

Student Application Check list

Student Name: _____ Term: _____

Students must have all of the following items present in their student file to be eligible to participate in the program. **Dead line for Health Requirements is the Monday prior to the start of the semester.**

- ☐ West Los Angeles College Student Application
- ☐ Proof of enrollment of 283B form, signed and properly typed with Student personal Information.
 - 1. Program Information Session
 - 2. Admission application assistance
 - 3. Financial assistance contact: FAFSA.COM
 - 4. Submit CNA Program Application Packet
- ☐ Nursing Assistant Program Application Complete
- ☐ Cardiopulmonary Resuscitation (CPR) – Basic Life Support for Health Care Providers Card valid through the duration of the program (will be offered at WLAC).
- ☐ **Physical Examination.** Health Record signed by a Physician, Nurse Practitioner or Physician Assistant (**completed within the 2 months prior to the start of the program**) that specifies that you can participate in the classroom and clinical internship portions of the program without any limitations.
- ☐ **Urine Negative Drug Test** (8 panels, **within 2 months of start of Program**) **Immunization proof or titer results confirming:**
 - ☐ Tetanus (within past 10 years)
 - ☐ Flu Shot Current
 - ☐ Hepatitis B immunization record or Titer result
 - ☐ MMR (Measles, Mumps, Rubella) immunization record or Titer result
- ☐ **Proof of Absence of Tuberculosis (negative skin test or negative chest x-ray within two months of start of program)**
- ☐ Varicella (Chicken pox) (titer or proof of vaccination)
- ☐ CNA Malpractice Insurance Application (District require \$ 1000,000 single occurrence & \$ 3000,000 Go to NSO. COM
- ☐ Covid -Vaccine

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Student file reviewed by: _____ Date: _____

- ☐ Live Scan / Criminal Background Clearance
- ☐ Evidence of Understanding from Student Hand Book
- ☐ DHS 283 B form

Student approved for entrance into program by: _____ Date: _____