

# FLORIDA

## *Department of Health*

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### *Certified Nursing Assistant Candidate Information Bulletin*

Effective October 1, 2009



*As of July 1, 2009, nursing assistant candidates are required to answer additional background questions prior to taking their exam. Please review the application addendum on Page 21 or online at [www.prometric.com/nurseaide/fl](http://www.prometric.com/nurseaide/fl).*

*Published by*

PROMETRIC



*Providing Competency Evaluation Examinations for the  
State of Florida*

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# Introduction

## ***A message from DOH***

The Florida Department of Health (DOH) has contracted with Prometric to develop and administer its Certified Nursing Assistant (CNA) Exam.

This bulletin describes the procedures for becoming a Florida CNA and a member of the CNA Registry.

## ***At a glance***



Follow these main steps if you are interested in becoming a CNA in Florida.

### ***To become a certified nursing assistant in Florida***

- 1** Review this bulletin thoroughly to understand the exam application and scheduling provisions.
- 2** Complete the Florida Certified Nursing Assistant Application Addendum on Page 21 **and** the Florida Certified Nursing Assistant Application on Page 22 of this Bulletin and send them, along with appropriate fees, to Prometric. Additional copies of the new Florida Certified Nursing Assistant Application Addendum, which contains the additional Criminal History questions required per Florida Statute, are also available online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL).
- 3** Review information on Page 18 regarding content outlines for written and clinical skills exams.
- 4** Take the exams at your appointed exam location, date and time. Be sure to bring the necessary identification to the test center. (See Page 11.)
- 5** If you have lived in Florida for less than five consecutive years, you must have an electronic fingerprint scan completed (see Page 6).
- 6** Once you have passed both parts of the CNA exam, have your background screening approved by the Florida Board of Nursing, and have provided your Social Security number to Prometric, you will be eligible to receive your Certificate from the Florida Board of Nursing, and will be placed on the Florida CNA Registry (see Page 17.)



### ***To get answers not provided in this bulletin***

Direct all questions and requests for information about the exam process to:

**Prometric**  
1260 Energy Lane, St. Paul, MN 55108  
Phone: 888.277.3500  
Fax: 800.813.6670  
[www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL)

Direct questions about certification regulations to:

**Florida Department of Health**  
CNA Registry/Board of Nursing  
4052 Bald Cypress Way, BIN # C13  
Tallahassee, FL 32399-3263  
Phone: 850.245.4567  
[www.doh.state.fl.us/mqa](http://www.doh.state.fl.us/mqa)

# Understanding certification routes

The state of Florida has five certification training routes for establishing eligibility to become a CNA.

Please read the following certification routes carefully to determine the one that is most appropriate for your situation.

## **Certification training routes**

You must apply for your certification under one of the following:

### **E 1—Completed a State-approved Nursing Assistant Training Program**

**Select this certification route if you** finished your Florida-approved nursing assistant training and you have never been a nursing assistant in any other state. It is important to have your training program instructor or coordinator enter your completion date and training program code on the Florida Certified Nursing Assistant Application form.

### **E 2—Enrolled in a State-approved Nursing Assistant Training Program**

**Select this certification route if you** are taking a state-approved training program and are planning to graduate and you have never worked as a nursing assistant in any other state. It is important to have your training program instructor or coordinator enter your completion date and training program code on the Florida Certified Nursing Assistant Application form. Your test date will be scheduled for a date after your training completion date.

### **E 3—Challenger**

**Select this certification route if you** have never been trained as a nursing assistant in Florida or any other state and have no nursing assistant experience, and believe that you can pass the exam without training. If you have previously tested using this route and 1) passed one portion of the exam, but have not passed the second portion in two years; or 2) failed one portion of the exam three times, you will have to complete a minimum of 120 hours of training in an approved training program. You will then need to retake both the Written and Clinical Skills tests, regardless of past scores.



**Note** While a state-approved training program is not required prior to testing, it is strongly recommended. Individuals must be at least 18-years-old, or have a high school diploma or equivalent to “challenge” the exam without completion of an approved training program.

### **E 4—Other Nursing Training**

**Select this certification route if you have:**

- Completed a non-state-approved nursing assistant training program in a nursing home facility that is federally compliant; or
- Some training or experience in nursing but have not completed a nursing assistant training program; or
- Graduated from a state-approved RN or LPN training program.

## E 5—Lapsed Nursing Assistant

**Select this certification route if you** were a certified nursing assistant in Florida or another state and your certification has lapsed and you are retesting to become active again on the Florida Certified Nursing Assistant Registry.

### Certificate renewal

Certificates issued by the Florida Board of Nursing will include expiration dates. To keep their certificate current (active), CNAs will need to renew their certificate before the expiration date. The process to renew certificates is handled by the Florida Board of Nursing.

The renewal process will include a fee and completion of a form that documents the CNA has worked during his or her certification period performing nursing-related services for monetary compensation.

Certificates that are not renewed before they expire will be considered delinquent. You may not work with a delinquent certificate. To become active and able to work again, you must pay the regular renewal fee plus a delinquent fee of \$25. These fees are payable to the Florida Board of Nursing. If your certificate is delinquent for a period of two years, it will become null and void. You may not work with a null and void certificate. If your certificate becomes null and void, you must take and pass both the Written and Clinical Skills competency tests and complete a new background check in order to become certified. If you have not provided nursing services for pay in a two-year period, you must take and pass both the Written and Clinical Skills competency tests and complete a new background check in order to become certified.

## *Scheduling your tests*

The Florida Certified Nursing Assistant (CNA) Exam consists of two separate tests that evaluate the knowledge and skills required to provide safe and competent care. One test is a hands-on skills demonstration referred to as the **Clinical Skills Test**. The other test is a **Written (Knowledge) Test** that is given on a computer. First-time testers must register for both examinations.

You may take the two tests in any order. You are not required to pass one test before taking the other.

### ***Completing the application form***

Before you can test, you must submit the following:

- 1 The Florida Certified Nursing Assistant Application Addendum on Page 21 **and** the Florida Certified Nursing Assistant Application on Page 22. Both forms are also online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL).

Complete all forms clearly and accurately. Incomplete, illegible and/or unsigned applications will be returned, which will delay the processing of your application.

- 2 The appropriate fee(s).

**Social Security number.** If you do not have a Social Security number at the time of completing the application, you will be permitted to test. However, you must provide a Social Security number after testing in order to be placed on the

## SCHEDULING YOUR TESTS

Florida CNA Registry. To submit your Social Security number, use the Confidential And Exempt From Public Records Disclosure form on Page 20 and mail it to Prometric. Faxed copies of this form will not be accepted.

