

## Requirement Explanation

Package Name	Category Name	Student Notes	URL	Item Name	Field Name
Adult Learner - Pharm Tech	Photo Identification and Social Security Card	<p>You must submit your current government or school issued photo ID and your social security card.</p> <ul style="list-style-type: none"> <li>Acceptable alternative photo identification include: Current Passport, U.S. state issued Driver’s License, U.S. VISA, U.S. Permanent Resident card, or U.S. Citizenship and Immigration Services (USCIS) photo identification.</li> <li>Acceptable alternatives to Social Security Card include: If you do not have a Social Security card, please provide Department of the Treasury Internal Revenue Service Individual Taxpayer Identification Number (ITIN) letter or card, U.S. Citizenship and Immigration Services (USCIS) identification card, or Medicare Card with SSN.</li> </ul>	<a href="http://forms.complio.com/ReviewStandards/32768.pdf">http://forms.complio.com/ReviewStandards/32768.pdf</a>	Government or School issued photo ID	Document
				Social Security Card	Document
	Age verification	You must be at least 17 years and 9 months old for this program.		Date of Birth	Date of Birth
	High School Diploma, GED or College Transcript	You must submit your high school diploma, GED or College Transcript here.		High School Diploma, GED or College Transcript	Document
	Reading and Math Comprehension	<p>You must upload one Reading and one Math test from the following:</p> <p>Reading Test:</p> <ul style="list-style-type: none"> <li>TSIA 2.0 ELAR with score of 938 or higher</li> <li>TSIA 1.0 reading test with score of 342+ or Above</li> <li>STAAR EOC with a score of 2 or higher</li> <li>College transcript indicating English Composition or English 1301</li> <li>Diploma for associates degree or higher</li> <li>TABE Reading Level M 442-575+ or Above</li> <li>Texas Bridge Certificate Reading</li> </ul> <p>Math Test:</p> <ul style="list-style-type: none"> <li>TABE Math Level A 537-800+ or Above</li> <li>TSIA 2.0 Math 938 or Above</li> <li>TSIA 1.0 Math 342 or Above</li> <li>Transcript with College Level Math</li> <li>Texas Bridge Certificate Math</li> </ul>		TSIA 1.0 Reading Test	Document
				Transcript with English 1301	Document
				TSIA 2.0 ELAR	Document
				STAAR EOC	Document
				Diploma for associates degree or higher	Document
				TABE Reading Level M 442-575+ or Above	Document
				TABE Math Level A 537-800+ or Above	Document
				TSIA 2.0 Math 938 or Above	Document
				TSIA 1.0 Math 342 or Above	Document
				Transcript with College Level Math	Document
	Texas Bridge Certificate Reading	Document			
Texas Bridge Certificate Math	Document				
CPR	<p>You must submit your valid CPR card here. The American Heart Association (AHA) Basic Life Support (BLS) for Healthcare Providers CPR card is preferred but not required.</p>	<a href="http://forms.complio.com/ReviewStandards/32.pdf">http://forms.complio.com/ReviewStandards/32.pdf</a>	Valid CPR Card (BLS Provider preferred)	Document	
				Date	
				Expiration Date	



