Georgia Nurse Aide Program

APPLICATION FOR REGISTRATION BY COMPETENCY EXAMINATION

PLEASE PRINT LEGIBLY — USE INK ONLY

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Fees may be paid only by either a certified check, company check, money order, or Pearson VUE voucher made payable to "NACES Plus Foundation, Inc." *Personal checks, cash, or credit card payments are not accepted.*

Your application, copy of training program certificate (if applicable), a copy of your U.S. Government-issued Social Security Card, photo I.D. (or Military I.D.), and examination fees must be mailed to:

NACES Plus Foundation, Inc., 8501 North Mopac Expressway, Suite 400, Austin, Texas 78759

NOTE: If you are requesting ADA accommodations, please submit all required documentation with this application.

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application is received after the three-year lapsed expiration date, the candidate must re-train and re-test under Eligibility Route E1.

	but have not worked	didate (who must test) — Applicants d as a nurse aide during the past 2 years (24 r		
	Care Facility).	Considiation to about		
	GMCF Approval To T	(in addition to above):		
	• •	n 10 of this application using the information	on provided in the GMCF Approval To	Test Letter.
10	Your Georgia Nurse Aide until training is complete.	ING PROGRAM INFORMATION (Training Program MUST complete this You must include a copy of your training of of training. If your training is more than	s section. Your Training Program in program completion diploma or certi	structor cannot sign this portior ficate. Training is only valid for
	Training Program Name	e		
	Training Program Numb	er: Training Prog	gram Completion Date:	
11.	EMPLOYMENT INFOR	MATION		
		oyed as a nurse aide, or have an offer for will be working as a nurse aide. If you alth care".		
	☐ Assisted Living	☐ Home Health	☐ Hospice	
	☐ Hospital	☐ Nursing Home	☐ Personal Care Home	
	☐ Private Duty	☐ Other		
	☐ Not currently emp	ployed in health care		
	Name of Employer/Facil	lity:		
	Address of Employer/Fa	cility:		
	Phone Number of Empl	oyer/Facility: AREA CODE		
12.	that all of the information pro	ENT AND SIGNATURE (All candidovided in this application is completely true atus and listing as a Nurse Aide, and may re	and correct. I understand that any info	rmation I give that is not true may
SIG	NATURE OF APPLICANT:		DATE:	
		MAILING INF	ORMATION	
	U MUST MAIL THE FOLL YS PRIOR TO YOUR REQ	OWING, TOGETHER IN ONE ENVELO		CES AT LEAST 12 BUSINESS
	☐ Your application			
		orgia Nurse Aide Training Program com g Program or LPN/RN program (if you		
	☐ Your 2 forms of iden	ntification		
	☐ A copy of your listin	ng on another state registry, if you selec	ted Eligibility Route E4	
	☐ Correct exam fees:	ie. certified check, money order, or co	ompany voucher	
ı		an Admission Ticket within te	. ,	iling your application

If you do not receive an Admission Ticket within ten (10) business days of mailing your application, call NACES at (866) 432-2865. NACES is not responsible for lost, misdirected, or delayed mail delivery.

If you cannot attend your scheduled exam date, you MUST call NACES at least five (5) business days before the test date to reschedule or you will forfeit your exam fees.

NACES Plus Foundation, Inc. 8501 North Mopac Expressway, Suite 400 Austin, Texas 78759

State of Georgia County Codes

001	A = = I! =	041	D. J.	001	1.4	121	D:-I
001	Appling	041	Dade	081	Jefferson	121	Richmond
002	Atkinson	042	Dawson	082	Jenkins	122	Rockdale
003	Bacon	043	Decatur	083	Johnson	123	Schley
004	Baker	044	DeKalb	084	Jones	124	Screven
005	Baldwin	045	Dodge	085	Lamar	125	Seminole
006	Banks	046	Dooly	086	Lanier	126	Spalding
007	Barrow	047	Dougherty	087	Laurens	127	Stephens
800	Bartow	048	Douglas	088	Lee	128	Stewart
009	Ben Hill	049	Early	089	Liberty	129	Sumter
010	Berrien	050	Echols	090	Lincoln	130	Talbot
011	Bibb	05 I	Effingham	091	Long	131	Taliaferro
012	Bleckley	052	Elbert	092	Lowndes	132	Tattnall
013	Brantley	053	Emanuel	093	Lumpkin	133	Taylor
014	Brooks	054	Evans	094	Macon	134	Telfair
015	Bryan	055	Fannin	095	Madison	135	Terrell
016	Bulloch	056	Fayette	096	Marion	136	Thomas
017	Burke	057	Floyd	097	McDuffie	137	Tift
018	Butts	058	Forsyth	098	McIntosh	138	Toombs
019	Calhoun	059	Franklin	099	Meriwether	139	Towns
020	Camden	060	Fulton	100	Miller	140	Treutlen
021	Candler	061	Gilmer	101	Mitchell	141	Troup
022	Carroll	062	Glascock	102	Monroe	142	Turner
023	Catoosa	063	Glynn	103	Montgomery	143	Twiggs
024	Charlton	064	Gordon	104	Morgan	144	Union
025	Chatham	065	Grady	105	Murray	145	Upson
026	Chattahoochee	066	Greene	106	Muscogee	146	Walker
027	Chattooga	067	Gwinnett	107	Newton	147	Walton
028	Cherokee	068	Habersham	108	Oconee	148	Ware
029	Clarke	069	Hall	109	Oglethorpe	149	Warren
030	Clay	070	Hancock	110	Paulding	150	Washington
031	Clayton	071	Haralson	111	Peach	151	Wayne
032	Clinch	071	Harris	112	Pickens	151	Webster
033	Cobb	073	Hart	113	Pierce	153	Wheeler
033	Coffee	073	Heard	113	Pike	153	White
035	Colquitt	075	Henry	115	Polk Pulaski	155	Whitfield
036	Columbia	076	Houston	116		156	Wilcox
037	Cook	077	Irwin	117	Putnam	157	Wilkes
038	Coweta	078	Jackson	118	Quitman	158	Wilkinson
039	Crawford	079	Jasper	119	Rabun	159	Worth
040	Crisp	080	Jeff Davis	120	Randolph	222	Out of state