

# 2020-21 DA Student Checklist

ITEM	GIVE INFO TO	DUE DATE	DATE COMPLETED
WI Caregiver Background ✓	See cover sheet	August 20, 2020	√ _____
MN Caregiver Background ✓ (if needed)	See cover sheet	August 20, 2020	√ _____
National Criminal Background ✓	DA Program Director / Submit to Student Passport	August 20, 2020	√ _____
Copy of CPR certification card (front & back)	DA Program Director / Submit to Student Passport	August 20, 2020	√ _____
Completed Health Form	DA Program Director / Submit to Student Passport	August 20, 2020	√ _____
Copy of all required immunizations	DA Program Director / Submit to Student Passport	August 20, 2020	√ _____
High School Transcript	Student Services	August 20, 2020	√ _____
Dental Office Visit	DA Program Director	August 20, 2020	√ _____
Dental Assistant Permission form	DA Program Director	August 20, 2020	√ _____
Confidentiality Statement form	DA Program Director	August 20, 2020	√ _____
Student Information form	DA Program Director	August 20, 2020	√ _____
Functional Abilities	DA Program Director	August 20, 2020	√ _____

**CPR COURSE AVAILABILITY:** Visit the [WITC website](#)