

SCHOOL: NURSE ASSISTANT TRAINING PROGRAM NOTICE

ATTN: Fe Borrillo, Owner/Administrator

County: San Mateo

Address:

TPRU Survey Date: N/A

Niles College
1290 Old Bayshore Highway, Suite 152
Burlingame, CA 94010

Approved RN Program Director: Fe Borrillo, RN

COMMENTS

Telephone Number: 650-212-3100

APPROVED INSTRUCTORS:
Fe Borrillo, RN -Program Director
Patty-Lisa Kaufusi, RN
Geraldine Borrillo, LVN
Annalyn Bawiin, LVN
Maria Elena Erolon, LVN

YOUR PROGRAM

APPROVED CLINICAL TRAINING SITE(S)
Carlmont Gardens Nursing Center (F0770)
Burlingame Long-Term Care (F0111)
All clinical site approvals expire concurrent with
program expiration unless otherwise specified.

- HAS BEEN APPROVED
- HAS BEEN RENEWED
- HAS BEEN DISAPPROVED

February 28, 2020
Program Expiration Date

S- 1443 Day P.M. Weekend
Provider Identification Number

APPROVED TRAINING SCHEDULE:
Revision date: May 2018
Theory 60 hours; 5pm - 9pm
Clinical 104 hours; 7am - 3:30pm

- The written plan of the program is incomplete regarding:
 - Nurse Assistant Certification Training Program (NATP) Application (CDPH 276S)
 - Nurse Assistant Training Program Skills Checklist (CDPH 276A)
 - Daily Nurse Assistant Training Program Schedule (CDPH 276B)
 - Nurse Assistant Training Program Individual Student Record (CDPH 276C)
 - Disclosure Ownership and Control Interest Statement (CDPH 276D)
 - Clinical Site Agreement (CDPH 276E)

The Department has received, reviewed, and approved the renewal application for this nurse assistant training program.

- Instructor(s):
 - Director of Staff Development (DSD) / Instructor Application (CDPH 279)
 - Resume(s)
 - Copy of current nursing license
 - Copy of previously approved CDPH 279
 - Twenty-four (24) hours BRN-approved Continuing Education
 - Hire confirmation letter from Administrator with a copy of statewide DSD certificate

Fe Borrillo, RN
Name of Approved RN Program Director

Susan Voisin

Susan Voisin, RN, HFEN for Linda Lorden, RN, HFEN
(916) 552-8873

May 8, 2018

*Please include a copy of this notice when responding to requests made by the Department.
*This form is for the exclusive use of TPRU.