



Health Occupations Department

Verified Credentials

Qualified First Student Instructions

Napa Valley Community College

ADN Program

Required Qualifications for Your Program

TIME SENSITIVE

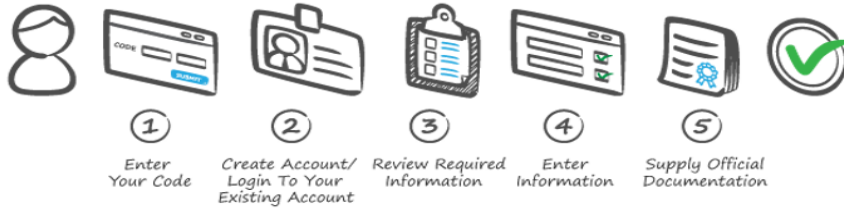
DO NOT DELAY

You will receive a flyer like this at your program orientation. Be sure you are using the code for the program that you are entering! (ADN, LVN, PTEC, RESP etc.)

ATTENTION Students:

We've partnered with Verified Credentials, Inc. to help you supply the required qualifications for your program. To get started, carefully follow the instruction below:

How it Works:



IMPORTANT – Use the CODE below to get started:

Program:	Code:
Background Check, Drug Screen & Additional Requirements - ADN Program	[REDACTED]

From a desktop or laptop computer, go to this website and enter the code into the "First Time Users" box. (Unless you are a returning student.)

GET STARTED NOW at:

<http://scholar.verifiedcredentials.com/napavalley>

BEFORE YOU BEGIN THIS PROCESS: Make sure that you will be available some time in the next 7 days to appear for your drug screen! Failure to appear for drug screen before expiration date may result in having to pay for drug screen again!



Background Information Center

Welcome to **QualifiedFirst®** by Verified Credentials, Inc.
Your school has partnered with Verified Credentials to help you complete your program requirements.

Get Started Here!

First Time Users:
Enter your code and register...
Code:
Get Started!
[Can't Remember Your Code?](#)

Returning Users:
Finish your requirements, check status, etc...
Username:
Password:
Log In
[Forgot Username?](#) [Forgot Password?](#)

About Verified Credentials, Inc.
Trusted since 1984 by thousands of leading organizations nationwide, Verified Credentials is the recognized leader in background screening. Serving hundreds of health care organizations and health science education programs, Verified Credentials delivers background screening service with industry-leading speed and accuracy, combined with unparalleled customer service. Find out more at our website: www.verifiedcredentials.com

What is QualifiedFirst@?
QualifiedFirst® gives you complete control of your qualifications and background information. Use your QualifiedFirst® portfolio to:
• Store all of your qualifications in one place.
• Get a complete view of your background check in advance of opportunities.
• Keep your information up-to-date and accurate.
• Track and manage your professional and educational information.

Fill in all fields to begin creating your account.

If you run into any trouble and need help—Customer Support is available 24 hrs/day.



! • First name is required.



Create a New Account

Registration is easy and only takes three steps. To create a new account, please complete all fields below.

Already Have an Account?

Log In

1

Personal Information

Please start by entering in your name and contact information below.

First Name:

Middle Name: I don't have one

Please enter your first name, up to 64 characters.

Last Name:

Country:

Address Line 1:

City:

State:

Zip Code:

Primary Phone:

E-mail:

Choose a method to receive notifications regarding your account:

Notification Preference: Text Message (Recommended) Email Both [Why do you need this?](#)



NVC recommends using BOTH notification methods!

2

Create Username / Password

Choose a Username and a Password and answers to two security questions which will be used for password recovery.

Username:

Password:

Confirm Password:

1st Secret Question:

Answer:

2nd Secret Question:

Answer:

Be sure to make note of your user name and password! NVC recommends using your email address as your user name.

3

Terms of Use

Please accept the QualifiedFirst® Terms of Use Agreement.

QUALIFIEDFIRST®
By Verified Credentials, Inc.
TERMS OF USE

QualifiedFirst® by Verified Credentials, Inc. ("Verified") allows a user ("You" or "Your"), in an online format, to build a QualifiedFirst® portfolio ("Portfolio") which may include Your background information, a QualifiedFirst® background report(s) about You ("Report") and other personal or professional information about You. **In order to access QualifiedFirst®, You must accept these Terms of Use ("TOU"). Accepting them creates a binding contract between Verified and You.**

Please Note: Some information included in Your Portfolio may be considered a "consumer report" under the U.S. Fair Credit Reporting Act ("FCRA"), entitling You to certain protections under it.



I HAVE READ AND AGREE TO THE FOREGOING TERMS OF USE

NOTICE: Canceling and declining the Terms of Use will result in denial of your access to the QualifiedFirst® Service.

Your privacy and security are of utmost importance to us. We don't pass this information on to third parties. See our [Privacy Policy](#) for complete information.

Cancel

Sign In



Once you complete the creation of a user name and password, they will email you a code so that they can verify your email address. If you do not see the email immediately, check your junk mail folder!

Email Validation

We will email you a one-time code

We need to make sure it's really you. We'll send you a 6-digit code to your email address. Once sent, the code will be valid for 60 minutes.

[Redacted]@student.napavalley.edu

[Change My E-Mail](#) [Send Code](#)

Email Validation

Please enter the 6-digit code sent to:

[Redacted]@student.napavalley.edu

One-time Code

6-digit code

[Change My E-Mail](#) [Re-Send Code](#) [Confirm Code](#)

Once your email is validated, your information should populate automatically.

1

Personal Information

Please start by entering in your name and contact information below.