This information is exempt from public records disclosure pursuant to subparagraph 119.071(5)(a)2., Florida Statutes, which states all Social Security numbers collected by an agency are confidential and exempt and should be segregated in order that they may more easily be redacted, if required, pursuant to a public records request.



**Important** Applications and fees must be received for processing at least 10 business days before your desired test date. Applications are processed in the order received. Submit your application as early as possible. For fastest service, apply online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL).

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### **Admission letter**

Once your application has been processed and it has been determined that you are eligible for testing, Prometric will send you an admission letter. This letter provides information regarding the specific date, time and location of your exam. You **must present** this letter at the testing center or you will not be allowed to test.

If you do not receive an admission letter, call Prometric at 888.277.3500. Prometric is **not** responsible for lost, misdirected or delayed mail.

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### **Fee information**

You are responsible for exam fees unless a facility or other entity pays on your behalf. If a nursing home employs you within 12 months of obtaining your certification, the facility is required to reimburse you for your training and testing fees under federal law and Florida facility handbook guidelines. Contact the District Medicaid Office in your area if you have any questions regarding reimbursement.

Payment may be made by including a MasterCard or Visa number, money order, company check or cashier's check. **Personal checks and cash are not accepted.** Fees must be included with the application form.

**Exam and related fees** are as follows:

Service	Standard Fee	With Audio*
Clinical Skills and Written Tests (both in English)	\$93	\$97
Clinical Skills (English) and Written Tests (Spanish)	\$93	\$97
Written Test (English)	\$36	\$40
Written Test (Spanish)	\$36	\$40
Clinical Skills Test (English)	\$57	N/A
Rescheduling Fee (see Page 5)	\$25	
FDLE Screening (see Page 6)	\$34	
FBI Screening (see Page 6)	\$53.25	

\*The written exam is available as an audio exam. During an audio exam, you will be able to hear the questions read to you while reading and answering questions on the computer. You may replay questions as many times as needed.



**Important** Print your name and either Prometric Unique ID or, if applicable, Social Security number on money orders, certified checks or company checks. Application forms received without proper payment will be returned and will delay processing and/or testing. **Testing fees are nonrefundable and nontransferable.**

***Regional testing locations***

Prometric administers the Certified Nursing Assistant examinations in test site locations throughout the state of Florida. During the application process, you will need to enter the test site code for your preferred testing location from the Florida Testing Center Locations list. This list is available online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL).

Every attempt will be made to schedule you at your preferred location, however, if another test site is available in the same geographic area, you will be assigned to the first available appointment in that area.

Your admission letter will contain directions to the test site. If you are unfamiliar with the area, you can get more specific directions online at [www.mapquest.com](http://www.mapquest.com) or [www.maponus.com](http://www.maponus.com).

***Rescheduling and retesting***

To reschedule an exam appointment without paying a rescheduling fee, you must contact Prometric at least **five full business days** before the day of the scheduled exam appointment. If you are testing at an in-facility test site, you may not reschedule yourself; the facility must call to reschedule your appointment.

Rescheduling fees will apply to both individuals and sponsoring facilities as follows:

- **No fee** if you reschedule prior to the sixth business day before your appointment date.
- **\$25 fee** if you reschedule two to five business days before your appointment date. Note: Prometric must receive your fee with your request to reschedule.
- **Another full examination fee** if you reschedule one day prior to your test date or on or after your appointment date. This fee also applies if you are denied admission to a test site for failure to provide valid identification on the day of your exam.

**Last day to reschedule with no fee**

<b>Call by 5 p.m. EST (4 p.m. CST) on:</b>	<b>For a test scheduled on the following:</b>
Friday	Monday, Saturday or Sunday
Monday	Tuesday
Tuesday	Wednesday
Wednesday	Thursday
Thursday	Friday

This schedule **does not** include holidays. Since holidays are not business days, they do not count against the five days (call earlier).

**If absent or late.** If you miss your appointment or arrive late and are not allowed to test, you will forfeit your testing fees and must repay and reapply to test. If you are unable to attend your scheduled exam due to illness or emergency, call Prometric. Under certain circumstances, the fee to reschedule

may be waived. Prometric reserves the right to request documentation to support any illness or emergency claim.

**Emergency closing.** Severe weather or an emergency could require cancellation of scheduled exams. If this occurs, Prometric will attempt to contact you by phone; however, you may check for test site closures by calling 888.277.3500. If the site is closed, your exams will be rescheduled without a rescheduling fee.

**Retesting.** You have three attempts within a two-year period to take and pass both the Clinical Skills test and Written test. A testing fee and application are required each time you take a test. You are only required to retake the test you failed. Retesters must provide their Prometric Unique ID on their application when reapplying.

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### ***Special test considerations***

**ADA accommodation.** If you require testing accommodations under the Americans with Disabilities Act (ADA), please call Prometric at 888.277.3500. Reasonable testing accommodations are provided to allow candidates with documented disabilities recognized under the ADA an opportunity to demonstrate their skills and knowledge.

Candidates should submit professional documentation of the disability with their application to help us determine the necessary testing arrangements. Thirty days' advance notice is required for all testing arrangements. There is no additional charge for these accommodations.

**ESL accommodation.** If English is your second language, a language barrier is not considered a disability. However, the Written Test can be administered in Spanish if this option is chosen on the application form.

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### ***Background Screening***

All new CNA applicants must comply with a state-mandated background screening. This screening is in addition to any background screening your school may have required. The results of the background screening are submitted to the Florida Board of Nursing and must be approved by the Board before a candidate receives certification and is placed on the CNA Registry.

If you have been a Florida resident during the last five years, the background screening will be conducted by the Florida Department of Law Enforcement (FDLE). If you have not resided continuously in Florida during the last five years, the background screening will be conducted by the Federal Bureau of Investigation (FBI).

Based on your residency, you will need to submit the following screening fee with your application form:

- **FDLE - \$34 fee.**
- **FBI- \$53.25 fee.**

FDLE background screening fees are required to be paid only once in a 12-month period. If you have not passed the exam within the 12 months, another background screening and associated fees will be required.

If you have lived in Florida for less than five years, you must also submit fingerprints through "live scanned," Web-based fingerprint capturing technology. You are permitted to schedule and take your examination before the electronic

fingerprint capture; however your information will not be released to the Board until the fingerprint capture is completed. FBI fingerprint scans are only good for six months. If you do not pass both exams within a six-month period, you will need to pay for a new scan at the time of reapplying to Prometric.

