

Practical Nurse Students:

Do You Have Everything You Need?

| Legal Last Name: | Legal First Name: |
|--------------------|---------------------|
| Legal Middle Name: | Previous Last Name: |
| Date of Birth: | Student ID # |
| Program: □PN | |

Please carefully review the Occupational Health and Safety requirements for your program <u>here</u> and utilize the checklist below to ensure you have everything you need.

Completed

| Alberta Health Services Confidentiality Training | | |
|--|--|--|
| Mask Fit Testing | | |
| Cardiopulmonary Resuscitation Certificate (CPR) – BLS | | |
| Respectful Workplace & Prevention of Harassment & Violence Policy Course | | |
| Clinical Placement Agreement | | |
| HSP Net Consent Form | | |
| Immunization Requirements | | |
| Photo ID Badge/ Access Card Request | | |
| Police Information Check with Vulnerable Sector Clearance | | |
| Waiver Forms | | |
| Police Information Check | | |
| Immunization Waiver & Practicum Disclosure | | |
| Requisite Skills & Abilities | | |
| PN Personal Declaration | | |
| Standard First Aid | | |
| WHMIS | | |

Please submit this completed form and health and safety requirements to checklist@NWPolytech.ca

Protection of Privacy - The personal information that you provide is collected in accordance with Section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act (FOIP Act) and will be used to determine and verify program requirements to secure practicum placements. The information you provide will be disclosed through HSP Net in accordance with your HSP Net consent form for Use and Disclosure of Student Information. Collected personal information is protected from unauthorized access, collection, use, and disclosure in accordance with the FOIP Act and can be reviewed upon request subject to the provisions under the Act. Questions regarding the collection of personal information may be directed to FOIP@NWPolytech.ca