

## **Requirement Explanation**

ackage Name	Category Name	Student Notes	URL	Item Name	Field Name
Adult Learner - Non-CNA Post102020	Photo Identification and Social Security Card	You must submit your current government or school issued photo ID and your social security card. • Acceptable alternative photo identification include: Current Passport, U.S. state issued Driver's License, U.S. VISA, U.S. Permanent Resident card, or U.S. Citizenship and Immigration Services (USCIS) photo identification. • Acceptable alternatives to Social Security Card include: If you do not have a Social Security card, please provide Department of the Treasury Internal Revenue Service Individual Taxpayer Identification Number (ITIN) letter or card, U.S.	http://forms.complio.com /ReviewStandards/32768. pdf	Government or School issued photo ID Social Security Card	Document
		Citizenship and Immigration Services (USCIS) identification card, or Medicare Card with SSN.			
	Age verification	You must be at least 17 years old for this program. Enter your Date of Birth to validate program eligibility		Date of Birth	Date of Birth
	High School Diploma, GED or College Transcript	You must submit your high school diploma, GED or College Transcript here.		High School Diploma, GED or College Transcript	Document
	TSI Reading Test or	You must either upload your TSIA 1.0 reading test with a score of 342 or higher or		TSIA 1.0 Reading Test	Document
	English 1301	<ul> <li>a TSIA 2.0 ELAR with a score of 938 or higher or a STAAR EOC with a score of 2 or higher or your college transcript indicating completion of English composition or English 1301.</li> <li>You must upload one of the following:</li> <li>• TSIA 2.0 ELAR with score of 938 or higher</li> <li>• TSIA 1.0 reading test with score of 342 or higher</li> <li>• STAAR EOC with a score of 2 or higher</li> <li>• College transcript indicating English Composition or English 1301</li> <li>• Diploma for associates degree or higher</li> <li>• TABE Reading Level M 442-575+ or Above</li> <li>• Texas Bridge Certificate Reading</li> </ul>		Transcript with English 1301	Document
				TSIA 2.0 ELAR	Document
				STAAR EOC	Document
				Diploma for associates degree or higher	Document
				TABE Reading Level M 442-575+ or Above	Document
				Texas Bridge Certificate Reading	Document
	CPR	,	http://forms.complio.com /ReviewStandards/32.pdf	Provider preferred)	Document
					Date
					Expiration Date
	Hepatitis B	You must submit A OR B: A) 3 doses of the Hepatitis B Vaccine, or the 2 dose Heplisav series.			Document
					Date
		B) Positive Hepatitis B Titer.		Hepatitis B Dose 3	Document
					Date
		If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select"" Request an Immunization Record"" towards the bottom of the page. https://www.dshs.texas.gov/immunize/immtrac/clients.shtm			Document
					Results
					Date
					Document
					Date
		To see what is required on your documentation, please see http://forms.complio.com/ReviewStandards/3.pdf		Hepatitis B Heplisav Dose 1 of 2	Document



American DataBank					
Adult Learner - Non-CNA Post102020	Hepatitis B	You must submit A OR B:	http://forms.complio.com /ReviewStandards/3.pdf	Hepatitis B Heplisav Dose	Date
		A) 3 doses of the Hepatitis B Vaccine, or the 2 dose Heplisav series.		Hepatitis B Heplisav Dose 2 of 2	Document
		B) Positive Hepatitis B Titer.			Date
	MMR	You must submit A OR B:	http://forms.complio.com	Measles Titer	Document
		A) 2 doses of the MMR Vaccine.	/ReviewStandards/3.pdf		Results
		B) Positive titers for Measles, Mumps, and Rubella.			Date
		If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2		Rubella Titer	Document
					Results
					Date
		website. To access, click the link below and then select"" Request an Immunization Record"" towards the bottom of the page.		MMR Dose 2	Document
					Date
		https://www.dshs.texas.gov/immunize/immtrac/clients.shtm		MMR Dose 1	Document
		To see what is required on your documentation, please see http://forms.complio.com/ReviewStandards/3.pdf			Date
				Mumps Titer	Document
					Results
					Date
	If y rec att to we	You must submit a Tdap from within the last 10 years.	http://forms.complio.com /ReviewStandards/1.pdf		Document
		If you do not have a copy of your immunization records or your immunization			Date
		records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select"" Request an Immunization Record"" towards the bottom of the page.			Expiration Date
		https://www.dshs.texas.gov/immunize/immtrac/clients.shtm			
		To see what is required on your documentation, please see http://forms.complio.com/ReviewStandards/1.pdf			
	Varicella	You must submit A OR B OR C:	/ReviewStandards/3.pdf Varicella Ti Proof of dis	Varicella Dose 2	Document
		A) 2 doses of the Varicella Vaccine.			Date
		B) Positive Varicella Titer.		Varicella Titer Proof of disease Varicella Dose 1	Document
		C) Documentation of having had varicella from your physician.			Results
					Date
		If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select "Request an Immunization Record" towards the better of the page			Document
					Date
					Document
		Record" towards the bottom of the page. https://www.dshs.texas.gov/immunize/immtrac/clients.shtm			Date
		To see what is required on your documentation, please see http://forms.complio.com/ReviewStandards/3.pdf			