**Candidates must submit their test application to Prometric before going to have their fingerprint scan done. You will need to have a copy of your Admission to Test Letter or Notification of Application Receipt letter from Prometric in order to make an appointment to have your fingerprints scanned. Do not go for fingerprint scanning prior to receiving one of these letters from Prometric.** The DOH will only accept electronic fingerprint capture for FBI background screenings. Paper fingerprint cards will not be accepted.

Prior to receiving approval for certification, the Board will review all criminal offenses. If the results of the background screening show arrests and offenses, or incomplete dispositions, you will receive a notice from the Board requesting additional information. If the Board denies your certification, you will receive an official *Notice of Intent to Deny* and have the right of appeal.



**Important** Once you have completed and submitted your application forms, along with all necessary fees, you will be scheduled to take your exam. However, if the Board denies your certification based on information in your background report, you will not receive a refund of exam or background fees.

Some employers may also require you to pass an employment screening. Some long term care facilities may not hire you as a certified nursing assistant if you have a felony or a misdemeanor charge against you as specified on a list of disqualifying offenses in Chapter 435, Florida Statutes.

More information and a list of Frequently Asked Questions concerning background screening can be found online at [www.doh.state.fl.us/mqa/cna/cna-faqs.htm](http://www.doh.state.fl.us/mqa/cna/cna-faqs.htm).

## ***Criminal history questions***

**IMPORTANT NOTICE:** Pursuant to Section 456.0635, Florida Statutes, you are being notified that effective July 1, 2009, health care boards and/or the department shall refuse to issue a license, certificate or registration and shall refuse to admit a candidate for examination if the applicant has been:

1. Convicted or plead guilty or nolo contendere to a felony violation regardless of adjudication of: chapters **409, 817, or 893**, Florida Statutes; or **21 U.S.C. ss. 801-970** or **42 U.S.C. ss 1395-1396**, unless the sentence and any probation or pleas ended more than 15 years prior to the application.
2. Terminated for cause from Florida Medicaid Program (unless the applicant has been in good standing for the most recent five years).
3. Terminated for cause by any other State Medicaid Program or the Medicare Program (unless the termination was at least 20 years prior to the date of the application and the applicant has been in good standing with the program for the most recent five years).

Prometric is in the process of updating the Florida Certified Nursing Assistant Application to include the additional state-required questions. In the meantime, please use the application as it currently appears online and on Page 22 of this

Bulletin **and** the Florida Certified Nursing Assistant Application Addendum on Page 21. The new Florida Certified Nursing Assistant Application Addendum is also available online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL).

## Overview of exams

This section gives you information on:

- What to expect on the Written Test.
- Written test practice questions.
- What to expect on the Clinical Skills Test.

### Written Test

The **Written Test** is taken on a computer and consists of 60 multiple-choice questions that evaluate your overall knowledge and skills in providing safe and competent care. The test has 50 scored questions and 10 unscored items used for statistical analysis. You will have two hours to complete the test.

Practice questions written in a similar style to the actual test questions are included in the next section of this bulletin. An outline of the test content for the Written Test is located on Page 18.

### Audio test

The Written Test can be taken in an audio format. During an audio test, you will hear the questions read to you while reading and answering questions on the computer. You may replay questions as many times as needed. The audio administration may be helpful for candidates who have a reading disability, limited reading skills or those who consider English their second language. Candidates who would like to take the audio test should select this option on the application form. This request **cannot** be made on the day of testing.

### Practice questions for the Written Test

The questions in the Written Test are multiple choice. You choose your answer from four options. If you are not sure of an answer, do not spend a great deal of time on it. It may be better to select the best answer or mark it for review later. Answer every question, even if you are unsure of an answer. There is no penalty for guessing and you will not receive credit for any question left blank.

The following sample questions are similar to the types of questions that may be included in the Written Test.

1. A nursing assistant meets a new resident who is being admitted to the nursing home. What should the nursing assistant do first?
  - (A) Get ice water for the resident.
  - (B) Greet the resident and introduce self.
  - c** Arrange the resident's personal belongings.
  - d** Talk with the resident's family.
  
2. A nursing assistant finds clean linen lying on the floor near the linen cart. What should the nursing assistant do?
  - (A) Place the linen back on the cart and cover the cart.
  - (B) Place the linen in a resident's room for immediate use.
  - (C) Discard the linen in the soiled linen hamper.
  - (D) Leave the linen on the floor for housekeeping staff to remove.

**PRACTICE QUESTIONS FOR THE WRITTEN TEST**

3. A resident needs to ambulate for his daily exercise. The nursing assistant enters the room and greets the resident. What should the nursing assistant do next?
  - (A) Help the resident put on his shoes.
  - (B) Explain what the nursing assistant plans to do.
  - (C) Lower the height of the resident's bed.
  - (D) Get the resident's walker.
  
4. A nursing assistant suspects abuse of a resident. What should the nursing assistant do?
  - (A) Discuss this with another nursing assistant.
  - (B) Report this to the charge nurse.
  - (C) Talk with the resident's family.
  - (D) Call the resident's doctor.
  
5. A resident has an indwelling urinary catheter. When caring for this resident, which of the following should the nursing assistant report to the charge nurse immediately?
  - (A) The urine in the drainage bag is clear and light yellow in color.
  - (B) The urine drainage bag is hanging below the level of the bladder.
  - (C) The resident complains of pain and burning.
  - (D) The resident tells the nursing assistant that he hates to have a catheter.
  
6. A resident dresses herself, but her skirt is on backwards. What should the nursing assistant say to the resident?
  - (A) "That isn't the way to dress. Why not let me dress you?"
  - (B) Say nothing and ignore that the shirt is on backwards.
  - (C) "Nice choice in your outfit today. Can I help you turn your skirt around?"
  - (D) "I think you need me to help you dress. You got your skirt on backwards again."
  
7. A nursing assistant finds a resident crying in her room. Which of the following is the best response by the nursing assistant?
  - (A) "It's okay. We all have bad days."
  - (B) "This is the best place to have a good cry."
  - (C) "I will tell the social worker that you are upset."
  - (D) "Will it help to tell me why you are crying?"
  
8. As a person ages the skin normally becomes
  - (A) more red and flaky.
  - (B) more yellow and wrinkled.
  - (C) looser and drier.
  - (D) tighter and smoother.

9. A nursing assistant brings a breakfast tray to a resident who is usually alert. The resident's eyes are open but she does not respond to her name. What should the nursing assistant do?
  - (A) Try to ambulate the resident back to bed.
  - (B) Give the resident something to eat or drink.
  - (C) Apply restraints to the resident.
  - (D) Call the charge nurse at once.
  
10. Before taking a resident's oral temperature, what question should the nursing assistant ask the resident?
  - (A) "Would you like to wash out your mouth with mouthwash?"
  - (B) "Have you had anything hot or cold to eat or drink within the last ten minutes?"
  - (C) "Would you like to remove your dentures?"
  - (D) "Would you like your breakfast before I take your temperature?"