First Name:

Middle Name: I don't have one

Last Name:

Country:


Address Line 1:

City:

State:

Zip Code:

Primary Phone:

E-mail: 

Choose a method to receive notifications regarding your account:

Notification Preference: Text Message (Recommended) Email Both [Why do you need this?](#)

Standard Text Messaging Rates Apply

Mobile Number:

Mobile Carrier:

Your Portfolio Summary

Your Background Report

Take control of your background information. Start your background report now!

[Get Started!](#)

Your Profile Information

- Identity Information (1)
- Address History (1)
- Employment History
- Education History
- Driver's License
- References
- Professional Licenses
- Professional & Career Training
- Professional Certifications
- Professional Memberships
- Awards & Recognitions
- Immunization Records
- Insurance Information
- Miscellaneous Information

Have a **code?**

[What is this?](#)

 -

[GO >>](#)

[Forgot your code?](#)

Messages and Alerts (0)

[View All](#)

You have no Messages or Alerts for the last 30 days.

Your Requirements (0)

You have no incomplete requirements.

If the process stalls as you are completing your information, it may take you back to a screen like one of these and you may have to re-enter your code.

[Create New Report](#)



Package Selection

Choose a package group that best meets your needs. Don't see what's right for you? No problem, create your own custom package.

Have a **code?**

[What is this?](#)

Enter Your Code:

-

[GO >>](#)

[Forgot your code?](#)



Basic Background Check Packages

Not sure where to start? No problem! Check out our basic packages.

[Get Started!](#)



Build Your Own Package

Looking for a specific background check? Don't see what fits your needs? No problem! Choose a specific background check you want here.

[Get Started!](#)

Please read all directions and gather your documents before you begin *and* before you contact customer support!!!

Napa Valley Community College District - ADN Program

Background Check, Drug Screen & Additional Requirements - ADN Program

Due Date: 2/28/2018

1 2 3 4 5 6 7 8 9

Introduction 0 of 1 Tasks Complete

Forms & Notices 0 of 3 Tasks Complete

Student Information 0 of 1 Tasks Complete

Personal Info 0 of 7 Tasks Complete

Welcome to QualifiedFirst!

Welcome! Your organization has partnered with QualifiedFirst® by Verified Credentials, Inc to help you complete the requirements outlined below. **Don't worry; we'll walk you through the process step-by-step**, with guidance designed especially for people new to the process. QualifiedFirst® works a lot like a navigation system, showing you what to do every step of the way and providing you clear, easy-to-follow instructions.

Take a moment to review the requirements below. When you're finished, click "Let's Get Started" below.



Background Report

Your background report will contain the following background checks and verifications:

- Criminal Search - County [What is this?](#)
- Drug Screen - 10 Panel Urine (L10) [What is this?](#)
- FACIS - Level 3 Individual [What is this?](#)
- National Criminal Database [What is this?](#)
- National Sex Offender Public Registry [What is this?](#)



Immunizations

You will need to provide details and possibly supporting documentation that you received the following immunizations:

- Hepatitis B [What is this?](#)
- Influenza [What is this?](#)
- MMR (Measles-Mumps-Rubella) [What is this?](#)
- Tdap [What is this?](#)
- Tuberculosis [What is this?](#)
- Varicella (Chickenpox) [What is this?](#)



Miscellaneous Information

You will need to provide details and possibly supporting documentation of the following miscellaneous Information:

- Medical History [What is this?](#)
- Physical Form [What is this?](#)



Professional Certifications

You will need to provide details and possibly supporting documentation of the following professional certifications:

- CPR [What is this?](#)



Training

You will need to provide details and possibly supporting documentation of the following professional training:

- Occupational Safety and Health Administration (OSHA) [What is this?](#)

[<Back](#) [Save & Finish Later](#)

Let's Get Started



Introduction **Forms & Notices** Student Information Personal Info

Current Price: \$132.20

- Background Check Disclosure
- Rights under the FCRA
- Background Check Autho...

Background Check Disclosure

DISCLOSURE REGARDING BACKGROUND REPORTS

With your authorization, Napa Valley Community College District (the "Organization") will obtain a background report about you for purposes of your participation in an educational program with it, which may include participation in a clinical or other similar program(s). The authorization you give will allow the Organization to obtain this report, as well as additional reports, before and during your attendance there. These reports may include information about your character, general reputation, personal characteristics and/or mode of living, whichever may be applicable. Contained in these reports may be criminal record information about you, information about your prior employment, education, licenses and certifications or other background information about you.

How do I sign — it's easy!

- Use your mouse like a pen. Click and hold the left mouse button down and draw your signature.
- Use your laptop track pad. Hold down the left button on the laptop track pad and use another finger to draw your signature on the track pad.

Try it as many times as you like! Click **Next** when you are satisfied!



Erase Signature & Sign Again

<Back Save & Finish Later

Next Step

Introduction **Forms & Notices** Student Information Personal Info

Current Price: \$132.20

- Background Check Discl... DONE
- Rights under the FCRA
- Background Check Autho...

A Summary of Your Rights Under the FCRA

Please carefully review the following important information and then check the box acknowledging you have received this information.

Para información en español, visite www.consumerfinance.gov/learnmore o escriba a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

- You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure").



I acknowledge that I have received and reviewed the information above.

<Back Save & Finish Later

Next Step

Napa Valley Community College District - ADN Program Due Date: 2/28/2018
 Background Check, Drug Screen & Additional Requirements - ADN Program

1 2 3 4 5 6 7 8 9

Introduction DONE Tasks Complete ✔ **Forms & Notices** 2 of 3 Tasks Complete ↓ Student Information 0 of 1 Tasks Complete ! Personal Info 0 of 7 Tasks Complete !

Current Price: \$132.20 ?

