



D&S Diversified Technologies LLP

Headmaster LLP

HEADMASTER LLP

P.O. Box 6609, Helena, MT 59604-6609  
800-393-8664 – Fax: 406-442-3357  
www.hdmaster.com

*Innovative, quality technology solutions  
throughout the United States since 1985.*

## NEVADA NURSING ASSISTANT ACTOR / KNOWLEDGE TEST PROCTOR TRAINING AFFIDAVIT – FORM 1511 NV

I hereby swear that I, as a certified RN Observer testing Nurse Assistant candidates in the State of NEVADA, have reviewed the approved Nevada State Board of Nursing (NSBN) and HEADMASTER/D&S DT Actor training material with the Actor named herein and/or the approved Knowledge Test Proctor training material with the Knowledge Test Proctor named herein:

RN Observer Name (please print): \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

RN Observer SS#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

=====

I hereby swear that I, as a Nursing Assistant Skill Test Actor or Knowledge Test Proctor, have reviewed the Actor training material and/or the Knowledge Test Proctor training material with the RN Observer named above, and I understand and will abide by the NSBN & HEADMASTER/D&S DT material presented:

Actor Name (please print): \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Actor SS#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

-----

Knowledge Test Proctor Name (please print): \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Knowledge Test Proctor SS#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

(Fill in and sign both places if you are certifying as both an Actor **and** a Knowledge Test Proctor.)

**I UNDERSTAND THAT AS AN ACTOR OR KNOWLEDGE TEST PROCTOR, THAT I WILL NOT BE ABLE TO SIT FOR THE NURSING ASSISTANT TEST FOR SIX (6) MONTHS FROM THE DATE THAT I LAST WORKED AS AN ACTOR OR KNOWLEDGE TEST PROCTOR.**

\_\_\_\_\_  
ACTOR SIGNATURE DATE

\_\_\_\_\_  
KNOWLEDGE TEST PROCTOR SIGNATURE DATE

\_\_\_\_\_  
RN TEST OBSERVER SIGNATURE DATE