Adult Learner - Pharm Tech	Hepatitis B	<p>You must submit A OR B:</p> <p>A) 3 doses of the Hepatitis B Vaccine, or the 2 dose Heplisav series.</p> <p>B) Positive Hepatitis B Titer.</p> <p>If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select"" Request an Immunization Record"" towards the bottom of the page.</p> <p><a href="https://www.dshs.texas.gov/immunize/immtrac/clients.shtm">https://www.dshs.texas.gov/immunize/immtrac/clients.shtm</a></p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a></p>	<a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a>	Hepatitis B Dose 2	Document
					Date
				Hepatitis B Dose 3	Document
					Date
				Hepatitis B Titer	Document
					Results
					Date
	Hepatitis B Dose 1	Document			
		Date			
	Hepatitis B Heplisav Dose 1 of 2	Document			
		Date			
	Hepatitis B Heplisav Dose 2 of 2	Document			
		Date			
MMR	<p>You must submit A OR B:</p> <p>A) 2 doses of the MMR Vaccine.</p> <p>B) Positive titers for Measles, Mumps, and Rubella.</p> <p>If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select"" Request an Immunization Record"" towards the bottom of the page.</p> <p><a href="https://www.dshs.texas.gov/immunize/immtrac/clients.shtm">https://www.dshs.texas.gov/immunize/immtrac/clients.shtm</a></p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a></p>	<a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a>	Measles Titer	Document	
				Results	
				Date	
			Rubella Titer	Document	
				Results	
				Date	
			MMR Dose 2	Document	
				Date	
			MMR Dose 1	Document	
Date					
Mumps Titer	Document				
	Results				
	Date				
Tdap	<p>You must submit a Tdap from within the last 10 years.</p> <p>If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select"" Request an Immunization Record"" towards the bottom of the page.</p> <p><a href="https://www.dshs.texas.gov/immunize/immtrac/clients.shtm">https://www.dshs.texas.gov/immunize/immtrac/clients.shtm</a></p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a></p>	<a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a>	Tdap	Document	



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Adult Learner - Pharm Tech	Tdap	You must submit a Tdap from within the last 10 years.	<a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a>	Tdap	Date
		If you do not have a copy of your immunization records or your immunization		Expiration Date	
	Varicella	<p>You must submit A OR B OR C:</p> <p>A) 2 doses of the Varicella Vaccine.</p> <p>B) Positive Varicella Titer.</p> <p>C) Documentation of having had varicella from your physician.</p> <p>If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select "Request an Immunization Record" towards the bottom of the page.</p> <p><a href="https://www.dshs.texas.gov/immunize/immtrac/clients.shtm">https://www.dshs.texas.gov/immunize/immtrac/clients.shtm</a></p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a></p>	<a href="http://forms.complio.com/ReviewStandards/3.pdf">http://forms.complio.com/ReviewStandards/3.pdf</a>	Varicella Dose 2	Document
					Date
				Varicella Titer	Document
					Results
					Date
				Proof of disease	Document
		Date			
		Varicella Dose 1	Document		
		Date			
	Influenza	<p>You must submit a flu shot for the current season or electronically sign the below influenza declination form.</p> <p>Your flu shot must be received no earlier than 8/1 to be accepted for the current flu season.</p> <p>This category is not tracked between 5/1 and 9/30.</p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a></p>	<a href="http://odessacompliance.com/forms/OdessaFluDeclination.pdf">http://odessacompliance.com/forms/OdessaFluDeclination.pdf</a> , <a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a>	Flu Shot	Document
					Date
				Expiration Date	
Flu Declination				Document	
				Date	
				Expiration Date	
	Complete Form				
Meningitis	<p>If you are 21 or under you must submit one dose of the meningitis vaccination.</p> <p>If you do not have a copy of your immunization records or your immunization records do not meet the below minimum review standards, and you have attended public school in Texas, an acceptable version of your records is available to all students under the age of 26 on the Texas Immunization Registry ImmTrac2 website. To access, click the link below and then select"" Request an Immunization Record"" towards the bottom of the page.</p> <p>This might also be documented on your immunization record as MCV4 or Menactra</p> <p><a href="https://www.dshs.texas.gov/immunize/immtrac/clients.shtm">https://www.dshs.texas.gov/immunize/immtrac/clients.shtm</a></p> <p>To see what is required on your documentation, please see <a href="http://forms.complio.com/ReviewStandards/1.pdf">http://forms.complio.com/ReviewStandards/1.pdf</a></p>		Meningitis Dose	Document	
				Date	



