Welcome to the University of San Francisco School of Nursing and Health Professions! This worksheet is designed to help you submit the documentation for specific health requirements that our clinical sites require. Thank you for submitting this documentation for your program.

**Student Account Set-up**
- Set up student account with Certified Background

**Background Check & Drug Test Order**
- Submit for your Background Check via Certified Background
- Submit for your Drug Test via Certified Background

**Program Requirements**
- Student Handbook Acknowledgement Form
- SONHP Social Media Policy Acknowledgement Form

**Complete one of the following two options:**

1. **Self-Reporting Health Requirements Form (Employed Students only)**
   - This form acknowledges that all health requirements (listed below and on this form) must be submitted via Certified Background if requested by the School of Nursing & Health Professions.

   **OR**

2. **Program Health Requirements**
   - Physical & Mental Review verification on the USF Mental & Physical Review Form or on agency letterhead/form
   - Tdap Booster on agency letterhead/form
   - **Titors Information** on agency letterhead/form
     - Measles
     - Mumps
     - Rubella
     - Varicella
     - Hepatitis B
   - Tuberculosis Test (2-step or 2 annual results) on USF TB Annual Update Form or on agency letterhead/form
   - Basic Life Support Certification Card (front and back) provided via the American Heart Association
   - RN License (front and back)
   - Seasonal Influenza vaccine on USF Verification Form or on agency letterhead/form

Once you have completed the above stated requirement, you must upload a copy of the documentation into your Certified Background student account prior to your program submission deadline.
If you have program specific questions, please contact your program assistant or Certified Background:

Certified Background Service Desk
(888) 914-7279
cpservicedesk@certifiedprofile.com

Thank you,
School of Nursing & Health Professions Administration