**Answers to sample questions:**

1-B; 2-C; 3-B; 4-B; 5-C; 6-C; 7-D; 8-C; 9-D; 10-B.

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## **Clinical Skills Test**

The **Clinical Skills Test** is a timed test that requires you to demonstrate five skills performed in the care of nursing home residents. You will be given 35 minutes to complete the skills you are asked to perform.

To pass the Clinical Skills Test, you must pass all five skills. Three of the skills will come from the Clinical Skills list (see Page 19). While performing those three skills, you will also be scored on two additional skills - handwashing and Indirect Care. Indirect Care represents aspects of care related to resident rights, communication with the resident, resident safety and comfort, and infection control that are performed throughout every skill.

Each skill is comprised of a series of checkpoints. Points have been assigned to each checkpoint, based on how critical the checkpoint is to the safe performance of the skill. For example, the checkpoint for raising the head of the bed before feeding the resident would have a higher number of points assigned to it than the checkpoint for removing the clothing protector after feeding the resident. To pass a skill, candidates are not required to perform the skill perfectly. When administering the test, the nurse examiner watches the candidates perform the skill and compares each candidate's performance to the checkpoints that make up each skill.

The rules for the Clinical Skills Test permit candidates to correct their performances while they are demonstrating a skill. However, once candidates have completed a skill and have begun the performance of another skill, they may not go back to correct the performance of a previous skill. Candidates are not given additional time for correcting a skill.

The nurse who administers the Clinical Skills Test is not permitted to teach, coach, or discuss results or performances with candidates.

### **Client actor**

Depending on the skill, candidates will be asked to volunteer to act as the client for other candidates testing on the same day. Specific instructions explaining

what is expected of client actors and how candidates should interact with the client actors will be read before the test begins.

### Stopping the testing of a skill

During the Clinical Skills Test, the nurse administering the test can stop the testing of a skill if the resident/actor/volunteer is in danger.

## Taking your exam

Knowing what to expect when taking your exam may help you prepare for it. This section contains:

- A list of what to bring to the exam.
- Regulations that will be enforced at the testing center.
- Explanation of the computer process for the Written test.
- A guide to understanding your exam results.
- Information about appeals.

### What to bring to the exam

You should arrive at least **30 minutes before** your scheduled exam appointment. This allows time for you to sign in and for staff to verify your identification. You will need to provide all of the following items:

**Admission letter.** You must present the original letter sent to you by Prometric.

**Identification required.** You must present **two** valid pieces of identification before you may test and one piece **must**:

- Be a current (not expired) government-issued (e.g., driver's license, state-issued identification card or military identification card);
- Contain **both** a current photo and your signature (this must be legible); and
- Have a name that exactly matches the name on your application used to register for the exam (including designations such as "Jr." and "III").

Examples of acceptable second forms of identification include credit cards and Social Security cards. All forms of identification must have been signed before the day of test. **The second form of identification must also have the candidate's signature on it.**



**Important** Failure to provide appropriate identification at the time of the exam is considered a missed appointment and you will be required to pay the entire exam fee in order to be scheduled for another exam.

**What to wear.** Candidates taking the Clinical Skills Test are required to wear flat, nonskid, closed-toed shoes. It is recommended that a uniform or scrubs be worn on the day of testing. Candidates should also either wear, or bring, a watch with a secondhand.

### Testing regulations

To ensure that all candidates are tested under similar conditions, the following regulations and procedures will be observed at each testing center. Failure to follow any of these security procedures will result in the disqualification of your examination. All candidate misconduct will be reported to the Board of Nursing.

## TAKING YOUR EXAM

Prometric reserves the right to audiotape and videotape any examination session.

### References

- No reference materials, papers or study materials are allowed at the test center. If you are found with these or any other aids, you will not be allowed to continue the exam and your answers will not be scored.

### Personal items

Prometric is not responsible for personal items brought to the testing center. While a designated area may be provided, it is recommended that personal items not be brought into the testing center. Note the following:

- Electronic equipment is **not** permitted in the testing area. This includes cell phones, PDAs, pagers, cameras, tape recorders, etc. All of these items will be collected by the Nurse Aide Evaluator (NAE) or proctor.
- Pocket items—keys, wallet, etc.—must remain in your pocket during testing.
- Other personal items—purses, briefcases, etc.—are not permitted in the testing area. **Note:** It is recommended that purses not be brought to the testing center as access to purses will not be allowed during testing.

### Restroom Breaks

- If you leave the testing room while an exam is in progress you must sign out/in on the roster and you will lose exam time.
- You will not have access to any personal items during this break.
- You are not allowed to use any electronic devices or phones during breaks.

### Visitors

- No guests, visitors, children or family members are allowed at the testing center.

### Misconduct or disruptive behavior

- Candidates who engage in any kind of misconduct or disruptive or offensive behavior will be dismissed from the examination. If dismissed, exam results will be invalid and the details of the misconduct will be reported to the Board of Nursing. Examples are: giving or receiving help, Clinical Skills candidates or client actors talking, prompting or moving when not directed to do so, taking part in an act of impersonation, removing test materials or notes from the testing room, using rude or offensive language and behavior that delays or interrupts testing.

### Weapons

- Weapons are not allowed at the testing center.

**Copyrighted questions.** All test questions are the copyrighted property of Prometric Inc. It is forbidden under federal copyright law to copy, reproduce, record, distribute or display these test questions by any means, in whole or in part, without our written permission. Doing so may subject you to severe civil and criminal penalties, including up to five years in prison and/or a \$250,000 fine for criminal violations.

**If questions arise.** Test center administrators are not allowed to answer any questions pertaining to the exam content. If you do not understand a question on the examination, you should answer the question to the best of your ability.

**Contingency testing.** In the event that a technological problem occurs on a scheduled exam day, a paper and pencil version of the exam will be used. Should contingency testing be implemented, same-day scoring will not be available. Candidates will be mailed their results once the exams are scored.

## ***Taking the computerized Written Test***

The Written exam is administered using Prometric's user-friendly, Microsoft Windows®-based, computerized testing system. You do not need computer experience to use this system. You will use a computer mouse to select answers. You will receive a tutorial before the test begins to familiarize yourself with taking the test on a computer.