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Tuberculosis	<p>If you test negative for tuberculin exposure, you must submit a negative PPD skin test, or an IGRA (QuantiFERON OR T-Spot) blood test each year.</p> <p>If you complete annual TB test through your healthcare industry employer, you may submit a record of your two most recent negative annual TB tests that dated within two years from today's date from your employer as an alternative to the PPD or IGRA.</p> <p>If you test positive for tuberculin exposure, you must submit a positive test, along with a negative chest x-ray from the last 3 years and a TB clearance letter from the last 1 year. If you do not have a positive test to submit, you may submit a letter from your physician indicating that you need a chest x-ray for tuberculosis screening.</p>	<a href="http://odessacompliance.com/forms/Odessa2StepPPDExplanation.pdf">http://odessacompliance.com/forms/Odessa2StepPPDExplanation.pdf</a> , <a href="http://forms.complio.com/ReviewStandards/464.pdf">http://forms.complio.com/ReviewStandards/464.pdf</a>	PPD Step 1	Document
				Read Date
				Implant Date
				Result
			PPD Step 2	Document
				Read Date
				Implant Date
				Result
			Annual PPD	Document
				Expiration Date
				Read Date
				Implant Date
				Result
			TB Clearance Letter	Document
	Date			
	Expiration Date			
Chest X-Ray	Document			
	Date			
	Expiration Date			
	Result			
Initial QuantiFERON TB Gold Test / T-Spot	Document			
	Date			
	Result			
Annual QuantiFERON TB Gold Test / T-Spot	Document			
	Date			
	Expiration Date			
	Result			
Letter indicating chest x-ray is needed	Document			
Healthcare Employer TB Screening Record	Document			
	Date			
	Expiration Date			
Background Check	You must order a background check from American DataBank. Once your search is complete, it will be automatically uploaded here for you.		American DataBank Background Check	Document
				Date
				Results
Drug Screening	You must order a drug screen from American DataBank. Once complete, it will be automatically uploaded here for you.		American DataBank Drug Screen	Document



Adult Learner - Pharm Tech	Drug Screening	You must order a drug screen from American DataBank. Once complete, it will be automatically uploaded here for you.		American DataBank Drug Screen	Date
					Expiration Date
					Results
	CE Health Careers Registration Form	You must electronically complete the CE Health Careers Registration Form.	<a href="http://odessacompliance.com/forms/HealthCareersRegistrationForm2022.pdf">http://odessacompliance.com/forms/HealthCareersRegistrationForm2022.pdf</a> , <a href="http://odessacompliance.com/forms/HealthCareersRegistrationForm2022_CPF.pdf">http://odessacompliance.com/forms/HealthCareersRegistrationForm2022_CPF.pdf</a>	CE Health Careers Registration Form	Document
					Date
					Complete Form
	Documents to Review	<p>You must acknowledge that you have read the below required document information:</p> <ol style="list-style-type: none"> <li>1. Welcome Health Careers Students</li> <li>2. Wrangler Express Center Student Information</li> <li>3. Student Email Blackboard Login Information</li> <li>4. HC Student Contract - Classroom Guidelines</li> <li>5. Student Clinical Agreement Form</li> <li>6. Odessa-Complio-Student-User-Guide-05142020</li> <li>7. OC Training Waiver For Over 18 (Please use this form if you are 18 years and older) OR OC Training Waiver For Under 18 (Please use this form if you are 18 years and under)</li> <li>8. Health Careers Immunization Requirements</li> <li>9. Health and Wellness for Students - Insurance and Healthcare Providers Information</li> <li>10. Adult Model Release Information</li> <li>• 11. T-Shirt and Scrub Set Size: The sizes are unisex and may be larger than expected. To ensure the best fit, sample sizes can be tried on in advance at the Odessa College Continuing Education Building located at 2714 Robertson Ave Odessa, Texas 79764. If you have questions please call 432-335-6580 or email <a href="mailto:healthcareers@odessa.edu">healthcareers@odessa.edu</a>.</li> </ol>	<a href="http://odessacompliance.com/forms/OC_TrainingWaiverOfLiabilityAndHoldHarmlessAgreement.pdf">http://odessacompliance.com/forms/OC_TrainingWaiverOfLiabilityAndHoldHarmlessAgreement.pdf</a>	Welcome Health Careers Students Information	Document
					Date
					Have you read the Welcome Health Careers Students Information?
					Complete Form
				Wrangler Express Center Student Information	Document
					Date
					Have you read the Wrangler Express Center Student Information?
					Complete Form
				Student Email Blackboard Login Information	Document
				Date	
				Have you read the Student Email Blackboard Login Information?	
				Complete Form	
HC Student Contract - Classroom Guidelines	Document				
	Date				
	Have you read the Student Contract - Classroom Guidelines Information?				
	Complete Form				
Student Clinical Agreement Form	Document				
	Date				
	Have you read the Student Clinical Agreement Form?				
	Complete Form				
Odessa-Complio-Student-User-Guide-05142020	Document				



