

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)

## CERTIFICATE OF PROFICIENCY CERTIFIED NURSING ASSISTANT

Cip Code: 51.3902; Degree Code: 0266

Student Name			Student ID		Advisor		
Possible P	Prerequisites	s: None Required					AY2025-2026
First Semester (7 credit hours)				Semester	Hours	Grade	ACTS
CNA	1507	Certified Nursing Assistant			7		
	uired Credit Graduation	Hours (7) Date:					
Student Signature:							
Advisor Signature:				Date: _			
ADDITION	IAL NOTES:						
1. Official	transcripts f	rom High School or GED Progra	m				
2. Proof o	f a current T	etanus immunization					