Adult Learner - Non-CNA Post102020	Influenza	influenza declination form. Your flu shot must be received no earlier than 8/1 to be accepted for the current	http://odessacompliance.c	Flu Shot	Document
			om/forms/OdessaFluDecli nation.pdf,		Date
			http://forms.complio.com /ReviewStandards/1.pdf		Expiration Date
		This category is not tracked between 5/1 and 9/30.		Flu Declination	Document
		To see what is required on your documentation, please see http://forms.complio.com/ReviewStandards/1.pdf			Date
					Expiration Date
					Complete Form
	Meningitis	If you are 21 or under you must submit one dose of the meningitis vaccination.		Meningitis Dose	Document
		If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select"" Request an Immunization Record"" towards the bottom of the page. This might also be documented on your immunization record as MCV4 or Menactra https://www.dshs.texas.gov/immunize/immtrac/clients.shtm To see what is required on your documentation, please see http://forms.complio.com/ReviewStandards/1.pdf			Date
	Tuberculosis	If you test negative for tuberculin exposure, you must submit a negative PPD skin	http://odessacompliance.c	PPD Step 1	Document
		test, or an IGRA (QuantiFERON OR T-Spot) blood test each year. If you complete annual TB test through your healthcare industry employer,you	om/forms/Odessa2StepPP DExplanation.pdf, http://forms.complio.com /ReviewStandards/464.pdf		Read Date
					Implant Date
					Result
				PPD Step 2 Annual PPD TB Clearance Letter Chest X-Ray	Document
					Read Date
					Implant Date
					Result
					Document
					Expiration Date
					Read Date
					Implant Date
					Result
					Document
					Date
					Expiration Date
					Document
					Date
					Expiration Date



Adult Learner - Non-CNA Post102020	Tuberculosis	test, or an IGRA (QuantiFERON OR T-Spot) blood test each year.	http://odessacompliance.c om/forms/Odessa2StepPP DExplanation.pdf,	Chest X-Ray	Result
				Initial QuantiFERON TB	Document
			http://forms.complio.com /ReviewStandards/464.pdf	Gold Test / T-Spot	Date
			, neviewstandards, 404.pdr		Result
				Annual QuantiFERON TB Gold Test / T-Spot	Document
					Date
					Expiration Date
		screening.			Result
				Letter indicating chest x- ray is needed	Document
				Healthcare Employer TB	Document
				Screening Record	Date
					Expiration Date
	Background Check	You must order a background check from American DataBank. Once your search is complete, it will be automatically uploaded here for you.		American DataBank Background Check	Document
					Date
					Results
	Drug Screening	You must order a drug screen from American DataBank. Once complete, it will be automatically uploaded here for you.		American DataBank Drug Screen	Document
					Date
					Expiration Date
					Results
	CE Health Careers Registration Form	You must electronically complete the CE Health Careers Registration Form.	http://odessacompliance.c om/forms/HealthCareersR egistrationForm2022.pdf, http://odessacompliance.c om/forms/HealthCareersR egistrationForm2022_CPF. pdf	Registration Form	Document
					Date
					Complete Form
	Documents to Review	<ul> <li>You must acknowledge that you have read the below required document information:</li> <li>Welcome Health Careers Students</li> <li>Wrangler Express Center Student Information</li> <li>Student Email Blackboard Login Information</li> <li>HC Student Contract - Classroom Guidelines</li> <li>Student Clinical Agreement Form</li> <li>Odessa-Complio-Student-User-Guide-05142020</li> <li>OC Training Waiver For Over 18 (Please use this form if you are 18 years and older) OR OC Training Waiver For Under 18 (Please use this form if you are 18 years and older) OR OC Training Waiver For Under 18 (Please use this form if you are 18 years and under)</li> <li>Health Careers Immunization Requirements</li> <li>Health and Wellness for Students - Insurance and Healthcare Providers Information</li> <li>Adult Model Release Information</li> <li>Abull;11. T-Shirt and Scrub Set Size:</li> <li>The sizes are unisex and may be larger than expected. To ensure the best fit, sample sizes can be tried on in advance at the Odessa College Continuing Education Building located at 2714 Robertson Ave Odessa, Texas 79764. If you have questions please call 432-335-6580 or email healthcareers@odessa.edu.</li> </ul>	http://odessacompliance.c om/forms/OC_TrainingWa iverOfLiabilityAndHoldHar mlessAgreement.pdf		Document
					Date
					Have you read the Welcome Health Careers Students Information?
					Complete Form
				Wrangler Express Center Student Information	Document
					Date
					Have you read the Wrangler Express Center Student Information?
					Complete Form



