

## REQUIREMENTS FOR **HEALTH PROFESSIONS** PROGRAMS

| ROGRAINS   | • CEI  | 4 CLI  | ▲ DE   | ▲ ME       | H H H H H H H H H H H H H H H H H H H |
|--|--------|--------|--------|------------|---------------------------------------|
| HEALTHCARE PROGRAM IMMUNIZATIONS   |        |        |        |            |                                       |
| <b>HEPATITIS B</b> (3 shot series) or positive titer before clinicals/<br>patient contact                              | Y      | Y      | Y      | Y          | Y                                     |
| MEASLES, MUMPS RUBELLA (MMR) or separate positive titers   | Υ      | Υ      | Ν      | Υ          | Y                                     |
| TETANUS/DIPHTHERIA/PERTUSSIS (TDAP)<br>(One dose within the past 10 years is required.)                                | Y      | Y      | Ν      | Y          | Y                                     |
| TUBERCULIN SKIN TEST (TB)<br>(Negative reading within 12 months of course completion date or chest x-ray is required.) | Y      | Y      | Y      | Y          | Y                                     |
| VARICELLA (CHICKEN POX) or positive titer  | Y      | Y      | Ν      | Y          | Y                                     |
| ADDITIONAL HEALTHCARE REQUIREMENTS   |        |        |        |            |                                       |
| 18 YEARS OF AGE  | Р      | Y      | Y      | Υ          | Y                                     |
| HIGH SCHOOL DIPLOMA, HSE/GED OR COLLEGE TRANSCRIPT   | Ν      | Y      | Y      | <b>Y</b> * | Y                                     |
| VALID DRIVER'S LICENSE OR GOVERNMENT PHOTO ID  | Y      | Y      | Y      | Υ          | Y                                     |
|  | Υ      | Y      | Y      | Υ          | Y                                     |
| SIGNED SOCIAL SECURITY CARD  |        |        |        |            |                                       |
| SIGNED SOCIAL SECURITY CARD<br>CURRENT CPR - BASIC LIFE SUPPORT (BLS) CERTIFICATION **                                 | Y      | Y      | Υ      | Ν          | S                                     |
|  | Y<br>Y | Y<br>Y | Y<br>Y | N<br>Y     |                                       |
| CURRENT CPR - BASIC LIFE SUPPORT (BLS) CERTIFICATION **<br>SATISFACTORY CRIMINAL BACKGROUND CHECK                      | -      | -      | -      |            | S<br>Y<br>N                           |

\* - Documentation is required (copy must be notarized) N - No documentation needed

P - Parental consent for applicants under 18 &

**RTIFIED NURSE AIDE** 

NTAL ASSISTANT

**DICATION AIDE** 

ARMACY TECH

INICAL MEDICAL SISTANT

approval by Coordinator

\*\* Current certification in CPR - Basic Life Support (BLS) 4 hour class (2 year certification) required. Online course not accepted.

## \*\*\* Satisfactory Criminal Background Check (WC is responsible for processing.)

A criminal background check will be conducted on each applicant prior to registration. Results of this report may prevent a student from being approved to register for a program or from attending clinical/ practicum/externship in some areas and from obtaining licensure through the applicable licensing agency. The following histories will disqualify an individual from consideration in some healthcare programs and clinical rotations:

Felony convictions

- Misdemeanor convictions or felony deferred adjudications involving crimes against persons (physical or sexual abuse)
- Misdemeanor convictions related to moral turpitude (prostitution, public lewdness/exposure, etc.)
- Felony deferred adjudications for the sale, possession, distribution, or transfer of narcotics or controlled substances
- Registered sex offenders
- Other charges will be reviewed and considered based on specific program requirements and restrictions

WC.EDU/WF

817-598-8870