

Student Name _____ Student ID _____ Advisor _____

2015-16

ARKANSAS STATE UNIVERSITY-NEWPORT
CERTIFICATE OF PROFICIENCY
Certified Nursing Assistant

A. Possible Prerequisites: None required

B. General Education Core: None required

C. Major Technical Discipline:

Course #	Course Title	Hours	Semester	Grade
SPN 1507	Nursing Assistant Certification	_____	_____	_____

D. Directed Electives: None required

Minimum Required Credit Hours (7)

Student's Signature _____

Date: _____

Advisor's Signature _____

Date: _____

Date Certificate Completed: _____