BLUE ROCK
TRAINING CENTER, INC.

Checklist for Certified Nurse Aide (C.N.A.) Student Records

Student Name_____   Course Start Date_____

Checklist for Enrollment Requirements

□Nurse Aide Training Program Application
- Entrance Exam

□ Application fee of $_____
□ Tuition Payment $_____
□ Payment Plan Agreement, if applicable, with deposit
□ Copy of State Issued Driver's License or I.D.
□ Copy of Social Security Card
□ Copy of GED/High School Diploma
□ Immunization Record w/Signature from Provider
□ Nurse Aide Registry Check
□ Criminal Background & National Sex Offender Check
□ OIG Check
□ Signed Handbook Acknowledgement

Checklist for Graduation Requirements

□ Completion of All Assigned Coursework with Minimum Passing Score of _____
□ Completion of All Required Classroom and Skills Lab Hours
□ Minimum Passing Score of __70___ on Final Exam
□ Minimum Passing Score of __70___ on Final Skills Exam
□ Completion of All Required Clinical Training Hours
□ Authorization to Test
□ Registration for Certification Exam
□ Financial Obligations Satisfied
□Copy of School Issued Certificate of Completion
□Copy of Signed Skills Competency Acknowledging Student Receipt of 2 copies
□ Other:_____

Date of Enrollment Checklist Review:_____
Signature of School Official:_____

Date of Graduation Checklist Review:_____
Signature of School Official:_____

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