



Health Sciences
Student Identification (ID) Information for Background Checks
(please print legibly)

Name _____ Student ID # _____

Primary Phone Number _____ Alternate Phone Number _____

Northwood Tech Email Address _____

Social Security Number (required for WI Caregiver Background Check) _____

Race (required for WI Caregiver Background Check) _____ White _____ Black
_____ Asian or Pacific Islander _____ American Indian or Alaskan Native _____ Unknown

Program

Instructor/Advisor will inform students if MN and/or other state background check is required.

_____ **Dental Assistant:** WI & National CBCs required prior to entry into the DA program; Policy DA-07

_____ **Health Information Technology:** WI & National CBCs required before the start of the fourth semester of coursework; Policy HIT-07

_____ **Medical Assistant:** WI & National CBCs required prior to entry into the MA program, and again 90 days prior to MA Practicum; Policy MA-12

_____ **Medical Laboratory Technician:** WI CBC required between May 26 and September 26 of the year you are admitted to (513) courses

_____ **Nursing Assistant:** WI CBC required prior to entry into the NA program

_____ **Nursing-Associate Degree:** WI, MN (Superior students only), & National required prior to entry into the ADN program; Policy ADN C-02

_____ **Occupational Therapy Assistant:** WI CBC required between August 1 and September 1 of the year you are admitted to (514) courses; Policy OTA-29

_____ **Pharmacy Technician:** WI & National CBCs required prior to entry into the PharmTech program; Policy PhT-05

_____ **Phlebotomy:** WI CBC required prior to entry into the Phlebotomy program; Policy Phleb-04

Student Signature _____ Date _____
(typed signature is acceptable)

This information is considered private and will be kept in a secured electronic file.