



Oklahoma State Department of Health

Nurse Aide Registry

PO Box 268816
Oklahoma City, OK 73126-8816
Ph. 405-426-8150
Fax: 405-900-7572

CMA ATTESTATION

Please be certain that the information you provide is correct. The Oklahoma State Department of Health may deny, suspend, withdraw or not renew the certificate of a medication aide who intentionally provides false or misleading information to a training program, a facility, or the Oklahoma State Department of Health.

OAC 310:677-13-8(a)(1-5). Certification and recertification

(a) The following, to be evidenced by the aide's attestation, are prerequisites for certification as a medication aide:

- 1) Minimum age: 18;
- 2) Minimum education: high school or general equivalency diploma;
- 3) Current Oklahoma nurse aide certification with no abuse notations;
- 4) Experience working as a certified nurse aide for six months; and
- 5) Physical and mental capability to safely perform duties.

Please indicate your answer by checking the correct box for each statement:

I am a minimum of 18 years of age.

☐ Yes

☐ No

I have a minimum education of high school or general equivalency diploma.

☐ Yes

☐ No

I have worked as a Certified Nurse Aide for at least 6 months.

☐ Yes

☐ No

I have a current Oklahoma nurse aide certification with no abuse notations.

☐ Yes

☐ No

I have the physical and mental capability to safely perform the duties.

☐ Yes

☐ No

By my signature below, I certify that the foregoing is true, correct and complete to the best of my knowledge and belief.

Typed or Printed Name of Applicant

Signature of Applicant

Social Security Number of Applicant

Date of Signature