RETURN TO

Kentucky Board of Nursing
DT Credentialing Program
312 Whittington Pky, Suite 300
Louisville, KY 40222-5172
502-429-3300 or 800-305-2042
Fax: 502-429-3311
Internet: kbn.ky.gov

LIST OF DIALYSIS TECHNICIAN TRAINING PROGRAM GRADUATES

THIS LIST IS DUE WITHIN THREE WORKING DAYS OF PROGRAM COMPLETION

Print clearly using capital letters and black ink.

DT Training Program Graduates

This information documents that all requirements for the Dialysis Technician Training Program were completed by the individual(s) listed below.

DT Program Name:

KBN Issued Program Code #: -

Actual Program Completion Date: - -

Total # Graduates Completing This Date:

Signature of Administrator/Other Representative

Facility Telephone #: - -

Date of Signature: - -

Alphabetical List of All DT Training Program Graduates

Use the space below to provide an alphabetical list of all persons who completed the program on the above listed date. (Give full name, including maiden name, and social security number.) Use the reverse side to continue the list as needed.

Full Name (Last, First, Middle Initial, Maiden)	Social Security #	KBN Use Only

9/2007