

LPN-RN STUDENT FILE CHECKLIST

Enrollment Process



Part 1:

- **Information Session**
- **Official Copy of LPN Transcript** (For review/approval)
- **Active and Valid Ohio LPN License**
 - (Conducted by the Ohio Board of Nursing) <https://nursing.ohio.gov>
- **Complete FAFSA** <https://studentaid.gov>

Part 2: (FA/DS/Bkgd)

- **Financial Aid Appointment**
- **Drug screen - \$25 Panel drug screen required and must be no earlier than 90 days prior to start date - Payable by Student (If you fail your drug screen after two separate attempts, you will be unable to attend Athena indefinitely.)**
- **BCI/FBI Background Check - Payable by Athena**
- **Scrub Fitting/Picture - for photo ID/Badge**

Part 3: (Documents) [Must be scanned, faxed, or hard copy. **CANNOT** accept "screenshots or pictures"]

- **Government Issued Identification**
- **Social Security Card** *If applicable, Citizenship requirements include I-94 form, current U.S. passport, or proof of alien registration number*
- **High School or GED Transcripts** (*Copies of Diploma are **NOT** accepted*)
 - *Foreign transcripts must be evaluated, and proof of U.S. equivalency provided*
- **CPR Card - BLS Healthcare Provider through the American Heart Association ONLY!**
 - *Heart Code BLS + BLS Skills Session or BLS Provider ONLY*
- **Pre-Admissions Health Form** - signed and stamped by Physician within the last year
 - *Must use form provided by Athena, if stamp is not available, letter of verification is required*
- **2 Step TB (Current 2 step** which includes a shot in each arm 1 to 3 weeks (7 to 21 days) apart **OR** proof of original 2-step and up-to-date annuals, **OR** a **clear chest x-ray** that is negative for TB conducted within a 12-month window prior to the start date, **OR** a current negative **Quantiferon® -TB Gold Plus-QFT-Plus**)
- **MMR** (2 injection series anytime in lifetime **OR** a positive IGG titer within the last 10 years. If the titer is negative, a booster shot is required)
- **Varicella** (1 injections anytime in lifetime **OR** a positive IGG titer within the last 10 years. If the titer is negative, a booster shot is required)
- **Hepatitis B Series** (3 injection series anytime in lifetime **OR** a positive IGG titer within the last 10 years **OR** signed Athena Hepatitis B Vaccine Waiver)
- **Tdap, Td, or Tetanus** (1 injection within the last 10 years)
- **Flu Shot** (Current/Upcoming Season) *Only needed if you are starting between **September through April** (Please note when flu season returns, you will be required to get one while in the program)*
- **Covid-19 Vaccine(s)** (Completed Series-Fully Vaccinated) **2 Pfizer, 2 Moderna, or 1 Johnson & Johnson's Janssen**

Part 4: (Enrollment)

- **Complete Online Application & State of Ohio Disclosure Course**
- **Sign Enrollment Agreement** (*This reserves your seat!*)
- **Payment** (If applicable)

Orientation Date: _____ **Class Start Date:** _____

This checklist is to be used as a guide to help with the enrollment process and is not to be considered a contract of any kind. Requirements and fees are subject to change.