

Texas Board of Nursing

ROSTER

ACCEPTED/NEW SCHOOL APPLICANTS
CRIMINAL BACKGROUND CHECK

1. Complete form- do not leave any blanks. If you DO NOT have a Social Security Number, write all 1's ex. 111-11-1111 (Form must be completed prior to making fingerprint appointment)
2. Return to Clinical Affairs Office RM. 124 at NAH-A or email to clinicalaffairs@southtexascollege.edu
3. Texas Board of Nursing will email you in approximately 2-4 weeks after Roster has been submitted *only* if you need to schedule a fingerprint appointment (sender: nobody@ldentogo)
*Note to LVNs: Do not submit fingerprints unless you have been instructed to do so.

PLEASE PRINT LEGIBLY

Circle program:	VN	RN	LVN – RN Track (Active LVNs)	Para – RN Track
Name (Last, First, M.I.)				
Mailing Address				
City, State, Zip				
Social Security Number				
Date of Birth MM/DD/YYYY				
Telephone				
Personal Email				
Active LVN License #:				

For office use only:		
Date entered:		Entered by: