

**NorthWest Arkansas Community College**  
**Certificate of Proficiency Nursing Assistant**

Last Name			First Name	Mid. Initial	Student ID Number	
			DATE COMPLETED	COLLEGE OR UNIVERSITY	COURSE NUMBER	GRADE
<b>Health Professions</b>						
AHSC	1213	Certified Nursing Assistant				
AHSC	1223	Patient Care Assistant Plus				
AHSC	1123	Electronic Health Records				
AHSC	1001	Medical Terminology				
<b>Electives</b>						
<b>(Choose 2 for 6 hours)</b>						
CISQ	1103	Introduction to Computer Information				
EMTA	1013	First Responder				
ENGL	1013	English Composition				
PSYC	2003	General Psychology				
PSYC	2103	Human Growth & Development				

\*Check the College Catalog for Prerequisites/Co-requisites Before Enrolling in this Class.

7 credit hours are required in residence at NWACC to graduate

My advisor has explained this degree plan and I understand that I am responsible for following the above guidelines as defined in the college catalog for course prerequisites.

Auditor:

Date:

Student's Signature:

\_\_\_\_\_

Date:

\_\_\_\_\_