

STATE STUDY COURSE
For Preparation of
State Nursing Home
Administrators Exam

Sponsored by

**Missouri Association of
Nursing Home Administrators**

January 30, 2012
March 26, 2012
May 21, 2012
July 23, 2012
September 17, 2012
November 12, 2012

STATE STUDY PREPARATION COURSE

Preparing for the State examination for licensed Nursing Home Administrators is a formidable task. In this program attendees will learn the various regulatory and statutory components that make up the Missouri State Licensure exam and the nature of the questions. Study tools for use after the program will also be provided to assist licensure candidates in the continued study, at their leisure, prior to taking the examination.

COURSE DATES

January 30, 2012
March 26, 2012
May 21, 2012
July 23, 2012
September 17, 2012
November 12, 2012

COURSE INSTRUCTOR

SUSIE BRISCOE, LNHA
* Bachelor of Science, Business Administration
* Licensed Administrator since 1989
* Employed by Monterey Park Nursing Ctr.,
Independence
* Currently serving as a panel member of the
Informal Dispute Resolutions, Primaris

COURSE OUTLINE

9:30 AM - 10:30AM INTRODUCTIONS AND
REVIEW OF GENERAL LISC.
REQUIREMENTS
10:30 AM - 11:45 STATE REGULATIONS AND
CRITICAL INFORMATION
11:45 - 12:45 PM LUNCH (ON YOUR OWN)
12:45 PM - 2:00 PM STATE REGULATIONS
AND CRITICAL NUMBERS
2:15 PM - 3:30 PM REVIEW TEST QUESTIONS/
DISCUSSION/ADJOURN

COURSE LOCATION

MANHA Training Center
4100 Country Club Drive
Jefferson City, Mo 65109
573-634-5345
Fax: 573-634-8590
www.mlnha.org

COURSE COST

\$100 per registrant
no personal checks

**Please apply by filling out the follow-
ing form and fax or mail to:**

MANHA
4100 Country Club Drive
Jefferson City, Mo 65109
or Fax: 573/634-8590
Web Page: www.mlnha.org

STATE STUDY PREPARATION COURSE

NAME: _____ FACILITY NAME: _____
ADDRESS: _____ City/State/Zip _____
FACILITY PHONE: _____ FACILITY Fax _____
CLASS DATE: _____ EMAIL: _____
Total amount enclosed: \$ _____ method of payment (circle one): Check Visa MC Discover
Number _____ Expiration Date _____
Name on Card _____ Address on Card _____ 3 Digit Security _____