This review features:

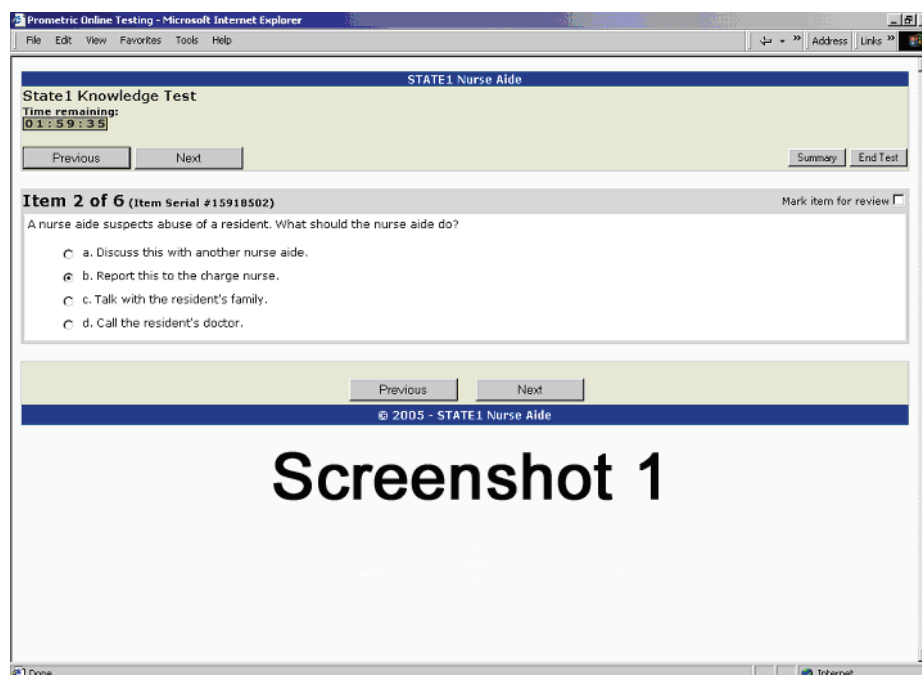
- Moving the mouse and using the mouse to select answers.
- Marking a question for review.
- Reviewing questions.
- Viewing a summary list of questions showing answered and unanswered questions.
- Submitting a test for scoring.

The screenshots on the following pages are samples of how test questions are displayed on the computer screen during the test. Notice the following features:

- The time remaining is displayed in the upper right-hand corner.
- Above the question, on the upper right-hand side, a box is available that can be checked to indicate questions you would like to look at again later. The way questions are scored is not affected by checking boxes.

In **Screenshot 1**, the candidate chose "b. Report this to the charge nurse" as their answer. You can change your answer by clicking on another response.

- Buttons are located above and below each question allowing you to move to the next question or go back to the previous question(s).
- A "Summary" button is located in the upper right area of the screen that can be selected at any time to review how many questions have been answered and marked for review.
- An "End Test" button is also located in the upper right area of the screen. Click on this button only when you are ready to submit your test for scoring.



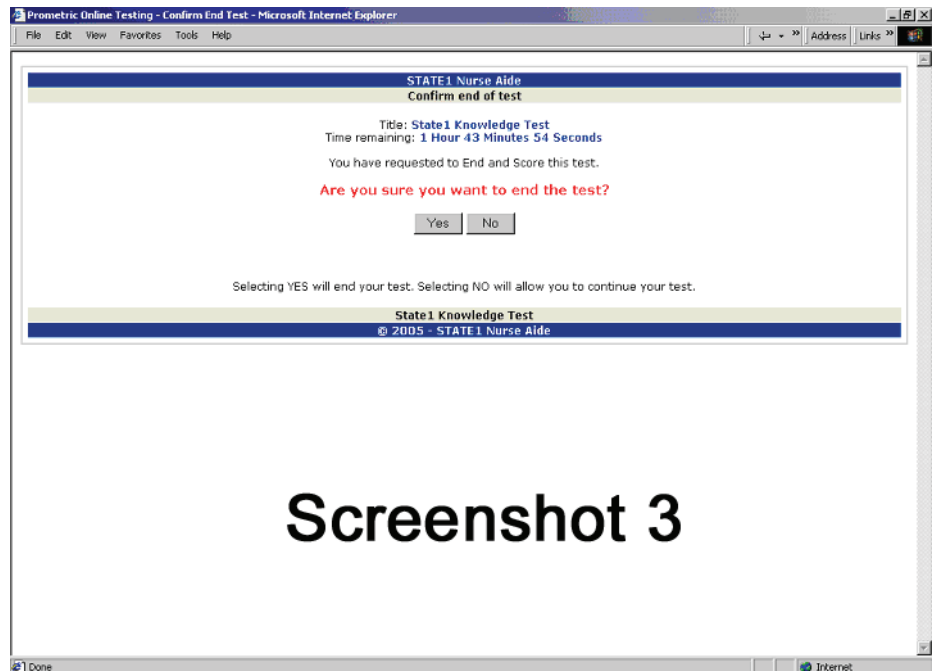
# Screenshot 1

**Screenshot 2** is an example of the Summary page, which provides information on questions that are marked for review, and have and have not been answered. You can open any question from this page by clicking on an item number under the column marked "Item #."



## Screenshot 2

**Screenshot 3** appears when you select "End Test." You will be required to answer the question "Are you sure you want to end the test?" Responding "yes" will result in the immediate scoring of your test. This test cannot be re-entered under any condition. You should only answer "yes" to this question when you are completely finished with the test. It is always a good idea to review the Summary page before ending your test.



## Screenshot 3

## Your exam results

Once you have passed both parts of your exam and have provided Prometric with your valid Social Security number and if applicable have completed an electronic fingerprint scan through L-1, your scores will be released to the Board of Nursing. Once the Board of Nursing has received your application, score information and cleared your background screening, your Certificate will be mailed to your address of record. Your official results will also be reported to the CNA Registry.



**Note** Scores are confidential and will be revealed only to you and the state. Scores are not given out over the phone. Your official results will be given to you at the test site on the day of testing. If you lose your official results, you may obtain a duplicate for \$15 by contacting Prometric and providing your Prometric Unique ID.

### Written Test

Since your exam is given on computer, you will be given a printed score report when you have finished your exam. The score report will list an overall result, either pass or fail. The score report will list the content areas you passed or failed on the exam. Even when you are successful, you may wish to focus on those areas that require additional attention as you begin to provide care for the public. **Test site personnel are not permitted to discuss results or performance with candidates.**

If you pass the test, you will be given an official score report indicating the following: "This score report is valid for a period not to exceed four months from the first date of employment in a nursing facility. In order to receive your Certified Nursing Assistant certificate from the Florida Board of Nursing, you must have a clear background screening and if applicable; have completed an electronic fingerprint scan at an L-1 Identix site and have provided a valid Social Security number to Prometric if you have not already done so."

