

Commonwealth of Pennsylvania
Department of Public Welfare
Bureau of Human Services Licensing
The Thomas R. Roth Memorial Administrator Scholarship Fund
Purpose and Instructions

Purpose

The Thomas R. Roth Memorial Administrator Scholarship Fund allows eligible homes to send an individual to the administrator training required in § 2600.64(a)(2) (relating to administrator training and orientation) free of charge.

Instructions

In accordance with § 2600.64(a)(2), prior to initial employment as an administrator, a candidate shall successfully complete a 100-hour standardized Department-approved administrator training course. In order to be eligible for the scholarship, the following criteria must be met:

- The personal care home applying for the scholarship must be serving one or more residents who receive Supplemental Security Income (SSI).
- The personal care home applying for the scholarship must be licensed under 55 Pa.Code Chapter 2600.
- The candidate must be hired as the primary administrator for a licensed personal care home (not a back-up administrator).
- The candidate must meet the requirements in § 2600.53 (relating to qualifications and responsibilities of administrators).
- The candidate must be registered to attend the 100-hour training at one of the approved training institutions listed at the personal care home website:
<http://www.dhs.pa.gov/provider/longtermcareservices/index.htm>.
- The candidate must have attended or be registered to attend the orientation program for Chapter 2600 approved and administered by the Department required in § 2600.64(a)(1).
- The attached application must be completed by the licensed personal care home and returned with attachments within 15 days prior to the first date of the 100-hour training course to:

Department of Public Welfare
Bureau of Human Services Licensing - Training Director
Room 631 Health and Welfare Building
625 Forster Street
Harrisburg, Pennsylvania 17120

If the application is approved, an approval letter and a scholarship invoice will be sent to the personal care home.

The personal care home will be expected to pay for the 100-hour course upfront. Once the 100-hour course has been successfully completed, the home must send the following items to the Department for reimbursement: a completed scholarship invoice, DPW 100-hour course certificate of completion, proof of payment to institution showing the total amount paid, and a copy of the scholarship approval letter.

Upon receipt of the above items, the Department will send payment to the personal care home reimbursing the home for the full cost of the training.

The scholarships are not an entitlement and are available on a limited basis. Funds are limited. Applications will be reviewed on an individual basis.

If you have questions you may contact the Operator Support Hotline at (866) 503-3926.

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The Thomas R. Roth Memorial Administrator Scholarship Fund
Application Form

1. **Full Name of Applicant** (print): _____

2. **Qualifications of Applicant*** (check one):

***Written proof of eligibility must be attached to this application**

- _____ A license as a registered nurse from the Department of State.
(copy of valid PA RN license must be attached)
- _____ An associate's degree or 60 credit hours from an accredited college or university.
(copy of valid transcript and written proof of accreditation must be attached)
- _____ A license as a licensed practical nurse from the Department of State and 1 year of work experience in a related field.
(copy of valid PA LPN license and resume showing work history must be attached)
- _____ A license as a nursing home administrator from the Department of State.
(copy of valid PA NHA license must be attached)
- _____ For a home serving 8 or fewer residents, a general education development diploma or high school diploma and 2 years direct care or administrative experience in the human services field. *(copy of high school diploma/GED and resume showing work history must be attached)*

3. **Legal Entity Name:** _____

4. **Legal Entity Address:** _____

5. **Legal Entity Phone Number:** _____

6. **Personal Care Home Name:** _____

7. **Personal Care Home Address:** _____

8. **Personal Care Home Phone Number:** _____

9. **Personal Care Home License Number:** _____

10. **Personal Care Home Administrator:** _____

11. **100-Hour Training Institution** (check one): Individual MUST be registered to attend the 100-hour course PRIOR to applying for a scholarship

- _____ Butler County Community College
- _____ Harrisburg Area Community College
- _____ Northampton Community College
- _____ P.E.P.P. Unlimited
- _____ Penn State Abington
- _____ Penn State Beaver
- _____ Penn State DuBois
- _____ Penn State Erie, the Behrend Campus
- _____ Penn State Greater Allegheny
- _____ Penn State Schuylkill
- _____ Penn State York
- _____ Temple University

12. **Start Date of 100-Hour training course** _____

13. **Cost of 100-Hour training as advertised by training institution:** _____

14. **Licensed capacity of personal care home:** _____

15. **Number of residents currently served by the personal care home:** _____

16. **Number of residents who currently receive Supplemental Security Income (SSI):** _____