# Nursing Student Fingerprint Request Tip Sheet

## **General**

- Submit request one to two weeks prior to the start date of the clinical
- Turnaround time is approximately two to five business days
- To request fingerprinting for one student only send an email to <u>NCHSON@NationwideChildrens.org</u> with the student's information

## **Entering Information**

- From the Schools of Nursing website download "Studentroster"
- Follow the step-by-step instructions below
- Step 5 this will be the e-mail used to send the student's User ID information as well as any questions about the request itself – it is recommended that this be the students' clinical instructor's email
- Step 6 make sure there are no spaces before or after the names when entering; hyphens and periods are allowed
- Step 6 make sure the "last clinical day" entered is correct, this is when the User ID will expire
- Step 7 "Fingerprint Time" the date will automatically be scheduled for the "First Clinical Day", choose your preference of AM or PM. Fingerprints can be done by the instructor on the unit. Fingerprints are not required if students will not be administering medications. Choosing "Self-Enrollment" or "N/A" results in no fingerprinting appointment being scheduled.
- Step 8 be sure the file is saved in the ".xlsm", or "excel macro enabled workbook" format

#### Please Note

 Once the User IDs have been created you will receive an e-mail with a spreadsheet of the student's User IDs and unique initial password; if any corrections need to be made call the Help Center at 614-355-3750, do NOT submit a second "Nursing Student Epic Setup Form" for the same group

#### Instructions To Complete Student Roster

Steps	Instructions	Screenshots
Pre-re	quisite – Microsoft Excel 2007 or higher	·
1	Download and open the	
	'StudentRoster.xlsm' document	
2	In the document, if prompted with	$\sim$
	Security Warning, please click the	I Security Warning Macros have been disabled Enable Content
	'Enable Content'.	C3 $\bullet$ (a) $f_{x}$ In order to properly use this document, you must enable macros
		A B C D E F G H I J
	** Please Note **	1
	This one-time security prompt will	
	enable macro, which is a pre-	
	requisite to start working on	
	student roster document.	
3	Enter the number of students to be	В
	on the roster.	# Students 8
		School:
	Minimum – 1 ; Maximum - 200	
4	Select the school from the drop	# Students 8
	down list.	School: Ashland College of Nursing
		Ball State University Bohecker College
	** Please Note **	Instructor E-mail Address Capital University Central Ohio Technical College (COTC)
	There are more than 40 schools	Chamberlain College of Nursing Chamberlain College of Nursing
	listed in the drop-down menu.	Columbus School of Practical Norsing
	Please let us know if we have	
	missed any.	
5	Enter instructor's e-mail address.	
		Instructor E-mail Address
	** Please Note **	
	The system will send new student	
	account information to this email.	

6	For each student fill out a row with	Valid Entry
	the corresponding information	Midde
	(Name, First Clinical Day, Last	First Name Initial Last Name First Clinical Day Contact Valid Valid Valid Valid Valid Valid Valid Valid Valid
	Clinical Day). Data entered will be	Valid
	automatically validated for you.	Invalid Entry – Needs Correction
	E.g Date format – 07/01/2012	Middle agreen vaa dev, onerviser mereorio i beroossad
		First Name Initial Last Name First Clinical Day Kast Clinical Day
	** Please Note **	
	All records should contain a valid	Last Name Invalid - Check for spaces and symbols
	entry. Invalid entries will not be	
	accepted.	
7	For each student choose a	
	Fingerprint Time.	🗴 StudentiD 🔹 First Name 💌 Middle Initial 💌 Last Name 🔹 First Clinical Day 👻 Last Clinical Day 👻 Fingerprint Time
		Parallel and the second s
	** Please Note **	
	Choose a Fingerprint Time based on	8A-10A First Clinical Day
	clinical shift assignment; Self-	3P-5P First Clinical Day
	Enrollment if fingerprinting will be	Self-Enrollment on Unit
	done on the unit; N/A if students	N/A - Not Administering Medications
	are not administering medications.	
8	Save the file in the same format	
	(.xlsm), attach it to an e-mail & send	From -
	to:	To
		Send Send
	NursingStudentAccount@	Cc
	nationwidechildrens.org	