### Clinical Skills Test

A preliminary score report will be given to you at the test site, shortly after the completion of your test. You must pass all five skills to pass the Clinical Skills Test. **The nurse giving the Clinical Skills Test is not allowed to discuss your results or performance with you.**

If you pass the test, you will be given an official score report indicating the following: "This score report is valid for a period not to exceed 4 months from the first date of employment in a nursing facility. In order to receive your Certified Nursing Assistant certificate from the Florida Board of Nursing you must pass both the clinical and written and have a clear background screening and provide a valid Social Security number to Prometric if you have not already done so."

**Note to employers:** Before employing someone as a CNA, facilities should verify that the candidate has two passing score reports; one for the Written and one for the Clinical Skills examination.

### Unsuccessful candidates

Candidates who fail an exam, will be given an official score report at the test site on the day of testing. Results will be reported to the Florida Board of Nursing.

If you fail your exam and need to reschedule another exam, you must wait at least 30 days prior to testing again, and you must complete and submit another application form and provide your six-digit Prometric Unique ID number found on your score report.



**Note** If you do not pass both your Written and Clinical Skills tests within three attempts and two years, you will be unable to test again until you have completed a minimum of 120 hours of training in an approved training program. You will then need to retake both the Written and Clinical Skills tests, regardless of past scores.

### Exam review

If you do not pass the Written exam, you can register for an optional review of it. The exam review session is conducted much like an exam. To request an exam review, you must contact Prometric in writing within 21 days of receiving your exam results. The review must be completed within 60 days of receiving your scores. The fee for an exam review is \$50.

Your review request should include your name, address, Social security number and the \$50 review fee payable by MasterCard or Visa, money order, company check or cashier's check. **Personal checks and cash are not accepted.**

You will be scheduled for the review at the same test site location where the exam was taken unless you specify otherwise, or there is an earlier appointment available at another test site in the same area.

During a **Written Test review**, you will be given a printout of the test showing the questions missed and the incorrect answers given. You will have one hour to review the test to determine what the correct answers should have been. You are not provided with the correct answers.

You are not permitted to leave the room with any notes that you may have taken during the review. All security requirements that apply during the exam apply to the review session as well.



**Note** You must wait 30 days following the review session to reschedule for a new examination.

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## Appeals process

Our goal is to provide a quality exam and a pleasant testing experience for every candidate. If you are dissatisfied with either and believe we can correct the problem, we would like to hear from you. We provide an opportunity for general comments at the end of your exam. Your comments will be reviewed by our personnel, but you will not receive a direct response.

You have the right to an appeal process. Your appeal letter must provide your name and Social Security number, the exam title, the date you tested and the details of your concern, including all relevant facts. Be sure to include your signature and return address. Mail your appeal letter to:

**Prometric**  
**ATTN: Appeals Committee**  
1260 Energy Lane  
St. Paul, MN 55108

The Appeals Committee will review your concern and send you a written response within 20 business days of receipt. **Faxed appeals will not be accepted** because an original signature is required.

## ***Certified Nursing Assistant Registry***

Certified Nursing Assistants (CNAs) are regulated through the Board of Nursing in the state Department of Health. They are regulated by Chapter 464, Part 2, Florida Statute and may be disciplined by the Board of Nursing.

### ***Registry requirements***

The names of candidates who successfully pass both the Written and Clinical Skills exams, have completed the appropriate background screening, and have provided their Social Security number will be added to the Florida Registry as a CNA. The Registry is available to CNAs and the public for verification of certification at [www.doh.state.fl.us/mqa/cna](http://www.doh.state.fl.us/mqa/cna).

**Address and name changes.** It is the responsibility of every nursing assistant to update the Registry with any address change or any change in name. There is no charge for updating this information with the Registry; however, there is a \$25 fee to receive a new certificate reflecting your name change.

**Certificate renewal.** The process to renew certificates is handled by the Florida Board of Nursing. More information about certification renewal can be found on Page 3.

### ***For Training Programs only: In-facility testing***

The following guidelines have been established for facilities interested in providing In-facility testing:

- 1** New facilities (facilities that have not tested with Prometric in the past) must obtain an In-facility contract and request form at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL) or by calling 888.277.3500. The contract must be filled out by the facility, and all supply and system requirements must be met.
- 2** Signed contracts and request forms must be received by Prometric 30 days in advance of the requested testing date.
- 3** Returning facilities (facilities that have previously tested with Prometric) will only be required to send the request form to Prometric 30 days in advance of requested test date.
- 4** There must be a minimum of eight applicants per exam date, or payment for eight applicants, if fewer than eight individuals are testing.
- 5** Prometric will then schedule a Nurse Aide Evaluator for one of the requested dates.
- 6** Prometric will fax the request form back to the facility, with the scheduled test date and test site code for the facility.
- 7** After candidates have completed the Florida Certified Nursing Assistant Application (see Page 22) **and** the Florida Certified Nursing Assistant Application Addendum (see Page 21), **all** applications must be sent together with payment to Prometric.

## Exam content outlines

The Competency Examination consists of two tests, a Written (Knowledge) Test and a performance-based Clinical Skills Test.

You must pass both the Written and Clinical Skills tests within two years and three attempts.

### Written (Knowledge) Test Content Outline

**60 questions—Two-hour limit**

The areas of nursing assistant knowledge covered in the test are:

#### I. Role of the Nursing Assistant [9 questions, 18%]

- A. Personal Responsibilities
  1. Reporting requirements
  2. Promoting personal health and safety
  3. Protecting resident rights
  4. Organizing work
  5. Workplace standards including ethical and unethical behaviors
- B. Nursing Assistant as a Member of the Health Care Team
  1. Job responsibilities of the nursing assistant, including duties and limitations
  2. Understanding roles of multi-disciplinary team members
  3. Principles of teamwork (e.g., collaboration, cooperation, sharing information)
  4. Resident care conferences
  5. Resident plan of care
  6. Responsibility to provide care according to plan of care
- C. Interpersonal Relations and Communication Skills
  1. Principles of communication
  2. Types of communication
  3. Factors affecting communication
  4. Supportive communication techniques

#### II. Promotion of Safety [8 questions, 16%]

- A. Potential hazards in the resident environment
- B. Common injuries and related risk factors
- C. Providing a safe and comfortable environment
  1. Comfort needs of the resident
  2. Accident prevention including fall prevention protocols
  3. Use of restraints and restraint alternatives
- D. Fire prevention and safety
- E. Infection control
  1. Maintaining a clean environment
  2. Factors that contribute to spread of disease causing organisms
  3. Practices that decrease the risk of exposure to disease causing organisms
  4. Signs and symptoms of infections
- F. Emergencies
  1. Responses to emergency and disaster situations

