Jacksonville State University

Please return the following items to:

**College of Nursing**  
**ATTN: Amber Law**  
Jacksonville State University  
700 Pelham Road N  
Jacksonville, AL 36265

Please submit the items listed below. If you have any questions please contact Amber Law by calling 256-782-8426 or by email at anlaw@jsu.edu  
Fax number is ATTN: Amber at 256-782-5406.

- ______ Physical Health Appraisal information  
- ______ Hepatitis B immunizations  
- ______ Current TB test (with evidence of a 2 Step TB test in the past or continuous annual TB testing from multiple years)  
- ______ Varicella (immunity)  
- ______ MMR (immunity)  
- ______ TD/TDAP vaccination  
- ______ Release of Liability form  
- ______ Letter of Understanding (from Student handbook)  
- ______ Drug Screen Consent form  
- ______ CPR certification documentation  
- ______ HIPAA statement  
- ______ Complete PSI background check instructions (step by step instructions on MSN Student web page)  
- ______ Letter of Understanding (from background check)  
- ______ Health Insurance Verification form AND copy of Health insurance card. (Each student must submit documentation of current health insurance coverage. *Please be sure to fill in the section regarding the Semester you are enrolled in*)

- ______ Malpractice Insurance (*If you would like to purchase this through the College of Nursing, submit a check payable to Jacksonville State University in the amount of $15.00. If coverage is provided through a personal policy, submit a copy of the face sheet specifying coverage in a student role*)