



NURSING PROGRAM

HEALTHCARE EXPERIENCE VERIFICATION FORM

Bellingham Technical College requires applicants to the Registered, LPN-RN & Practical Nursing Programs to have healthcare experience. Experience in healthcare may be demonstrated by certification or training in an Allied Healthcare Field* or other experience to be evaluated on a case by case basis. The Nursing Program will review and either approve or deny an applicant's healthcare experience.

This form must be approved prior to applying to the Nursing Program!

This form is required for all applicants, whether or not they completed Allied Health training at BTC.

Instructions for filling out this form and submitting it electronically are on the reverse.

Email completed form and required attachment to nursing@btc.edu (preferred) OR mail to BTC Nursing Program, 3028 Lindbergh Ave #HC 206, Bellingham, WA 98225.

Students will be notified by email when program evaluation is complete and should expect 10 days for processing.

Student Full Name (please print): _____

List any previous names: _____

SID: _____ **Date of Birth:** _____ **Phone Number:** _____

Email Address: _____

Type of Healthcare Experience (choose only **one** of the following):

☐ **Certification in Allied Healthcare Field:** attach printout from the [Washington State Dept. of Health \(DOH\) website](https://www.doh.wa.gov/Information/News/Pages/20200501)
PDF scans or paper copies only. JPG files and photos will not be accepted.

Credential Type: _____

State/Jurisdiction: _____ Credential #: _____

Credential Status: _____ Expiration Date: _____

☐ **Training in an Allied Healthcare Field:** attach unofficial transcripts as proof of successful completion of training
PDF scans or paper copies only. JPG files and photos will not be accepted.

☐ **Other:** attach a written explanation of 500 words or less detailing how your experience meets the requirements

**Allied healthcare fields include but are not limited to: Nursing Assistant, Medical Assistant, Paramedic, Emergency Medical Technician, Radiologic Technologist, Surgical Technologist, Home Care Aid, Emergency Medical Responder, or Healthcare Specialist.*

Student Signature: _____

Date: _____

For Official Use Only

☐ No Enforcement Action Taken

☐ Approved by Nursing Program

☐ Denied by Nursing Program

Nursing Program Representative

Signature

Date

Bellingham Technical College does not discriminate on the basis of race, ethnicity, creed, color, sex, gender identity or expression, citizenship or immigration status, national origin, age, religion, disability, veteran or military status, sexual orientation, genetic information, the presence of any sensory, mental, or physical disability or the use of a trained dog guide or service animal by a person with a disability, pregnancy, marital status, or any other characteristic protected by federal, state, or local law in its programs, activities, and services. The following person has been designated to handle inquiries regarding the non-discrimination policies: Director for Human Resources, 360.752.8354, or hr@btc.edu. For Title IX/Section 504 compliance, contact: Vice President of Student Services, 360.752.8440, or title9@btc.edu. Mailing address: 3028 Lindbergh Avenue, Bellingham, WA 98225. BTC publications are available in alternate formats upon request by contacting the Accessibility Resources office at 360.752.8576.

Version date: December 2024

Instructions for filling out and signing this form*

Using an app or software download

- Get an app or software download: **Adobe Reader** or **Adobe Fill and Sign** mobile app (free software downloads or app for phone or tablet)
 - **Mobile app:** go to the Google Play or App Store and search for Adobe Reader or Adobe Fill and Sign. You only need the free versions, you will need to provide an email and agree to the terms.
 - **For PC or Mac:** go to <https://acrobat.adobe.com/us/en/acrobat/pdf-reader.html> or <https://get2.adobe.com/reader/otherversions/>
- Open the form using the app or software. Fill in and sign the form. Save a copy to your computer or phone then email to BTC to submit the completed form.
- Additional apps:
 - iPhone/iPad: pdfFiller, SignNow, SignEasy
 - Android: Fillr, WPS Fill & Sign, Fill and Sign PDF forms

Using a scanner app to email printed form

- Download a scanner app from Google Play or App Store
 - iPhone/iPad apps: Adobe Scan, Document Scanner, CamScanner, Scanner for me, Microsoft Office Lens (there are lots of apps to choose from)
 - Android apps: Simple Scan, Adobe Scan, Document Scanner, CamScanner, Microsoft Office Lens (there are lots of apps to choose from)
- Print form, fill in and sign.
- Scan the completed form using the app, convert it to a PDF (preferred over JPEG) and email it to BTC to submit the form.

Do:

- Do use an app or software to fill and sign your form electronically.
- Do save the form on your computer, phone or tablet so you have a copy for your records.
- If you prefer to print the form and fill it out, do use a scanner app to create a PDF that can be emailed as an attachment.

Don't:

- Do NOT take a picture of your printed and filled out form and email the picture. Pictures do not email well in a format that allows BTC staff to process them. You will be asked to resend your form.
- Do NOT fill in the form using your browser only. When you email the form, it will not come through filled in or signed.

*These instructions are provided for your information only and BTC does not endorse or receive monetary compensation from any software company or app listed here. This information is provided to assist students to complete the form electronically or to print, scan and email the form.