2. Providing for immediate life-safety of residents
3. Evacuation procedures

#### III. Promotion of Function and Health of Residents [12 questions, 24%]

- A. Personal care skills
  1. Feeding
  2. Bathing
  3. Perineal care
  4. Foot/nail care
  5. Mouth care
  6. Skin care
  7. Toileting
  8. Grooming
  9. Dressing/undressing
- B. Health maintenance and restoration
  1. Circulation and skin integrity
  2. Nutrition
  3. Hydration
  4. Elimination (bowel and bladder)
  5. Mobility
  6. Promoting self-care and independence
- C. Age-related changes
  1. Cognitive
  2. Emotional
  3. Physical
- D. Psychosocial needs
  1. Basic human needs including support of diversity
  2. Responses to change (e.g., role changes, living situation, finances, health and body image, aging)
  3. Affects of institutionalization (e.g., socialization, dependency, loss of privacy)
  4. Promoting resident sense of well-being including emotional support strategies

#### IV. Basic Nursing Care Provided by the Nursing assistant [13 questions, 26%]

- A. Routine, chronic, non-life threatening situations
  1. Observing, reporting and responding (physical status)
  2. Observing, reporting and responding (behavioral changes)
- B. Acute Emergency Situations: observing, reporting and responding
  1. Chest pain
  2. Respiratory distress
  3. Choking/aspiration
  4. Seizures
  5. Difficulty swallowing
  6. Diabetic situations
  7. Changes in level of consciousness
  8. Cardiac arrest
  9. Falls

10. Bleeding
11. Burns
12. Vomiting
13. Changes in mobility, speech or other potential signs of stroke
14. Sudden onset of confusion or agitation

**V. Specific Care Provided for Residents with Changes in Health [8 questions, 16 %]**

- A. Physical problems
  1. Common physical impairments and related care (e.g., sensory changes and changes in mobility, skin, elimination, nutrition)
  2. Impact of impairments on resident safety, care and comfort
  3. Providing for safety, care and comfort of residents with physical impairments
- B. Psychological problems
  1. Common psychological impairments and related care (e.g., confusion, anxiety, combativeness, fear, agitation, pain)
  2. Impact of impairments of resident safety, care, comfort and ability to communicate needs
  3. Providing for safety, care and comfort of residents with psychological impairments
- C. Care of the dying resident
  1. Grief process
  2. Responding to the emotional needs of the resident, other residents, family and caregivers in the grief process
  3. Factors influencing responses to grief such as spiritual beliefs, culture and past experience
  4. Physical changes and needs as death approaches
  5. Post-mortem care procedures

### Clinical Skills

The following is a list of the clinical skills that you may be asked to perform during the Practical test. A checklist for these skills may be found online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL).

**Indirect Care** includes behaviors that are part of every skill tested for the Clinical Skills Test. Indirect Care includes communication, resident rights, safety, comfort and Standard Precautions (infection control). Indirect Care is rated during your performance of each skill.

**Handwashing Note:** Your handwashing technique is evaluated at the beginning of the test. This skill is not prompted, which means you will not be told to wash your hands. Nursing assistants are expected to know to wash their hands before and after physical contact (touching) with the resident.

**I. Clinical Skill List**

- A. Ambulation
- B. Bedpan
- C. Catheter Care
- D. Change an Occupied Bed
- E. Change of Position
- F. Dressing
- G. Feeding
- H. Foot care
- I. Hair and Nail Care
- J. Measure and Record Blood Pressure
- K. Measure and Record Contents of a Urinary Drainage Bag
- L. Measure and Record Pulse and Respirations
- M. Measure and Record Weight
- N. Mouth Care – Brush Teeth
- O. Mouth Care - Dentures
- P. Partial Bed Bath
- Q. Perineal Care - Female
- R. Range of Motion – Lower Extremity
- S. Range of Motion – Upper Extremity
- T. Transfer



# Florida Certified Nursing Assistant Application Addendum

## Additional Criminal History Questions Per Florida Statute 456.0635

### Effective July 1, 2009

**If testing at an In-Facility Site:** Provide this completed form, along with all necessary documents to your training coordinator (do not send it directly to Prometric). Applications received without this document will be returned in bulk to the training program and will delay confirmation of test date(s).

**If testing at a Regional Test Site:** Mail this completed form, along with all necessary documents and the appropriate fees to: Prometric, Attn: Florida Nursing Assistant Program, 1260 Energy Lane, St. Paul, MN 55108. Applications received without this document will be returned to the applicant for completion and will delay confirmation of test date(s).

### Candidate Information

(Print or type clearly and neatly. Incomplete or illegible forms will not be processed.)

(Print your name <b>EXACTLY</b> as it appears on your government-issued picture identification)		
Last Name	First Name	Middle Initial
Date of Birth (Month, Day, Year)		Email Address
Daytime Phone Number (including area code) (    )		Evening Phone Number (including area code) (    )
Social Security Number information is exempt from public records disclosure and not mandatory for testing (see Page 20 of the Candidate Information Bulletin). Retesters are required to enter their Prometric Unique ID. This number can be found on the Fail letter you received from your last test.		
Social Security Number or Prometric Unique ID: _____		

### Additional Criminal History Questions

These questions **MUST** be answered by the applicant.

Pursuant to Section 456.0635(2), Florida Statutes, the following questions are being asked.

<input type="checkbox"/> Yes	<input type="checkbox"/> No	1a. Have you been convicted of, or entered a plea of guilty or nolo contendere to, regardless of adjudication, a felony under Chapter 409, Chapter 817, or Chapter 893, Florida Statutes; or 21 U.S.C. ss. 801-970 or 42 U.S.C. ss. 1395-1396? (If "No", do not answer 1b.)
<input type="checkbox"/> Yes	<input type="checkbox"/> No	1b. Has it been more than 15 years prior to the date of this application since the sentence and completion of any subsequent period of probation for such conviction?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	2a. Have you ever been terminated for cause from the Florida Medicaid Program pursuant to Section 409.913, Florida Statutes? (If "No", do not answer 2b.)
<input type="checkbox"/> Yes	<input type="checkbox"/> No	2b. If you have been terminated but reinstated, have you been in good standing with the Florida Medicaid Program for the most recent five years?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	3a. Have you ever been terminated for cause, pursuant to the appeals procedures established by the state or federal government, from any other state Medicaid program or the Federal Medicare program? (If "No", do not answer 3b and 3c.)
<input type="checkbox"/> Yes	<input type="checkbox"/> No	3b. Have you been in good standing with a state Medicaid program or the federal Medicare program for the most recent five years?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	3c. Did the termination occur at least 20 years prior to the date of this application?