Steps:

- Background Check Discl... DONE ✔
- Rights under the FCRA DONE ✔
- Background Check Authoriz...**

Background Check Authorization

AUTHORIZATION TO OBTAIN BACKGROUND REPORTS

I certify that I have received, read and understand the separate documents entitled Disclosure Regarding Background Reports, Disclosure Regarding Investigative Background Reports (if applicable) and A Summary of Your Rights Under the Fair Credit Reporting Act. I authorize **Napa Valley Community College District** (the "Organization") to obtain background reports regarding me. To this end, I authorize any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, insurance company and any other person or entity to furnish any background information about me. I agree that a facsimile, electronic or photographic copy of this authorization shall be as valid as its original.

How do I sign — it's easy!

- Use your mouse like a pen. Click and hold the left mouse button down and draw your signature.
- Use your laptop track pad. Hold down the left button on the laptop track pad and use another finger to draw your signature on the track pad.

Try it as many times as you like! Click **Next** when you are satisfied!

Use Previous Signature

Erase Signature & Sign Again

<Back [Save & Finish Later](#) Next Step

Napa Valley Community College District - ADN Program Due Date: 2/28/2018
 Background Check, Drug Screen & Additional Requirements - ADN Program

1 2 3 4 5 6 7 8 9

Introduction DONE Tasks Complete ✔ **Forms & Notices** DONE Tasks Complete ✔ **Student Information** 0 of 1 Tasks Complete ↓ Personal Info 0 of 7 Tasks Complete !

Current Price: \$132.20 ?

Steps:

- Identity Information**
Provide Your Student Information

Provide Your Student Identification Information

As an added benefit to your school, we will automatically update your school's Student Information Management System! To do this properly, we need additional information that will help us tie our two systems together.

Student Identification Number: ★

Your student identification number can be found on your Student ID card.

★ - Required fields

<Back [Save & Finish Later](#) Done

Use your Napa Valley College Student ID #. Then click "Done"

Napa Valley Community College District - ADN Program

Background Check, Drug Screen & Additional Requirements - ADN Program

Due Date: 2/28/2018

1 2 3 4 5 6 7 8 9

Introduction **DONE** Tasks Complete ✓ Forms & Notices **DONE** Tasks Complete ✓ Student Information **DONE** Tasks Complete ✓ **Personal Info** 0 of 7 Tasks Complete ↓

Current Price:

\$132.20 ?

Steps:

- Introduction
Introduction
- Identity Information
Names, Social Security No...
- Address History
Your Addresses
- Review Order
Review Before Payment
- Payment
Credit Card or PayPal
- Payment Summary

Let's Get Started With Your Background Report

In this section, you will be asked for information that is required by Verified Credentials in order to successfully process your background report. We will walk you through this process step by step. You will be asked to provide at least the following information:

- Identification information such as social security number and date of birth
- Names - not only your current name but any other name that you may have used in the past
- Addresses - again, not only your current address, but any address that you may have lived at in the last 10 years will be necessary.

In addition, depending upon the products that are part of your background report, you may be asked for additional information but, don't worry, we'll walk you through the process.

If you are ready, click "Next Step" and we'll get started!

[<Back](#) [Save & Finish Later](#)

Next Step

Napa Valley Community College District - ADN Program

Background Check, Drug Screen & Additional Requirements - ADN Program

Due Date: 2/28/2018

1 2 3 4 5 6 7 8 9

Introduction **DONE** Tasks Complete ✓ Forms & Notices **DONE** Tasks Complete ✓ Student Information **DONE** Tasks Complete ✓ **Personal Info** 1 of 7 Tasks Complete ↓

Current Price:

\$132.20 ?

Steps:

- Introduction
DONE ✓
- Identity Information
Names, Social Security No...
- Address History
Your Addresses
- Review Order
Review Before Payment
- Payment
Credit Card or PayPal
- Payment Summary

Enter Your Social Security Number, Date of Birth, and Driver's License Number

Identity information is required to create a trustworthy and reliable background report. After you've finished entering your identity info, click Done to proceed.

Social Security Number: I don't have one ★

Date of Birth: Month Day Year ★

Driver's License: I don't have one ★

Driver's License State: Please Select ▼ ★

Gender: Please Select ▼ ★



How do I know it's safe to give you this information?

Rest assured, your information is safe with Verified Credentials. We employ rigid information handling and technology practices with your security in mind.

- All data is secured by 128-bit encryption.
- All information is stored in our secure onsite data center and is protected by the latest network security hardware and software.
- Our privacy protection standards are certified by TRUSTe, the leading internet privacy services provider.

[More about our security safeguards](#)

Napa Valley Community College District - ADN Program

Due Date: 2/28/2018

Background Check, Drug Screen & Additional Requirements - ADN Program

1 2 3 4 5 6 7 8 9

Introduction **DONE** Tasks Complete ✓ Forms & Notices **DONE** Tasks Complete ✓ Student Information **DONE** Tasks Complete ✓ **Personal Info** 2 of 9 Tasks Complete ↓

Current Price:
\$132.20 ?

Let's Review Your Names

Do you have any additional names that are not already included in the list below? If so, click **Add Another Name** to add them to the list. If not, select **Done** to proceed.

Steps:

- Introduction **DONE** ✓
- Identity Information** Names, Social Security No... ✓
- Address History Your Addresses !
- Review Order Review Before Payment !
- Payment Credit Card or PayPal !
- Payment Summary !

My Names	
Name:	Source:
[Redacted] (Current Name)	Self Provided Edit

Add any additional names that are not already included in the list above. When you're finished, click **Done** to proceed.

- Examples:**
- A maiden name
 - A different last name from a new or previous marriage
 - A hyphenated last name (e.g. Anderson-Miller)

[Add Another Name](#) [Why do you need this information?](#)

<Back [Save & Finish Later](#)

[Done](#)

Current Price:
\$132.20 ?

Let's Review Your Addresses

In the last 10 years, have you ever lived at any other address that is not in already included in the list below? If so, click **Add Another Address** to add it to the list. If not, select **Done** to proceed.

