on a regular basis so they do not jeopardize their status. WCC assumes that any information sent to a student's WCC email has been received and reviewed by the student. Please complete this form to confirm acknowledgement of this information.

Please **carefully read** the statements below and **initial EACH ONE** to confirm you understand and acknowledge:

- _____ 1. I understand that from this point on, all future communication regarding my status will be sent directly to my **WCC student email address ONLY**.
- _____ 2. I agree to check my student email on a regular basis and review all information sent by the Health and Second Tier Admissions Office so I do not jeopardize my status.
- _____ 3. I understand that even though all communication will be sent to my student email address, WCC will occasionally send communications by mail.
- _____ 4. I understand that if my address on record is inactivated due to returned mail by the Post Office, WCC will inform me through my student email and I will be given a deadline by which I must update my address in order to maintain my status.
- _____ 5. I understand that if WCC is unable to contact me regarding my status and/or I fail to call/respond to any contacts made by the Health and Second Tier Admissions Office regarding my status, **my application will be closed**.
- _____ 6. I agree to keep all my contact information updated and current in the College system (including addresses, emails, and phone numbers). I understand that my contact information can be updated at any time through my *WCC Gateway* account by clicking on *MyWCC* and then *Personal Information*. Or, I may update this information at Student Connection located on the 2nd floor of the Student Center Building or by calling (734) 973-3543.

I have read, understand, and initialed **all** of the above statements.

Printed Name: _____

Student ID: _____

Signature: _____

Date: _____

Washtenaw Community College
Pharmacy Technology (CTPHAR)
Fall 2018 Entry (2018-19 Academic Year)
ADDITIONAL INFORMATION FORM

The additional information below is important and pertains to the program. **Please carefully read the statements below and initial each one to show you understand them.**

- _____ 1. I understand admission to this program is based on WCC's *Admission to High Demand Programs* policy.
- _____ a. I have read the ***Admission to High Demand Programs*** policy on WCC's website at <http://www.wccnet.edu/trustees/policies/2005/>.
- _____ b. I have reviewed the competitive admission process ***Point Scales for All Programs*** on WCC's Enrollment Steps for Health and Second Tier Program Students website at <http://www.wccnet.edu/studentconnection/admissions/health-second-program/>.
- _____ c. I have had all my questions and/or concerns pertaining to WCC's competitive admission process answered by the Health and Second Tier Admissions Office.
- _____ 2. I understand admission requirements/criteria and program requirements (including courses, minimum grade, and GPA requirements) along with WCC's point system and scales are reviewed annually and subject to change.
- _____ a. I understand I am expected to meet all admission requirements/criteria for the semester(s) for which I apply, and if offered admission, I must meet all program requirements based on the **catalog term** of when I **first begin** the program.
- _____ 3. I understand students are sent an email upon receipt of their program application as confirmation their application was received. However, I understand that it may take anywhere from **2 weeks to 8 months** before my application will be reviewed and processed depending on the time of year and the number of health applications submitted at that given time. And, that applications are reviewed in the order they are received with consideration to all health program application deadlines and class determination dates.
- _____ b. I understand that after my application is reviewed, and if it is determined that I meet all minimum admission requirements to be considered for admission to the program during this admission cycle, I will be notified by email. However, I understand that all optional items completed to earn additional points towards my application will **not** be reviewed or processed until **after** the application deadline.
- _____ 4. I understand that after WCC has reviewed and processed all applications for this cycle, the class will be determined and the communications below will be sent depending on my status.
- _____ a. I understand that if accepted or given alternate candidate status in the program, I will be sent an official letter by email and mail. And, in this letter/email, I will be notified of the date, time, and location of the mandatory orientation session along with other important deadline and dates. In addition, I will be provided with details regarding the purchase of an account through the college-designated vendor for obtaining criminal background checks and submitting and tracking my health records for maintaining my status in the program.
- _____ i. I understand an alternate candidate should be prepared to take the place of any accepted student who is unable to start the program. And, to be eligible to move into the program if a seat becomes available, I must maintain my alternate status by meeting the requirements outlined in my official letter/email. I understand that if I maintain my status, I will remain an alternate for this admission cycle through the start of the semester. And, if a seat opens in the meantime, I will be accepted and informed by email.

ADDITIONAL INFORMATION FORM continued for CTPHAR Fall 2018 (2018-19 Academic Year)

_____ ii. I understand as an alternate candidate, if I am **not** offered admission to the program prior to the start of the semester or I do not meet requirements needed to maintain my status, **my application will be closed**.

