

Association of Care Services At Home (ACSAH)

Application For Certified Senior Care Aide (CSCA) Certification

You MUST Type the below information

Applicant Full Name: _____

Applicant Mailing Address: _____

Course Completion: I, (insert your name) _____, certify that I have personally completed all the online caregiver training tutorials at the following website: <http://learningcenter.pahomecare.org> and include a copy of the training dashboard as evidence. **OR**, see attached evidence of 10 hours of caregiver training I completed via my employer.

Code of Ethics: I, (insert your name) _____, certify that I will follow the best practice caregiver techniques I learned in my training tutorials and will act with compassion and integrity when providing care to the public.

Applicant Signature: _____ Date: _____

Home Care Agency Name: _____

Mail this completed form to: ACSAH, 7545 Irvine Center Drive, Suite 200, Irvine, CA. 92618 with the below three items. A CSCA Certificate will be mailed to you within 10 business days.

1) A copy of the online training dashboard showing the check marks next to all your completed video tutorials. Or, a copy of your caregiver training evidence from your home care agency.

2) A check for \$100 made out to ACSAH.

3) A copy of your test score showing a passing score of 75% or higher. Go here to take the 100 question CSCA Exam: www.acsah.org/testing

For Office Use Only

ACSAH Director Name: _____ Date: _____

Date CSCA Certification Issued: _____ Renewal: YES NO