Steps:

- Introduction **DONE** ✓
- Identity Information **DONE** ✓
- Address History** Your Addresses ✓
- Review Order Review Before Payment !
- Payment Credit Card or PayPal !
- Payment Summary !

My Addresses	
Address:	Source
[Redacted] (Current Address)	Self Provided Edit

Add any previous addresses that you have lived at in the last 10 years that are not already included in the list above. When you're finished, click **Done** to proceed.

- Examples:**
- Residences (houses, apartments, condos, etc.)
 - College Housing (dorms, apartments, houses)

[Add New Address](#)

<Back [Save & Finish Later](#)

[Done](#)

Napa Valley Community College District - ADN Program

Due Date: 2/28/2018

Background Check, Drug Screen & Additional Requirements - ADN Program

1 2 3 4 5 6 7 8 9

Introduction **DONE** Tasks Complete ✓ Forms & Notices **DONE** Tasks Complete ✓ Student Information **DONE** Tasks Complete ✓ Personal Info **4 of 9 Tasks Complete** ↓

Current Price:
\$132.20 ?

Review Your Background Check Order

The background checks listed below have been added to your order based on the information you provided and the requirements defined by Napa Valley Community College District. All of the background checks contained in this order are required by Napa Valley Community College District and cannot be edited or removed.

Steps:

- Introduction **DONE** ✓
- Identity Information **DONE** ✓
- Address History **DONE** ✓
- Review Order** Review Before Payment
- Payment Credit Card or PayPal !
- Payment Summary !

Background Check Options For: (Current Name)	
<input checked="" type="checkbox"/>	Criminal Search - County - (CA - NAPA) Included In Order
<input checked="" type="checkbox"/>	Criminal Search - County - (CA - SOLANO) Included In Order
<input checked="" type="checkbox"/>	Drug Screen - (Drug Screen - 10 Panel Urine (L10)) Included In Order
<input checked="" type="checkbox"/>	FACIS Level 3 Included In Order
<input checked="" type="checkbox"/>	National Criminal Database Included In Order
<input checked="" type="checkbox"/>	National Sex Offender Public Registry Included In Order

After reviewing this information, click **Next Step** to proceed.

<Back Save & Finish Later

Next Step

Napa Valley Community College District - ADN Program

Due Date: 2/28/2018

Background Check, Drug Screen & Additional Requirements - ADN Program

1 2 3 4 5 6 7 8 9

Introduction **DONE** Tasks Complete ✓ Forms & Notices **DONE** Tasks Complete ✓ Student Information **DONE** Tasks Complete ✓ Personal Info **5 of 7 Tasks Complete** ↓

Current Price:
\$132.20 ?

Provide Your Payment Information

Next, choose a payment method below and provide your payment information. We will begin processing your background report upon successful payment.



Steps:

- Introduction **DONE** ✓
- Identity Information **DONE** ✓
- Address History **DONE** ✓
- Review Order **DONE** ✓
- Payment** Credit Card or PayPal
- Payment Summary !

Final Order Total: \$132.20.

1 Choose Payment Method

Credit Card **OR** Pay with PayPal



<Back

Submit Payment



Napa Valley Community College District - ADN Program

Due Date: 2/28/2018

Background Check, Drug Screen & Additional Requirements - ADN Program

1 2 3 4 5 6 7 8 9

Navigation bar with four tabs: **Review Results** (0 of 2 Tasks Complete), Immunizations (0 of 7 Tasks Complete), Miscellaneous Information (0 of 2 Tasks Complete), and Professional Certifications (0 of 2 Tasks Complete). The 'Review Results' tab is highlighted with a blue border and a downward arrow.

Steps:

Review Background Report

Review Drug Screen Res...

Your Background Report is In Progress

IMPORTANT – When your report is complete, you will need to return here to review your report before you send it to your school.

We will notify you when your report is done.

[<Back](#) [Save & Finish Later](#)

Next Step

Once you receive notification that your Background Report and Drug Screen Report are completed, you must review each one and then consent to share with Napa Valley College. If you do not do this process, you will NOT be cleared!

Napa Valley Community College District - ADN Program

Due Date: 2/28/2018

Background Check, Drug Screen & Additional Requirements - ADN Program

1 2 3 4 5 6 7 8 9

Navigation bar with four tabs: **Review Results** (1 of 2 Tasks Complete), Immunizations (0 of 7 Tasks Complete), Miscellaneous Information (0 of 2 Tasks Complete), and Professional Certifications (0 of 2 Tasks Complete). The 'Review Results' tab is highlighted with a blue border and a downward arrow.

Steps:

Review Background Report

DONE

Review Drug Screen Results

Your Drug Screen Report is In Progress

IMPORTANT – When your report is complete, you will need to return here to review your report before you send it to your school.

We will notify you when your report is done.

[<Back](#) [Save & Finish Later](#)

Next Step

Napa Valley Community College District - ADN Program

Background Check, Drug Screen & Additional Requirements - ADN Program

Due Date: 2/28/2018

1 2 3 4 5 6 7 8 9

Review Results **DONE** Tasks Complete  Immunizations **0 of 7 Tasks Complete**  Miscellaneous Information 0 of 2 Tasks Complete  Professional Certifications 0 of 2 Tasks Complete 

Steps:

Introduction


Introduction


Hepatitis B 

Influenza 

MMR (Measles-Mumps-R... 

Tdap 

Tuberculosis 

Varicella (Chickenpox) 

Now Let's Work On Your Immunization Records

In this section, you will need to provide your immunization records. You will need to supply the dates and possibly official supporting documentation for each immunization record. If you're not sure how to find your immunization records, **don't worry**, we'll give you a few pointers below to help get you started.