_____ b. I understand that if I am **not** accepted or given alternate candidate status in the program, I will be notified by email. And, at that time, my application will remain open through the start of the semester. I understand that in the event that the alternate candidate list is exhausted, there is a chance I will be called into the program. However, I understand **my application will be closed** after the semester begins.

_____ i. I understand WCC strongly recommends that I meet with the Health Programs Counselor for advising to discuss ways to make my application more competitive.

_____ 5. I understand that program applications are semester specific and only valid for the semester for which I applied. And, that if my application is closed for any reason and I wish to be reconsidered for admission to the program, I must meet current admission requirements and submit a new program application.

I have read and initialed all statements listed above showing I understand them.

Printed Name: _____ Student ID: _____

Signature: _____ Date: _____

Washtenaw Community College
Pharmacy Technology (CTPHAR)
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ABILITIES STATEMENT

Admission into the Pharmacy Technology program is contingent upon students declaring that they have specific physical and cognitive abilities. These requirements are detailed below. WCC reserves the right to request that students successfully demonstrate the specific cognitive and physical abilities related to the Pharmacy Technology program.

Abilities necessary to ensure attainment of competencies in the Pharmacy Technology program. The student must be able to:

1. Demonstrate English language proficiency with sufficient skill to communicate.
2. Demonstrate the degree of visual acuity to:
 - a. Read prescriptions and labels that are either handwritten or typed.
 - b. Package various drugs in liquid and solid form.
 - c. Prepare and affix labels to various medication containers.
 - d. Demonstrate eye-hand coordination and arm-hand steadiness for manipulation of equipment, i.e. syringes, procedures.
3. Demonstrate sufficient locomotor and dexterity skills necessary for performance of required tasks.
 - a. Move, adjust and manipulate a variety of pharmacy equipment.
 - b. Lift and carry a minimum of ten (10) pounds.
 - c. Stand and walk for six to ten hours/day.
4. Demonstrate the ability to hear and comprehend ranges of sound.
 - a. Posses auditory acuity to hear patient's calls for assistance without facing the patient.
 - b. Posses auditory acuity to interpret various equipment signals and alarms and use the telephone.

I have read the above statements and believe I meet the above requirements.

Printed Name: _____

Student ID: _____

Signature: _____

Date: _____

Washtenaw Community College
 Pharmacy Technology (CTPHAR)
 Fall 2018 Entry (2018-19 Academic Year)
COURSE SEQUENCE

The Pharmacy Technology (PHT) courses will span over two (2) consecutive semesters and are sequential and complemented with required support courses, which fulfill the certificate requirements at WCC. Students are encouraged to take all support courses (*) before they begin the program. Support courses (*) may be taken prior to the scheduled semester, but **no later than** the scheduled semester below. All Pharmacy Technology (PHT) courses must be taken in the scheduled semester below.

Students completing the courses outlined above will obtain a Certificate in Pharmacy Technology. Students may also complete an associate degree by using the same core pharmacy technology courses in addition to completing the general education requirements and electives for an Associate in Applied Science in Occupational Studies.

Students should meet with an advisor/counselor to discuss the timing and selection of prerequisite and support courses.

Support courses (*) and Pharmacy Technology (PHT) courses must be successfully completed with a minimum grade of C/2.0. (All grades are based on a 4.0 GPA scale)

| Major/Area Requirements (Prerequisites Required to Apply to Program) | | 11-12 credits |
|---|---|----------------------|
| BIO 101 | Concepts of Biology or Higher Level College Biology Course (including Lab) | 4 credits |
| ENG 111 | Composition I | 4 credit |
| MTH 160 or MTH 167 or MTH 169 or | Basic Statistics Math Applications for Health Sciences Intermediate Algebra Any Academic Math Level 4 or Higher Course | 3-4 credits |
| Semester 1 (Fall) | | 9-11 credits |
| PHT 100 | Introduction to Pharmacy and Health Care Systems | 4 credits |
| PHT 103 | Pharmaceutical Calculations | 2 credits |
| PHT 145 | Prescription Processing and Compounding | 2 credits |
| <i>HSC 101 or HSC 124</i> | <i>Healthcare Terminology* Medical Terminology</i> | <i>1-3 credits</i> |
| Semester 2 (Winter) | | 8 credits |
| PHT 101 | Pharmacology for Pharmacy Technicians | 4 credits |
| PHT 198 | Pharmacy Experience | 4 credits |
| TOTAL CREDITS REQUIRED FOR PROGRAM | | 28-31 credits |

*Support course(s).