Adult Learner - Pharm Tech	Documents to Review	<p>You must acknowledge that you have read the below required document information:</p> <ol style="list-style-type: none"> <li>1. Welcome Health Careers Students</li> <li>2. Wrangler Express Center Student Information</li> <li>3. Student Email Blackboard Login Information</li> <li>4. HC Student Contract - Classroom Guidelines</li> <li>5. Student Clinical Agreement Form</li> <li>6. Odessa-Complio-Student-User-Guide-05142020</li> <li>7. OC Training Waiver For Over 18 (Please use this form if you are 18 years and older) OR OC Training Waiver For Under 18 (Please use this form if you are 18 years and under)</li> <li>8. Health Careers Immunization Requirements</li> <li>9. Health and Wellness for Students - Insurance and Healthcare Providers Information</li> <li>10. Adult Model Release Information</li> <li>• 11. T-Shirt and Scrub Set Size:</li> </ol> <p>The sizes are unisex and may be larger than expected. To ensure the best fit, sample sizes can be tried on in advance at the Odessa College Continuing Education Building located at 2714 Robertson Ave Odessa, Texas 79764. If you have questions please call 432-335-6580 or email <a href="mailto:healthcareers@odessa.edu">healthcareers@odessa.edu</a>.</p>	<a href="http://odessacompliance.com/forms/OC_TrainingWaiverOfLiabilityAndHoldHarmlessAgreement.pdf">http://odessacompliance.com/forms/OC_TrainingWaiverOfLiabilityAndHoldHarmlessAgreement.pdf</a>	Odessa-Complio-Student-User-Guide-05142020	Date Have you read the Odessa-Complio-Student-User-Guide-05142020? Complete Form		
	OC Training Waiver For Over 18	Document Date Have you read the OC Training Waiver? Complete Form					
	Health Careers Immunization Requirements	Document Date Have you read the Health Careers Immunization Requirements? Complete Form					
	Health and Wellness for Students - Insurance and Healthcare Providers Information	Document Date Have you read the Health and Wellness for Students - Insurance and Healthcare Providers Information? Complete Form					
	Adult Model Release Information	Document Date Have you read the Adult Model Release Information? Complete Form					
	T-Shirt and Scrub Set Size	Scrub Set Size					
	OC Training Waiver For Under 18	Document Date Have you read the OC Training Waiver?					
	Health Insurance	You may submit your current health insurance here.			<a href="http://forms.complio.com/ReviewStandards/4096.pdf">http://forms.complio.com/ReviewStandards/4096.pdf</a>	Health Insurance	Document



Adult Learner - Pharm Tech	FERPA Form	You may electronically complete the below FERPA form. This document will allow the College to provide information about the student to only those that are listed by the student, including parents.	<a href="http://odessacompliance.com/forms/FERPAForm.pdf">http://odessacompliance.com/forms/FERPAForm.pdf</a> <a href="http://odessacompliance.com/forms/FERPAFormCPF.pdf">http://odessacompliance.com/forms/FERPAFormCPF.pdf</a>	FERPA Form	Document
					Date
					Complete Form
	Certificate of Completion	This category is for your administration to complete once all course requirements have been met.		Certificate of Completion	Document
					Date
	Texas Pharmacy Technician Trainee Registration	Texas Pharmacy Technician Trainee Registration. URL: <a href="https://www.pharmacy.texas.gov/techtrainee.asp">https://www.pharmacy.texas.gov/techtrainee.asp</a>		Texas Pharmacy Technician Trainee Registration	Document
Issued Date					