Take a moment to review the following information. When you're ready to enter your information, click **Next Step** below.

Where can I find my immunization records?

- Review your medical and personal records at home. Check your baby books and scrapbooks.
- Ask your parents if they have a copy of your immunization records from childhood.
- Contact your current doctor's office and ask if they have your immunization records. They may have some or all of your records on file.
- Contact the family doctor you had as a child.
- Check with the school you last attended - they may have your records, which were required at registration.
- Call the state health department and ask if they have a copy of your records. You can also check military records. For your reference, here is a list of [State and Local Immunization Systems](#).
- If you are unable to get your complete immunization records after checking all these sources, you can get re-vaccinated or take blood tests to prove your immunity to certain diseases. Check with the organization requesting this information to make sure this is an acceptable option. If so, contact your doctor for details on how to proceed in taking the blood tests or getting re-vaccinated.

When you're ready to enter your information, click "Next Step" to proceed.

[<Back](#) [Save & Finish Later](#)

Next Step 

Remember that at any time during the process, you can click the "Save and Finish Later" link. At that point, you will need to sign in as a "Returning User".

- Introduction DONE ✓
- Hepatitis B**
- Influenza
- MMR (Measles-Mumps-R...)
- Tdap
- Tuberculosis
- Varicella (Chickenpox)

Napa Valley College requires students to provide documentation of a positive titer for Hepatitis B.

Students who are unable to show a positive titer after receiving the vaccination series twice, please select the Non-Responder option and submit documentation of your non-responder status from your healthcare provider.

Which of the following applies to you (pick one):

- I have received the titer (blood test)
- I can provide documentation showing evidence that I'm a Non Responder
- Skip this for now - I will provide this later

STEP 1 - PROVIDE INFORMATION

Enter your Hepatitis B titer information. Non-positive titer results may require additional information and/or steps.

Titer (Blood Test) - Date: Result...

Mar 2017

Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

STEP 2 - PROVIDE DOCUMENTATION

Provide documentation that validates it later. on now, you can come back and add

IMPORTANT - the document you p

Document Requirements

- Document MUST Be Legible
- Document MUST Relate to Requirement
- Document MUST match the data entered for this requirement.
- Document MUST include student's name.
- Document MUST include medical source name.
- If titer option used, document MUST include a positive titer result.

[Provide Documentation](#)

The date you enter should be noted on your document as "Resulted Date" or "Received Date". If you enter a date that does not match your document, it will cause your document to be "Not Approved" once they review it.

STEP 3 - CONSENT TO SHARE



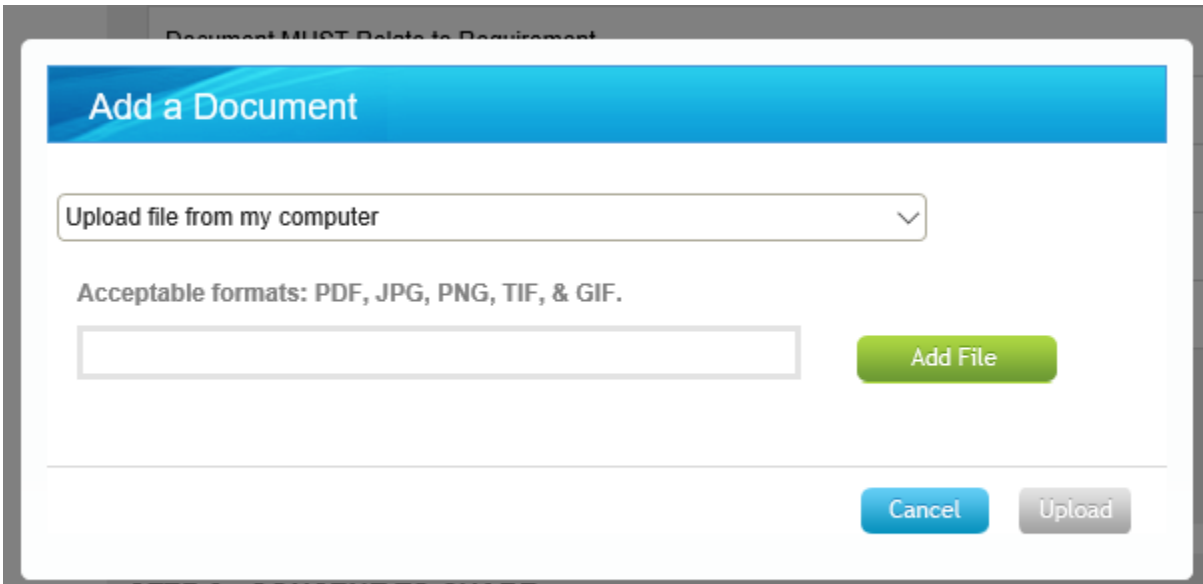
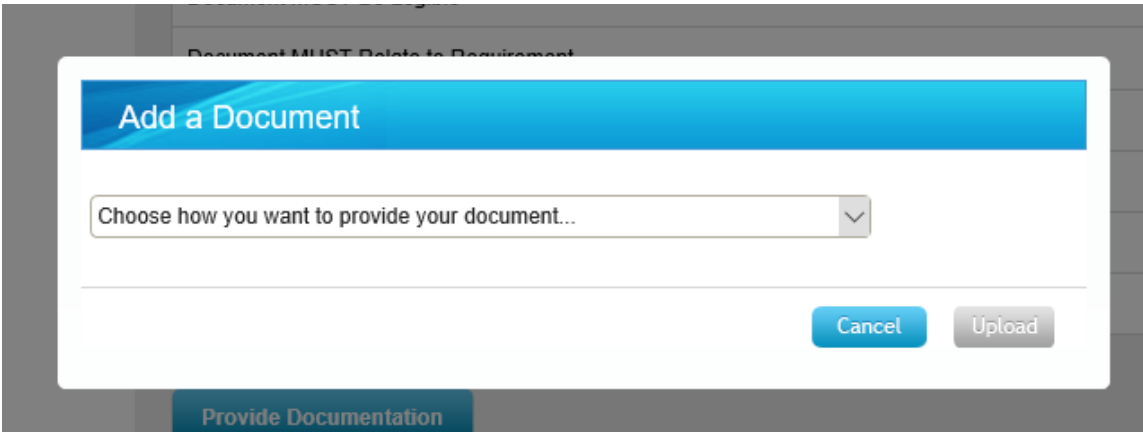
- I have carefully reviewed the information and documentation I have entered and/or uploaded and I certify that it is accurate and meets the requirements listed above. Furthermore, I understand and agree that I am providing this information at my own discretion and agree to send it to Napa Valley Community College District for its review and approval.

