UTAH NURSING ASSISTANT REGISTRY

550 East 300 South
Kaysville, Utah 84037
Phone: (801) 547-9947
Fax: (801) 593-2584

Training Completion List

I certify the following students have successfully completed a minimum of 80 hours of STATE APPROVED NURSING ASSISTANT TRAINING provided at this institution.

NAME	SS #

Start Date | **Completion Date**

Program Coordinator | **Instructor** | **Teaching Institution**

Please return to our office at the time that the Student Application to Test is signed and given to the student. This form must be signed by the Program Coordinator and Instructor or it will be returned. No stamped signatures will be accepted.

Any student application and fees will be returned if the UNAR has not received the Training Completion List.