



CNA (Certified Nursing Assistant/Certified Nurse Aide)

Application for MCN Nursing Students

Please print legibly.

First Name	_____
Middle Name	_____
Last Name	_____
SSN	_____
Email	_____
Date of Birth	_____
<p>I certify that the above is true and correct, and I give my consent for my name to appear on the Health Care Worker Registry.</p>	
Student Signature	_____
Date	_____

Applications will be processed for students who have completed Adult Nursing 1 (Nur 229) with a grade of C or better. If you are close to completing Adult Nursing 1, your application will be held until the end of the semester, and will be processed when grades post.

Please return this completed form to the MCN Office of Student Services front desk at EDW 112. Because your SSN is on the form, we discourage emailing it directly.

If you meet Illinois's CNA requirements, directions to register for the written competency exam will be e-mailed to you at the above address. When registering, you must enter your information exactly as you provided above. Upon successful completion of the competency exam, you will be placed on the Health Care Worker Registry, which is the state's registry for CNAs. Illinois does not issue any credentials or certificates to CNAs.