



**STATE OF WEST VIRGINIA
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
BUREAU FOR PUBLIC HEALTH
OFFICE OF HEALTH FACILITY LICENSURE
AND CERTIFICATION
Long-Term Care Nursing Assistant Program**

Joe Manchin III
Governor

Patsy A. Hardy, FACHE, MSN, MBA
Cabinet Secretary

Submit to: Office of Health Facility Licensure and Certification – Nursing Assistant Program – Fax: 304.558.1442

CLASS ROSTER

Program Name: _____ **Program Approval Number** _____ **Date:** _____
Affiliated Agency/Facility: _____ **Telephone Number:** _____
Address: _____
City: _____ **State:** _____ **Zip:** _____

SOCIAL SECURITY NUMBER DISCLOSURE: Disclosure of your social security number should only be made if obtained from you in accordance with Section 7 of the Privacy Act of 1974. Your disclosure is voluntary for the purpose of internal identification, and may be used to verify information on your application, (class admissions and completions, competency evaluation testing, re-registration and reciprocity applications, etc), to verify certification with another state’s certification authority, for exam identification, for identification purposes in national disciplinary databases or as the basis of a disciplinary action against you.

In accordance to the 42CFR 483.156(c), failure to provide requested information may result in your application being returned, a delay in processing, or your name not being placed on the West Virginia Nursing Assistant Registry.

	Print Complete Name (First, Middle, Last)	Social Security # XXX-XX-XXX	Date of Birth (mm/dd/yyyy)	Telephone # (xxx) xxx-xxxx	Aware of Privacy Disclosure (Student’s Signature)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Program Start Date: _____ **Instructor(s):** _____

Scheduled Completion Date: _____

Submit this form with the class calendar at least one week prior to the beginning of the class. Additions and deletions may be submitted up to the end of the first day of class. Additions after the end of the first day of class are not acceptable.

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Charleston, WV 25301-1713
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