[<Back](#) [Save & Finish Later](#)

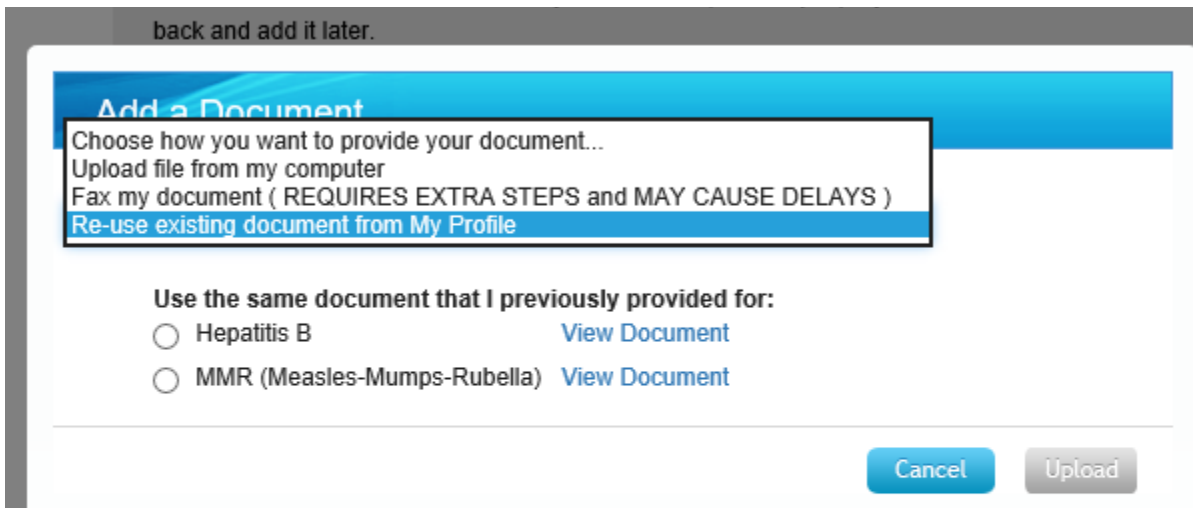
[Next Step](#)



For each requirement, you need to have one separate e-file—preferably scanned as a PDF document. Do not scan your whole packet and upload the whole thing for every requirement!



Once you find your document and "Add File", you need to click the "Upload" button once the file has been added.



Navigation bar with four sections: Review Results (DONE Tasks Complete), Immunizations (2 of 7 Tasks Complete), Miscellaneous Information (0 of 2 Tasks Complete), and Professional Certifications (0 of 2 Tasks Complete). The Immunizations section is highlighted with a blue border and a downward arrow.

Steps:	
Introduction DONE	✓
Hepatitis B DONE	✓
Influenza	
MMR (Measles-Mumps-R...)	!
Tdap	!
Tuberculosis	!
Varicella (Chickenpox)	!

Now Provide Information About Your Immunity to Influenza

Napa Valley College requires students who wish to decline the flu shot, select the waiver option and provide the completed Napa Valley College Influenza Vaccination Waiver Form.

Click [here](#) for the waiver form.

Which of the following applies to you (pick one):

- I have received the vaccination for the current flu season
- I will provide a waiver or declination form
- Skip this for now - I will provide this later



Not a problem! Just remember, until you provide this information, this requirement is incomplete.

[<Back](#) [Save & Finish Later](#)

[Next Step](#)

If you don't have a document ready yet, click the "Skip this for now" button. Then click "Next Step"



Napa Valley Community College District - ADN Program

Due Date: 2/28/2018

Background Check, Drug Screen & Additional Requirements - ADN Program

1 2 3 4 5 6 7 8 9

Navigation bar with four tabs: Review Results (DONE Tasks Complete), Immunizations (2 of 7 Tasks Complete), Miscellaneous Information (0 of 2 Tasks Complete), and Professional Certifications (0 of 2 Tasks Complete).

Steps:	
Introduction DONE	✓
Hepatitis B DONE	✓
Influenza Incomplete!	!
MMR (Measles-Mumps-Rubella)	!
Tdap	!
Tuberculosis	!
Varicella (Chickenpox)	!

Now Provide Information About Your Immunity to MMR (Measles-Mumps-Rubella)

Napa Valley College requires students to provide documentation of a positive titer for Measles, Mumps and Rubella.

Students who are unable to show a positive titer after receiving the vaccination series twice, please select the Non-Responder option and submit documentation of your non-responder status from your healthcare provider.

Which of the following applies to you (pick one):

- I have received the titer (blood test)
- I can provide documentation showing evidence that I'm a Non Responder
- Skip this for now - I will provide this later

NEVER use the "Non-Responder" option unless you have a document from your physician stating as such. This must be approved by NVC Health Occupations Office personnel before you upload if this is the case!

