

**FY25 (2024-25) Health Sciences
Student Caregiver & Criminal Background Checks (CBCs)**

Please see page 2 for CBC requirement and timeline for each HS program

Students are responsible for all CBC costs (subject to change):

- Wisconsin Caregiver Background Check is required for all HS programs: \$10
- Verified Credentials National Criminal Background Check is required for programs designated on page 2: \$68
- Minnesota Caregiver Background Check as designated by program instructor/advisor: \$44 + \$10.50 for fingerprinting/photograph
- Additional State Background Checks as designated by program instructor/advisor: cost varies by state

To complete the WI Caregiver Background check: Complete the attached Student ID Form and State of Wisconsin Background Information Disclosure form. Send both documents with a check for \$10 **OR** a copy of your entire WI Caregiver Background Check (complete BID, DOJ and DHS results) run by a Northwood Tech employee (within the last 90 days) to campus designee listed below.

IF REQUIRED to complete the National Criminal Background Check: Open the Verified Credentials, LLC document provided on your program Orientation webpage and click on the GET STARTED NOW link.

IF REQUIRED to complete a MN Caregiver Background check: Complete the attached Student ID Form and the MN DHS CFC BGS Data Collection Form. Please note you will also need to provide an [acceptable form of ID](#) that matches the address/information provided on the Data Collection Form. As required, the MN DHS Background Study Notice of Privacy Practices is also attached for your reference. Send the Student ID, Data Collection Form, and acceptable form of ID with a check for \$44 to campus designee listed below:

<p>Ashland Cassie Vesey Northwood Technical College 2100 Beaser Ave Ashland, WI 54806 715-685-3068 cassie.vesey@northwoodtech.edu</p>	<p>New Richmond Sherry Rehnelt Northwood Technical College 1019 S Knowles Ave New Richmond, WI 54017 715-752-8136 sherry.rehnelt@NorthwoodTech.edu</p>
<p>Rice Lake Ashley Smith Northwood Technical College 1900 College Dr Rice Lake WI 54868 715-788-7095 ashley.smith@NorthwoodTech.edu</p>	<p>Superior Nikki Kruger Northwood Technical College 600 N 21st St Superior, WI 54880 715-319-7325 nikki.kruger@NorthwoodTech.edu</p>

**REQUIRED CBCs MUST BE SUBMITTED
BY DATE DESIGNATED ON PAGE 2**



Health Sciences
Student Identification (ID) Information for Background Checks
(please print legibly)

Name _____ Student ID # _____

Primary Phone Number _____ Alternate Phone Number _____

Northwood Tech Email Address _____

Social Security Number (required for WI Caregiver Background Check) _____

Race (required for WI Caregiver Background Check) _____ White _____ Black
_____ Asian or Pacific Islander _____ American Indian or Alaskan Native _____ Unknown

Program

Instructor/Advisor will inform students if MN and/or other state background check is required.

_____ **Dental Assistant:** WI & National CBCs required prior to entry into the DA program; Policy DA-07

_____ **Health Information Technology:** WI & National CBCs required before the start of the fourth semester of coursework; Policy HIT-07

_____ **Medical Assistant:** WI & National CBCs required prior to entry into the MA program, and again 90 days prior to MA Practicum; Policy MA-12

_____ **Nursing Assistant:** WI CBC required prior to entry into the NA program

_____ **Nursing-Associate Degree:** WI, MN (Superior students only), & National required prior to entry into the ADN program; Policy ADN C-02

_____ **Occupational Therapy Assistant:** WI CBC required between August 1 and September 1 of the year you are admitted to (514) courses; Policy OTA-29

_____ **Pharmacy Technician:** WI & National CBCs required prior to entry into the PharmTech program; Policy PhT-05

_____ **Phlebotomy:** WI CBC required prior to entry into the Phlebotomy program; Policy Phleb-04

Student Signature _____ Date _____
(typed signature is acceptable)

This information is considered private and will be kept in a secured electronic file.

**CFC BGS DATA COLLECTION FORM
AFC/FADS DATA COLLECTION FORM**

Please note that all of the following information (unless otherwise indicated) is required by the Bureau of Criminal Apprehension (BCA) or Federal Bureau of Investigations (FBI). * Indicates that the field is optional.

Please check one of the following:

Applicant/License-Holder Household Member Other

First Name		Middle Name		Last Name	
Maiden Name, Prior Names and Aliases					
Date of Birth		* Race <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Native American <input type="checkbox"/> Unknown		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown <input type="checkbox"/> Other	
Eye Color		Hair Color		Height	Weight
State or Country of Birth				Telephone #	
Current Street Address				City	
State	Zip	County	Email Address		
Driver's License # or MN State-issued ID #		Expiration Date of ID		* Social Security #	

Have you lived in any U.S. state other than Minnesota in the last 5 years? **No** **Yes**

If yes, please list all cities and states where you lived in the last 5 years:

City:	State:	Year From:	Year To:

ACKNOWLEDGMENT

I acknowledge that I have read this form and that I have been notified of and understand that the Minnesota Department of Human Services needs this information to complete the background study.

Signature

Signature of Parent or Guardian (Required for Minors Only)

Date

This area is for agency use only

To ensure accurate processing of the components of NETStudy 2.0 that rely on name and date of birth for matching, it is important that you verify the identity of the subject of the background study. The subject's name and date of birth on this form must match the information on the subject's identification (ID). A list of acceptable forms of ID may be found on the DHS public website.

Identification of the subject has been verified.

For family CFC only: If the individual has lived outside of the state within the last five years, complete the Child Abuse Neglect Registry (CANR) process in the NETStudy 2.0 system.

Attachment – Background Study Notice of Privacy Practices