



Faculty of Health Sciences
Continuing Education

Emergency Mental Health
Application Form

Please tick one:

- I have previously taken a course at Douglas College
- I have never taken a course at Douglas College
- I have taken an online Blackboard course.

If known: Student # _____

Please print:

Surname: _____ First Name: _____

Address: _____ Apt. #: _____

City: _____ Province: _____ Postal Code: _____

Phone: Home: _____ Work: _____

Email: _____ Circle one: Male Female

Date of Birth: dd / mm / yy
 / /

FEES:

PLEASE ATTACH

1. EMH Certificate Program.
Three Modules, includes clinical practice. \$2,100.00

2. EMH stand alone modules, without clinical.

- Module 1 - \$700.00**
- Module 2 - \$700.00**

(Course materials not included in cost of course)

PLEASE ATTACH
ENTRANCE REQUIREMENT DOCUMENTATION

- *Proof of professional designation in health or human services field (module 3: practicum)*
- *CPR Level C First Aid Certificate (module 3:practicum)*
- *Criminal Record Search (module 3:practicum)*

PLEASE NOTE: On-line registration is currently not available for this course.

Method of Payment: *please tick one box*

- Cheque enclosed, payable to **Douglas College**
- VISA
- MasterCard

Card # _____ Expiry Date: _____

Name on Card: _____ Signature: _____

Mail to:

Fax to:

Walk-in:

Faculty of Health Sciences Continuing Education
Douglas College, Room D-1017 – DLC
PO Box 2503
New Westminster, BC V3L 5B2

Faculty of Health Sciences Continuing Education
604-777-6498
Tel: 604-777-6527

Room D1017
Douglas College
1250 Pinetree Way
Coquitlam, BC

OFFICIAL USE ONLY

Semester: _____ Registered & Paid in Full

CRN(s): _____

Program Signature _____ Date _____ Registration Clerk Signature _____ Date _____



Faculty of Health Sciences Continuing Education
**Emergency Mental Health
 Course Materials Order Form**

Last Name: _____ *First Name:* _____

Address: _____ *Apt. #* _____

City: _____ *Province:* _____

Postal Code: _____ *Email:* _____

Home Phone: _____ *Work Phone:* _____

Call Bookstore for prices: 604-777-6260 (plus GST and shipping & handling)

Required

**Shea, Psychiatric Interviewing, the Art of Understanding
 Hillard & Zitek, Emergency Psychiatry, 2004**

Method of Payment: *please tick one box*

Cheque enclosed, payable to **Douglas College** VISA MasterCard

Card # _____ Expiry Date: _____

Name on Card: _____ Signature: _____

Mail to:

Faculty of Health Sciences Continuing Education
 Douglas College, Room D-1017 – DLC
 PO Box 2503
 New Westminster, BC V3L 5B2

Fax to:

Faculty of Health Sciences Continuing Education
 604-777-6498
Tel: 604-777-6527

Walk-in:

Room D1017
 Douglas College
 1250 Pinetree Way
 Coquitlam, BC