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

PROMETRIC  **Florida Certified Nursing Assistant Application**



**If testing at a Facility:** Provide this completed form, along with all necessary documents to your training coordinator (do not send it to Prometric).

**If testing at a Regional Test Site:** Mail this completed form, along with all necessary documents and the appropriate fees to: Prometric, Attn: Florida Nursing Assistant Testing Program, 1260 Energy Lane, St. Paul, MN 55108.

**Candidate Information (Print or type clearly and neatly. Incomplete or illegible forms will not be processed.)**

(Print your name as it appears on your identification)		Date of Birth (Month, Day, Year)	
Last Name	First Name	Middle Initial	/ /
Street Address (including Apt. number or P.O. Box*, if applicable)			
City		State	ZIP Code
*If using a PO box as your mailing address, you must supply your physical address of legal residence as well.			
Daytime Phone Number (including area code) ( )		Cell Phone Number (optional). Including area code ( )	
Email Address (optional)	Race _ White _ Black _ Native American _ Asian _ Mexican American _ Other Hispanic _ Puerto Rican _ Pacific Islander _ Other _____		
Social Security Number information is exempt from public records disclosure and not mandatory for testing (see Page 20). Retesters are required to enter their Prometric Unique ID. This number can be found on the Fail letter you received from your last test. Social Security Number or Prometric Unique ID: _____			
Do you have a High School diploma or equivalent? <input type="checkbox"/> No <input type="checkbox"/> Yes		Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	
Have you taken the CNA Written Exam or Skills Evaluation before? <input type="checkbox"/> No <input type="checkbox"/> Yes. If yes, when was the last time you took the exam: _____ - _____ - _____			

**Certification Option/Eligibility**

(See explanation of certification options in this bulletin beginning on Page 2. Be sure to attach required documents.)

<input checked="" type="checkbox"/>	<b>Certification Training Route</b>
	<b>E1</b> - Completed a State-approved Nursing Assistant Training Program. (Complete the training info section below)
	<b>E2</b> - Enrolled in a State-approved Nursing Assistant Training Program. (Complete the training info section below)
	<b>E3</b> - Challenger. You have never been trained as a nursing assistant in Florida or any other state and have no nursing assistant experience.
	<b>E4</b> - Other Nursing Training.
	<b>E5</b> - Lapsed Nursing Assistant.

**Training Information**

(This section must be completed if the applicant has selected Training Route E1 or E2.)

Name of School or Facility	
Address of School or Facility	
Training/Proposed Completion Date: ___/___/___	Training Program Code: _____

**Criminal History (Required)**

<input type="checkbox"/> Yes*  <input type="checkbox"/> No	Have you EVER been convicted of, or entered a plea of guilty, nolo contendere, or no contest to, a crime in any jurisdiction other than a minor traffic offense? You must include all misdemeanors, felonies, and juvenile offenses, even if adjudication was withheld. Driving under the influence (DUI) or driving while impaired (DWI) is not a minor traffic offense for purposes of this question.  *If you answered YES, please be prepared to create a typed or printed letter with arrest dates, city, state, charges and final dispositions and be prepared to send it to the Board Office upon request. (Do not send this information with your application for examination.)
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### Disciplinary History (Mandatory)

<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been denied or is there now any proceeding to deny your application for any healthcare certification to practice in Florida or any other state, jurisdiction or country?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever had disciplinary action taken against your certification to practice any healthcare-related profession by the licensing authority in Florida or in any other state, jurisdiction or country?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever surrendered a certification to practice any healthcare-related profession in Florida or in any other state, jurisdiction or country while any such disciplinary charges were pending against you?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any disciplinary actions pending against your certification?

### Residency (Mandatory)

Applicants must attest to the residency requirement for background screening pursuant to s. 464.203, F.S.

<input type="checkbox"/>	I have been a resident of Florida continuously during the last five years. (Select FDLE Screening in chart below)
<input type="checkbox"/>	I have not lived in Florida continuously during the last five years. (Select FBI Screening in chart below) Date moved to Florida: ____/____/____.

**Fingerprinting Note:** Candidates who have lived in Florida less than five years must have electronic fingerprint scanning completed **after** submitting this application. See Page 6 of this Bulletin for more information on fingerprint scanning.

### Test Site Information

Please check one of the following options for testing.

<input type="checkbox"/>	<b>In-facility Testing:</b> My employer or training program is scheduling my testing and I will take the exam(s) at their location. (Facilities that have not previously tested with Prometric must go to <a href="http://www.prometric.com/NurseAide/FL">www.prometric.com/NurseAide/FL</a> or call 888.277.3500 for an In-Facility contract and request form.)	
<input type="checkbox"/>	<b>Regional Test Site:</b> I am applying to test at a Regional Test Site. My preferred test site is indicated to the right. However, I understand that I will be assigned to the <b>first available</b> testing appointment in my area.	Test Site Code: _____.

### Testing/Retesting Fees

<input checked="" type="checkbox"/>	Exam (Check all that apply)	Fee	Total
	Clinical Skills and Written (both in English)	\$93	\$
	Clinical Skills and Written Audio (both in English)	\$97	\$
	Clinical Skills (English) and Written (Spanish)	\$93	\$
	Clinical Skills (English) and Written Audio (Spanish)	\$97	\$
	Written (English)	\$36	\$
	Written Audio (English)	\$40	\$
	Written (Spanish)	\$36	\$
	Written Audio (Spanish)	\$40	\$
	Clinical Skills (English)	\$57	\$
<input checked="" type="checkbox"/>	Background Screening (Check only one)	Fee	
	FDLE Screening (resided continuously in Florida during the last five years)	\$34	\$
	FBI Screening (resided in Florida less than five years)	\$53.25	\$
		<b>Total Fee</b>	<b>\$</b>

Fees may be paid by cashier's check, company check, money order, MasterCard or Visa. Make checks payable to Prometric. **Personal checks and cash are not accepted. Fees are not refundable or transferrable.** To pay by **credit card**, complete the information below:

Card Type (Check One) <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa	Card Number	Expiration Date
Name of Cardholder (Print)	Signature of Cardholder	

### Applicant's Affidavit (must be completed by all applicants)

I certify that I am the applicant who is referred to in this application and that the statements herein are true. I understand that the results from my Competency Examination will be released to my nursing home employer or training program. I also understand that if any information given is not true and correct, my status as a certified nursing assistant may be jeopardized. I have read and understand the information in this Candidate Information Bulletin.

Applicant's Signature

Date

PROMETRIC  
1260 Energy Lane  
St. Paul, MN 55108  
888.277.3500

**FIRST  
CLASS  
MAIL**