Washtenaw Community College
 Pharmacy Technology (CTPHAR)
 Fall 2018 Entry (2018-19 Academic Year)
ESTIMATED COSTS

Tuition rates and fees listed below are estimates based on the 2017-2018 academic year and are only valid through the Spring/Summer 2018 semester. If a change is made in the tuition rates and/or fees for any future semester, these changes would go into effect beginning in the fall semester of each year. To view the current tuition rates and fees, please visit WCC's website at www.wccnet.edu/tuition. All fees below are estimates and subject to change.

| TUITION & COLLEGE FEES (includes \$7 enrollment/technology fee per credit hour) | COST |
|--|-------------------|
| 28 – 31 credits @ \$102 (<i>in-district rates</i>) | \$2,856 - \$3,162 |
| 28 – 31 credits @ \$165 (<i>out-district rates</i>) | \$4,620 - \$5,115 |
| 28 – 31 credits @ \$221 (<i>out-state rates</i>) | \$6,188 - \$6,851 |
| 28 – 31 credits @ \$255 (<i>international rates</i>) | \$7,140 - \$7,905 |
| Contact Hour Fee (labs & clinicals) Semester 1 (PHT 145) = \$300 & Semester 2 (PHT 198) = \$250 | \$550 |
| Graduation Fee (cap & gown) | \$45 |

| PROGRAM FEES | COST |
|---|---------------|
| Physical Exam (including lab tests & immunizations) | \$150 - \$250 |
| Required Text Books & Course Packs | \$300 - \$400 |
| Uniform Costs | \$25 - \$40 |
| WCC Patches/Name Badges | \$15 |
| PCTB Certification Examination | \$129 |
| Vendor Fee for Background Checks & Healthcare Data Document Package: \$20; Drug Test: \$40; Background Check: \$46 | \$106 |

| ADDITIONAL COSTS TO CONSIDER | COST |
|--|-------------|
| Student Health Insurance | |
| Transportation to and from campus and clinical sites | |
| Parking fees for clinical sites | |
| Lunches at clinical sites | |
| Supplies (notebooks, paper, pens, pencils, calculator, etc...) | |
| Childcare | |

| TOTAL COSTS* (tuition & college fees + program fees based on residency status) | COST |
|---|-------------------|
| <i>In-District Residents</i> | \$4,176 - \$4,697 |
| <i>Out-District Residents</i> | \$5,940 - \$6,650 |
| <i>Out-State Residents</i> | \$7,508 - \$8,386 |
| <i>International Residents</i> | \$8,460 - \$9,440 |

*Total cost does not include "Additional Costs to Consider".

Washtenaw Community College
Pharmacy Technology (CTPHAR)
Fall 2018 Entry (2018-19 Academic Year)
CONTACT INFORMATION AND ACCREDITATIONS

Accreditation and helpful contact information is provided below.

Health Programs at WCC

Website: <http://health.wccnet.edu>

Health and Second Tier Admissions

Phone: (734) 973-3596 or (734) 477-8998

Email: healthadmissions@wccnet.edu

Website:

<http://www.wccnet.edu/studentconnection/admissions/health-second-program/>

Student Connection

Phone: (734) 973-3543

Email: studrec@wccnet.edu

Transcript Evaluation

Phone: (734) 973-3590 or (734) 477-8969

Email: transcripteval@wccnet.edu

Website: www.wccnet.edu/transfer

Financial Aid

Phone: (734) 973-3523

Email: finaid@wccnet.edu

Counseling

(Advising **before** admission to the program)

Phone: (734) 677-5102

WCC Campus Map & Driving Directions

Website: www.wccnet.edu/about-us/visiting/

WCC Room Locator

Website: www.wccnet.edu/about-us/room-locator/

Regular Office Hours (Student Services)

Monday - Thursday: 8:00am – 7:00pm

Friday: 8:00am – 5:00pm

Saturday: 9:00am – 1:00pm

Kiela Samuels, Pharm. D., R.Ph.

Pharmacy Technology Program Director

Phone: (734) 477-8526

Email: ksamuels@wccnet.edu

Sue Travis

Health Programs Counselor

(Advising **after** admission to the program)

Phone: (734) 973-3358 – by appointment only

Email: stravis@wccnet.edu

The American Society of Health-System Pharmacists

(Program Accreditation)

7272 Wisconsin Ave

Bethesda, MD 20814

Phone: (301) 657-3000

Website: www.ashp.org

Pharmacy Technician Certification Board (PTCB)

2215 Constitution Ave NW

Washington, DC 20037

Phone: (800) 363-8012

Email: contact@ptcb.org

Website: <http://www.ptcb.org/>

The Higher Learning Commission of the

North Central Association

(Institution Accreditation)

230 N LaSalle St, Ste 7-500

Chicago, IL 60604

Phone: (312) 263-0456

Website: www.ncahlc.org