MISSION TRAILS ROP NURSING ASSISTANT PROGRAM
690 Main Street, Soledad, Ca 93960
(831) 678-6300 Fax (831) 678-0162

☐ **STEP 1** Registration Fee $1,000 *(Payment Plan)*. A $200 deposit must be given in order to receive the package. ***Money Orders or Cash only Payment is NONREFUNDABLE***

☐ **STEP 2** Read and complete all *Medical Forms*. Schedule a doctor's visit for a physical. The physical needs to be done by a Medical Doctor, Physician's Assistant, or Nurse Practitioner. Obtain the doctor's signature, License number and office stamp for medical clearance on the following forms:

- **Certificate of Medical Examination from**
- **Pregnancy Release form**
- **Medication Release form**
- **Affirmation of Physical and Mental Ability**

☐ **STEP 3** Take a TB test, the results need to written on an **official form with office stamp or heading** and needs to have the following information:

- Date of when given
- Date of when read
- Results written on ____#mm along with whether positive or negative
- Signature and title of person reading the results and business stamped
  Note: If you test positive then have the medical examiner fill out the middle of the "TB test (PPD)" form in the packet. Your medical examiner will then give you a prescription for a chest x-ray.

☐ **STEP 4** Fingerprints, you MUST be free of any criminal conviction or submit a letter to the Department of Public Health Nurse Assistant Unit clearing you to be admitted to the CNA training. Make sure you take you Request for Live Scan form included in this package along with your ID or driver's license with you at the time of your appointment.

☐ **STEP 5** You must complete the Nurse Assistant and/or Home Health Aide Initial Application. You must use your name exactly as it is on your Driver's License and your Social Security card. Complete all the "yes" and "no" questions. ***Please do not sign this form.***

☐ **STEP 6** Nursing uniform (at least 2 changes). **Royal Blue Uniforms** need to be purchased at JT's HealthCare, see attachment. White shoes, leather top tennis shoes are acceptable. Watch with a second hand if possible to have stretchable wrist band. Medal Buckle Gait Belt for patient lifting. Name Tag