

Minnesota Nursing Assistant Registry Test Registration Form

Register online with a credit card: https://mnscu.rschooldtoday.com/public/costoption/class_id/258893/public/1/tokenlink/4b1c5

Fields marked with an asterisk (*) are required **You must register for and pass both parts of the Nursing Assistant Certification Exam - the Knowledge Test and the Skills Test - in order to be certified and listed on the Minnesota Nursing Assistant Registry.** If you need to retest after a failed test, you must register again and pay the full fee for the part(s) of the test you failed.

*NAME: _____ *SOCIAL SECURITY #: _____

*HOME ADDRESS: _____

*CITY, STATE, ZIP: _____ *STUDENT E-MAIL: _____

*HOME PHONE #: _____ WORK PHONE #: _____ *BIRTHDATE: _____

KNOWLEDGE/SKILS TEST DATE/TIME: _____ COURSE ID#: _____ FEE: \$260/test

SKILLS TEST DATE: _____ COURSE ID#: _____ FEE: \$210/test

KNOWLEDGE TEST DATE/TIME: _____ COURSE ID#: _____ FEE: \$140/test

Student Signature: _____

Audio exam required

*CANDIDATE TYPE:

I have completed a state-approved training program within the last 2 years.

(Provide the information below and verify with your training site that your training program is entered and completed in the testing database TMU.)

Training Program Name, City and State: _____ Completion Date: _____

OR

I am a Test Out/Challenge Candidate

Return this form and payment to:

Shelly Mehus
shelly.mehus@riverland.edu
Riverland Community College 1900 8th Ave NW
Austin MN, 55912

For questions please contact:

Shelly Mehus
Phone: 507-433-0573
Email: Shelly.mehus@riverland.edu

___ CHECK # _____ (Make payable to Riverland Community College) ___ CASH ___ CREDIT CARD

CREDIT CARD NUMBER: _____ EXPIRATION DATE _____ CVV _____

COMPANY BILLING (please be sure to complete all information):

Company Name: _____ PO#: _____

Phone: (____) _____ E-mail: _____

Company Address: _____

Authorized Company Signature: _____

PRINT

SIGNATURE

COMPANY BILLING REGISTRATIONS WILL NOT BE PROCESSED WITHOUT AUTHORIZED SIGNATURE

CONFIDENTIAL INFORMATION: Riverland Community College is asking you to provide information in order to process our registration form. This information will be used to update your academic record with our college. You are not legally required to provide anything more than your name; however, we may not be able to effectively process your registration for this course if you do not provide sufficient information. Access to this data is limited to school officials and faculty who have legitimate educational interests. Under certain circumstances, federal and state laws authorize release of private data without your consent to other schools in which you seek to enroll or are enrolled, to federal, state, or local officials for purposes such as program compliance, audit, evaluation; if information is sought with a court order or subpoena; or as otherwise permitted by other state or federal laws

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MINNESOTA STATE

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a member of the Minnesota State system