



Nurse Aide for Healthcare Checklist

- Go to St. Philip's College website, click "Apply" and apply with St. Philip's College.
- Go to the "Nurse Aide" webpage, click on "Admissions and Prerequisite Requirements". Next, click on "Admission Application", print and complete the application packet.
- Obtain a copy of your immunizations. You must be current on all immunizations, including meningitis and have a current tetanus shot, flu shot, and TB screening. **Submit this copy with your application.**
- Copy your government issued ID (driver's license, military ID, Passport) and social security card. If you do not have a social security number, please make a copy of your ITIN paperwork. **Submit both copies with your application.**
- Go to the Texas Department of Safety's website and obtain a background check. Click the link below to be taken to the website. Once at the website, click on New User on the left. Print background check results. **Submit the background check with your application.**
<https://securite.dps.texas.gov/DpsWebsite/CriminalHistory/>
- Go to the Texas Health and Human Services Employability Status Check Search website and obtain an Employability Status Check. Click the link below to be taken to the website. Once, at the website, enter you name or social security number and click submit. Print The Employability Status Check results. **Submit the Employability Status Check with your application.**
<https://emr.dads.state.tx.us/DadsEMRWeb/emrRegistrySearch.jsp>
- Take the Physical Examination form to your healthcare provider to get a physical. At this appointment, make sure to get a TB screening and flu shot. **Submit the physical examination form, TB screening results, and proof of receiving a flu shot with your application.**
- Submit your complete application in person to St. Philip's College Nursing Education Department, 1801 Martin Luther King Dr., San Antonio, TX 78203.
- Once you are accepted, you will be given a requisition for a drug screen. **Drug screens must be completed no later than one week before the first day of class.**

*If you have any questions about the steps above, please contact
Dr. Krysten Bailey, 210-486-2099 or Ms. Eve Garza, 210-486-2720.*



**Nurse Aide for Healthcare Program
APPLICATION**

1. Gather all required application documents: proof of immunizations, physical, copy of government issued ID, and Social Security Card, criminal background check, and employability check.
2. Submit your complete application in person to St. Philip's College Nursing Education Department, 1801 Martin Luther King Dr., San Antonio, TX 78203. Do not submit original immunization document. Only submit copies to the Nursing Department. We recommend that you submit your complete application by the recommended deadline. The following items must be submitted in order for your packet to be considered complete:
 - Application for Admission form
 - Proof of all immunizations
 - Physical
 - Copy of government issued ID and Social Security Card
 - Criminal background check
 - Employability Check
3. Nursing Education faculty and staff members will review your application for completeness
4. You will be notified by email of the status of your Application for Admission.

If your application is approved:

- We will send your acceptance letter and drug screening requisition to the email address provided on this application.
- The email will contain specific orientation, registration and payment instructions.
- You must be registered and paid at least 3 days prior to the first day of class.



Please print or type all information

Identifying Information:

Name: (Print Name) Last First MI

SSN: Banner ID Date of Birth

Student

Email: Home/Cell () -

Address: Street APT. # City State ZIP

Please provide your initials next to each item, confirming that you meet the minimum entrance requirements as listed:

- I am in suitable physical/emotional health to safely care for patients.
I am able to read, write, speak, and understand English.
I am able to perform the physical functions of the course.
I am free of previous felony convictions.
I am not listed on the Texas Nurse Aide Registry in revoked status.
I am not listed on the Employee Misconduct Registry.

The following items must be included with your application: proof of all immunizations, physical, copy of government issued ID, copy of Social Security Card, background check, employability check. Once you have completed the application packet, please return it in person to St. Philip's College Nursing Education Department; Center for Health Profession Building Office 100, 1801 Martin Luther King Drive, San Antonio, TX 78203.

WE ONLY ACCEPT COMPLETE APPLICATIONS! For questions about the application process, please call (210) 486-2720.

Office Use Only Date Received: Received By:



Please Note: Mandatory criminal background check will be required WITH application.

I hereby certify that the information contained in this application is true and complete to the best of my knowledge. I understand that any misrepresentation or falsification of information is cause for denial of admission or expulsion from the College. I understand that the information contained in this application will be read by the Faculty and Staff of St. Philips College, as appropriate.

Applicant Signature

Date

A criminal background check is required to confirm that you are free of previous felony convictions. **Your background check is due with application;** you will be provided with a definite deadline at the start of class. Background checks older than 90 days will not be accepted.

IMMUNIZATION

All applicants must show proof that the following immunizations have been obtained:

- **Varicella (Chicken Pox)** —Doses or documented evidence of disease by physician or a signed letter from a parent or legal guardian confirming history of the disease.
- **Hepatitis B- (COMPLETE)** series of 3 vaccines (this is a 6 months series)
- **Measles, Mumps, Rubella (MMR)** - Proof of (A) a complete MMR immunization (2 doses); or (B) Serum titer confirming immunity to each disease; or proof that you were born before January 1, 1957.
- **Tetanus**-Proof of having been immunized within the last 10 years.
- **Tuberculosis (TB Test)** – Proof of negative skin reading or chest x-ray within the last 12 months.
- **COVID**
- **Influenza: required** annually by October 1st of each year.

All healthcare providers and students in these professions should receive annual vaccination against influenza. Seasonal vaccines are required by clinical sites. We encourage you to get immunized for the flu during the flu season. However, if not, understand that you will be required to wear appropriate and approved mask during clinical rotations should you choose not to get immunized with the seasonal flu vaccine.

Documentation of ALL of the above listed immunizations is required at the time of application. Applications submitted without proper documentation of ALL required immunizations will not be accepted.



ALAMO
COLLEGES
DISTRICT

St. Philip's College

St. Philip's College
Nursing Education Department
Nurse Aide for Healthcare
Application for Admission

**PICTURE ID AND SOCIAL
SECURITY CARD**

These items are required for the state exam, and are due at the time of application. Please ensure that the name on your Picture ID (Driver License, school ID, military ID, etc.) matches the name on your Social Security Card. If the names do not match, then you will be required to obtain new documents with matching names. Both documents must be current/not expired.

The Texas Health and Human Services, the Alamo Colleges District, St. Philip's College, and the Nursing Education Department and/or the facilities hosting your clinical experience establish the requirements listed in this packet; therefore, we cannot make exceptions to any of the requirements.

I hereby certify that the information contained in this application is true and complete to the best of my knowledge. I understand that any misrepresentation or falsification of information is cause for denial of admission to the Nurse Aide for Healthcare Program. I understand that the faculty and/or staff of the Nursing Education Department will read the information contained in this application.

Applicant Signature

Date

St. Philip's College
Nursing Education Department
Nurse Aide for Healthcare Program
Physical Examination Form

Name _____
Last
First
Middle

_____ Address City State Zip Code

Gender: M / F Date of Birth: _____ Phone Number: _____

MEDICAL HISTORY

List all medications you are currently taking:

List known drug and/or food allergies: _____

Past History:

Applicant, please check Yes or No. If Yes, give explanation

Have you ever had:	NO	YES	Explanation:
High Blood Pressure			
Diabetes			
Heart Disease			
Respiratory Disease or breathing problems/Asthma			
Abdominal Problems			
Vision or Hearing problems			
Surgery (please describe)			
Injuries (please describe)			
Any Disabilities (please describe)			
Back problems			
Bone or Joint problems; any problems walking, lifting, kneeling			
Have you ever been treated for depression or any other mental disorder(s)?			

Please Include the Physician's Business Card PHYSICAL EXAMINATION