Adult Learner - Non-CNA	Documents to Review	You must acknowledge that you have read the below required document	http://odessacompliance.c		Document
Post102020		<ol> <li>Student Email Blackboard Login Information</li> <li>HC Student Contract - Classroom Guidelines</li> <li>Student Clinical Agreement Form</li> <li>Odessa-Complio-Student-User-Guide-05142020</li> <li>OC Training Waiver For Over 18 (Please use this form if you are 18 years and</li> </ol>	om/forms/OC_TrainingWa iverOfLiabilityAndHoldHar mlessAgreement.pdf	Login Information	Date
					Have you read the Student Email Blackboard Login Information?
					Complete Form
		older) OR OC Training Waiver For Under 18 (Please use this form if you are 18 years and under)		HC Student Contract - Classroom Guidelines	Document
	8. Health Careers Immunization Requirements			Date	
		<ul> <li>9. Health and Wellness for Students - Insurance and Healthcare Providers</li> <li>Information</li> <li>10. Adult Model Release Information</li> <li>•11. T-Shirt and Scrub Set Size:</li> <li>The sizes are unisex and may be larger than expected. To ensure the best fit,</li> </ul>			Have you read the Student Contract - Classroom Guidelines Information?
		sample sizes can be tried on in advance at the Odessa College Continuing			Complete Form
		Education Building located at 2714 Robertson Ave Odessa, Texas 79764. If you have questions please call 432-335-6580 or email healthcareers@odessa.edu.		Student Clinical Agreement Form	Document
					Date
					Have you read the Student Clinical Agreement Form?
					Complete Form
				Odessa-Complio-Student- User-Guide-05142020	Document
					Date
					Have you read the Odessa-Complio- Student-User-Guide- 05142020?
					Complete Form
				OC Training Waiver For Over 18	Document
					Date
					Have you read the OC Training Waiver?
					Complete Form
				Health Careers Immunization Requirements Health and Wellness for Students - Insurance and Healthcare Providers Information	Document
					Date
					Have you read the Health Careers Immunization Requirements?
					Complete Form
					Document
					Date



Adult Learner - Non-CNA Post102020	Documents to Review	<ul> <li>You must acknowledge that you have read the below required document information:</li> <li>Welcome Health Careers Students</li> <li>Wrangler Express Center Student Information</li> <li>Student Email Blackboard Login Information</li> <li>HC Student Contract - Classroom Guidelines</li> <li>Student Clinical Agreement Form</li> <li>Odessa-Complio-Student-User-Guide-05142020</li> <li>OC Training Waiver For Over 18 (Please use this form if you are 18 years and older) OR OC Training Waiver For Under 18 (Please use this form if you are 18 years and older) OR OC Training Waiver For Under 18 (Please use this form if you are 18 years and under)</li> <li>Health Careers Immunization Requirements</li> <li>Health and Wellness for Students - Insurance and Healthcare Providers Information</li> <li>Adult Model Release Information</li> <li>•11. T-Shirt and Scrub Set Size:</li> <li>The sizes are unisex and may be larger than expected. To ensure the best fit, sample sizes can be tried on in advance at the Odessa College Continuing</li> <li>Education Building located at 2714 Robertson Ave Odessa, Texas 79764. If you have questions please call 432-335-6580 or email healthcareers@odessa.edu.</li> </ul>	http://odessacompliance.c om/forms/OC_TrainingWa iverOfLiabilityAndHoldHar mlessAgreement.pdf	Students - Insurance and	Have you read the Health and Wellness for Students - Insurance and Healthcare Providers Information? Complete Form Document Date Have you read the Adult Model Release Information? Complete Form Scrub Set Size Document Date Have you read the OC Training Waiver?
	Health Insurance	You may submit your current health insurance here.	http://forms.complio.com /ReviewStandards/4096.p df	Health Insurance	Document
	FERPA Form	You may electronically complete the below FERPA form. This document will allow the College to provide information about the student to only those that are listed by the student, including parents.	http://odessacompliance.c om/forms/FERPAForm.pdf , http://odessacompliance.c om/forms/FERPAFormCPF. pdf		Document
					Date
					Complete Form
	Certificate of Completion	This category is for your administration to complete once all course requirements have been met.		Certificate of Completion	Document
					Date