

**CERTIFICATE OF PROFICIENCY  
 CERTIFIED NURSING ASSISTANT**

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_ Advisor \_\_\_\_\_

AY2022-23

**Possible Prerequisites:** None Required

**First Semester (7 credit hours)**

First Semester (7 credit hours)			Semester	Hours	Grade	ACTS
CNA	1507	Certified Nursing Assistant		7		

**Total Credit Hours: 7**

**Minimum Required Credit Hours (7)**

**Expected Graduation Date:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Advisor Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**ADDITIONAL NOTES:**

1. Official transcripts from High School or GED Program
2. Proof of a current Tetanus immunization
3. Proof of a current TB skin test
4. Proof of a current Influenza vaccination
5. Successful Background Check (administered in the program)
6. Successful Urine Drug Screen (administered in the program)