HORIZON NURSING SERVICES 4765 S. Congress Ave • Lake Worth, FL 33461 Phone (561) 432-1932 Fax (561) 432-1492

Thank you for choosing our company. In order to register you <u>MUST</u> provide the following **ORIGINAL** documents:

(1) **PROFESSIONAL LICENSE OR 75 HOUR CERTIFICATE** (e.g. RN, LPN, HHA or CNA) HHA Certificates must have course curriculum attached.

(2) SOCIAL SECURITY CARD

(3) **WORK AUTHORIZATION** (e.g. US Passport, US Birth Certificate, Naturalization Certificate, Voter Card, Alien Card or Work Permit).

(4) **CPR CARD**, MUST be "hands-on" and from the American Red Cross, American Heart Association or Health and Safety Institute.

(5) DRIVER LICENSE, LEARNER LICENSE, ID CARD issued by the State of Florida.

(6) **AUTO INSURANCE** with your name listed on the card as an insured driver.

(7) **PROFESSIONAL LIABILITY INSURANCE** MUST be renewed each year.

(8) **PHYSICAL EXAM** MUST be less than 6 months old, state "appears to be free from communicable disease" and completed by a licensed MD, PA or ARNP. NO CHIROPRACTIC PHYSICALS.

(9) CAREGIVER LICENSE ISSUED BY PALM BEACH COUNTY (HHA and Companion only)

(10) HIV/AIDS CERTIFICATE (1 HOUR)

(11) ALZHEIMERS DISEASE AND RELATED DISORDERS (2 HOURS)

(12) ASSISTANCE WITH SELF ADMINISTRATION OF MEDICATIONS (2 HOURS)

(13) OSHA (2 HOURS)

(14) **LEVEL 2 BACKGROUND SCREENING** Must be completed prior to being registered and repeated every 5 years. We must be able to verify you have not had a 90 day break in service since the screening date. Otherwise, a resubmission is required.

(15) **DRIVING RECORD CHECK** to be completed initially and annually for all with a valid driver's license. This can be done through the company by paying the nonrefundable fee of \$12.00. If you already completed this you may provide us with the report and information to verify.

**APPLICATIONS ARE TAKEN ON THE FOLLOWING DAYS AND TIMES:

MONDAY - 11AM-3PM TUESDAY - 10AM-2PM WEDNESDAY- 10AM-2PM THURSDAY- 10AM-2PM