[<Back](#) [Save & Finish Later](#)

[Next Step](#)

Which of the following applies to you (pick one):

- I have received the titer (blood test)
- I can provide documentation showing evidence that I'm a Non Responder
- Skip this for now - I will provide this later

STEP 1 - PROVIDE INFORMATION

Enter your MMR (Measles-Mumps-Rubella) titer information. Non-positive titer results may require additional information and/or steps.

Measles Titer:	<input type="text" value="12/31/1900"/>	<input style="border: none; background-color: #f0f0f0; padding: 2px 5px;" type="text" value="Result..."/>
Mumps Titer:	<input type="text" value="12/31/1900"/>	<input style="border: none; background-color: #f0f0f0; padding: 2px 5px;" type="text" value="Result..."/>
Rubella Titer:	<input type="text" value="12/31/1900"/>	<input style="border: none; background-color: #f0f0f0; padding: 2px 5px;" type="text" value="Result..."/>



Enter the date and results of your titers. Look for "date resulted" on your document.

STEP 2 - PROVIDE DOCUMENTATION

Provide documentation that validates your MMR (Measles-Mumps-Rubella) If you don't have this documentation now, you can come back and add it later.

IMPORTANT - the document you provide MUST meet the following requirements:

Document Requirements
Document MUST Be Legible
Document MUST Relate to Requirement
Document MUST match the data entered for this requirement.
Document MUST include student's name.
Document MUST include medical source name.
If titer option used, document MUST include positive titer result for all three (3) diseases.

[Provide Documentation](#)



STEP 3 - CONSENT TO SHARE

Add a Document

Choose how you want to provide your document..

- Upload file from my computer
- Fax my document (REQUIRES EXTRA STEPS and MAY CAUSE DELAYS)
- [Re-use existing document from My Profile](#)

Use the same document that I previously provided for:

- Hepatitis B [View Document](#)
- MMR (Measles-Mumps-Rubella) [View Document](#)

[Cancel](#) [Upload](#)

Napa Valley Community College District - ADN Program

Due Date: 2/28/2018

Background Check, Drug Screen & Additional Requirements - ADN Program

1 2 3 4 5 6 7 8 9

Review Results **DONE** Tasks Complete ✓

Immunizations 3 of 7 Tasks Complete ↓

Miscellaneous Information 0 of 2 Tasks Complete !

Professional Certifications 0 of 2 Tasks Complete !

- Steps:**
- Introduction **DONE** ✓
 - Hepatitis B **DONE** ✓
 - Influenza **Incomplete!** !
 - MMR (Measles-Mumps-R... **DONE** ✓
 - Tdap **Incomplete!** !
 - Tuberculosis**
 - Varicella (Chickenpox) !

Now Provide Information About Tuberculosis

Napa Valley College requires annual Tuberculosis screening.

Students who have positive test results will need to submit documentation of a negative Chest X-Ray and the completed [Annual Symptom Review form](#) from your healthcare provider.

Students with positive Chest X-Ray results, please visit your healthcare provider to complete treatment and notify your Program Director immediately.

Which of the following applies to you (pick one):

- I have received the titer (blood test) ← **Example: Quantiferon Gold test (negative)**
- I have had the Tuberculosis (Mantoux, PPD) skin test and have the results ← **Negative Skin test**
- I have had a chest X-ray and can provide an absence of symptoms reading ← **Negative Chest X-ray report AND Annual Symptom Review form (get form from NVC HEOC office).**
- Skip this for now - I will provide this later

<Back [Save & Finish Later](#)

Next Step

Navigation bar with four items: Review Results (DONE Tasks Complete, green checkmark), Immunizations (4 of 7 Tasks Complete, yellow warning icon), Miscellaneous Information (0 of 2 Tasks Complete, blue arrow icon), and Professional Certifications (0 of 2 Tasks Complete, yellow warning icon).

- Steps:
- Medical History
 - Physical Form

Miscellaneous - Medical History

Napa Valley College requires students to complete the Napa Valley Health History form and submit as their supporting documentation.

Click [here](#) for the health history form.

Which of the following applies to you (pick one):

- I have the information for my Medical History and will provide it now.
- Skip this for now - I will provide this later

[<Back](#) [Save & Finish Later](#)

Next Step

“Medical History” is page 2 of your physical form.
“Physical Form” is only page 1 of your physical form.
Be sure the date you enter is the date that is indicated on each form!

Review Results **DONE** Tasks Complete Immunizations 4 of 7 Tasks Complete Miscellaneous Information 0 of 2 Tasks Complete Professional Certifications 1 of 2 Tasks Complete

Steps:

- Introduction **DONE**
- CPR

Professional Certifications - CPR

Which of the following applies to you (pick one):

- I have the information for my CPR and will provide it now.
- Skip this for now - I will provide this later

<Back Save & Finish Later

Next Step

When uploading CPR card copy, it must be the FRONT and BACK of the card. Be sure your card is signed before upload. If you have the online AHA e-card, it must be the complete certificate, not the tiny wallet card.

Steps:

- Introduction **DONE**
- CPR

Professional Certifications - CPR

Which of the following applies to you (pick one):

- I have the information for my CPR and will provide it now.
- Skip this for now - I will provide this later

STEP 1 - PROVIDE INFORMATION

Date Completed:

Date Expires:

Organization:



"Date Expires" will always be the last day of the month.

STEP 2 - PROVIDE DOCUMENTATION

Provide documentation that validates your CPR. If you don't have this documentation now, you can come back and add it later.

IMPORTANT - the document you provide MUST meet the following requirements:

Document Requirements
Document MUST Be Legible
Document MUST Relate to Requirement
Document MUST not be expired.
Document MUST include student's name.
Document MUST match the data entered for this requirement.
Document MUST be the American Heart Association BLS for Healthcare Providers.

Provide Documentation

Napa Valley Community College District - ADN Program

Background Check, Drug Screen & Additional Requirements - ADN Program

Due Date: 2/28/2018

1 2 3 4 5 6 7 8 9

Immunizations
4 of 7 Tasks Complete

Miscellaneous Information
0 of 2 Tasks Complete

Professional Certifications
1 of 2 Tasks Complete

Training
0 of 2 Tasks Complete

Steps:

Introduction
Introduction

Occupational Safety and...

Now Let's Work on Your Professional Training

In this section, you will be asked about when you have received various Training courses that are required by your organization. You will be asked for dates received and, in some cases, when they expire.

Optionally, you may be asked to provide documentation supporting this information. You'll be prompted to provide this if its required.

If you don't have this information yet, don't worry - you can come back later and enter it and move on to other requirements by clicking on the navigation bar above.

If you have this information ready, click "Next Step" and we'll get started.

[<Back](#) [Save & Finish Later](#)

Next Step

The OSHA Requirement is the Respirator Fit Test form. Your program may or may not require this item.

Napa Valley Community College District - ADN Program

Background Check, Drug Screen & Additional Requirements - ADN Program

Due Date: 2/28/2018

1 2 3 4 5 6 7 8 9

Immunizations
4 of 7 Tasks Complete

Miscellaneous Information
0 of 2 Tasks Complete

Professional Certifications
1 of 2 Tasks Complete

Training
1 of 2 Tasks Complete

Steps:

Introduction
DONE

Occupational Safety and Hea...

Training - Occupational Safety and Health Administration (OSHA)

Napa Valley College requires student to submit the completed 4-page OSHA Respirator Medical Evaluation Questionnaire and the Napa Valley College Respirator Fit Test Record as their supporting documentation.

Click [here](#) for the respirator forms.

Which of the following applies to you (pick one):

- I have the information for my Occupational Safety and Health Administration (OSHA) and will provide it now.
- Skip this for now - I will provide this later

Not a problem! Just remember, until you provide this information, this requirement is incomplete.

[<Back](#) [Save & Finish Later](#)

Finished



Your Portfolio Summary



Your Background Report

Update In Progress

Submitted - 10/26/2017 [View Status](#)



Your Profile Information

Identity Information (1)

Address History (4)

Employment History

Education History

Driver's License (1)

References

Professional Licenses

Professional & Career Training (1)

Professional Certifications

Professional Memberships

Awards & Recognitions

Immunization Records (6)

Insurance Information

Miscellaneous Information (2)

Have a **code?**

[What is this?](#)

GO >>

[Forgot your code?](#)

Messages and Alerts (1) [View All](#)



Drug Screen - Instructions on next steps will be emailed within two business days.

10/26/2017



Your Requirements (1)



Napa Valley Community College District - ADN Program

— Background Check, Drug Screen & Additional Requirements - ADN

Program

— Spring 2018

9 Incomplete Requirements

Due Date: 2/28/2018

[Work on this now](#)

Due Date may or may not be the date given to you by your Program Coordinator. Always go by Program Coordinator date.

Sample confirmation email - be sure to add Qualified First email address to your "Safe Senders" so that their emails do not go to your junk mail folder or get blocked in any way.

From: Verified Credentials <qualifiedfirst@verifiedcredentials.com>

Sent: Thursday, October 26, 2017 8:56 AM

To: [REDACTED]

Subject: QualifiedFirst Drug Screen Information

Hi [REDACTED]

Your QualifiedFirst® order contained a Drug Screen product. Within two business days after submitting your order, you will receive an email with your drug screen registration number and drug testing locations. Please do not proceed with the drug test until you have received your registration number.

QUESTIONS About Your Order:

Need Help? No problem! Contact us using the following options:

Call Us:

800-938-6090 Toll-Free

Email Us:

clientservices@verifiedcredentials.com

Our Business Hours:

M - F, 8am - 5pm Central Time, excluding major Holidays.

Best Regards,


The QualifiedFirst® Support Team

From: clientservices@verifiedcredentials.com <clientservices@verifiedcredentials.com>
Sent: Thursday, October 26, 2017 9:01 AM
To: [REDACTED]
Subject: Collection Locations for Drug Screening (Sent on Behalf of VCI QualifiedFirst)

Pay attention to the date you are provided in your letter! You have 7 days from the time you pay for your order to appear for your drug screen. If you miss it, you will have to pay for the drug screen again!



Dear [REDACTED]

This email contains important information about your drug screening through Verified Credentials Inc. When you appear for your test, you will need a driver's license or other government-issued photo identification card and a printout of this email. You must appear at the drug test facility before November 1, 2017. 

We recommend that you contact the location to confirm collection hours prior to arrival.

If you have any questions regarding this message, please contact Verified Credentials' Client Services team at ClientServices@verifiedcredentials.com or call 1-800-938-6090.

Donor Registration / Authorization Number: [REDACTED]

Account: 199958 Verified Credentials, Inc 20890 Kenbridge Ct Lakeville, MN 55044 Phone: 952-985-7200	Medical Review Officer (For Reference Only) Dr. Neil Dash 546 Franklin Ave Massapequa, NY 11758 Phone: 800-526-9341 Fax: 516-809-4111
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Subject Information:
Subject Name: [REDACTED]
Test Type: Drug Screen - 10 Panel Urine (L10)

Identified Testing Site:

LABCORP (Distance: 17 mi)
3448 VILLA LANE
SUITE 103
NAPA CA 94558

Phone: 707-257-1975

If you wish to search for additional collection locations, you may do so by [clicking here](#).

If you have any questions about the Qualified First process, be sure to contact their Customer Support first! Your fellow students may also be able to help you if you are stuck on a particular item.

For questions about actual requirements, contact the Napa Valley College Health Occupations office.