



Employer Process Guide

Thank you for being a participating employer in the NC Caregivers program. Please use this guide to enter NC Caregiver participating students' Employment Start and Employment End dates.

Participating students will have a 10 digit NC Caregivers ID number that begins with "NC". If a student you are trying to enter employment information for does not have an NC Caregivers ID number please direct the student to register for the NC Caregivers program at <https://www.nccaregivers.org>. or contact nccaregivers@uwosh.edu to obtain the student's ID number.

Please follow the steps in this guide to enter student information into the NC Caregivers database. If you have questions or need assistance please contact the NC Caregivers team at nccaregivers@uwosh.edu.

Entering Employment Start Dates

Step 1:

Navigate to https://oshkosh.co1.qualtrics.com/jfe/form/SV_06y6t7M2I7GGAw6

Step 2:

Enter the student's NC Caregivers student ID number in the *Student ID* text entry box and click the submit button.

The screenshot shows a survey form titled "NCCaregiver Program" with the sub-heading "05A-Employment Start (1st)". Below the title, it states "(Unless noted, all fields are required)" and "This is to be used for NCCaregiver participants who have been trained, tested and starting as a new Nurse Aid at your Nursing Home." The form includes a text entry box labeled "Student ID" with a green arrow pointing to it, and a blue "Submit" button with a green arrow pointing to it. The instruction "Please enter the NCCG Student ID Number. Make sure there are no spaces before or after this number." is located above the input field.



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Step 3:

Confirm the correct student name and NC Caregivers ID appears and that a training start and training end date appear.



NCCaregiver Program

05A-Employment Start (1st)

(Unless noted, all fields are required)

**This is to be used for NCCaregiver participants
who have been trained, tested and starting as a
new Nurse Aid at your Nursing Home.**

NCCG Student ID Number:

First Name:

Middle Initial:

Last Name:

Training Start Date:

Training End:

Note: There **must** be a training start and end shown above! If not, **STOP** and contact NCCaregivers@uwosh.edu

NCCG Student ID Number (**don't edit**):

If a training program start or end date does not exist, please contact nccaregivers@uwosh.edu, do not enter any additional information.



Step 4:

From the *Nursing Home* drop down, select the nursing home the student is employed with and enter the nursing home license number.

Nursing Home

Nursing Home License Number

Next enter your contact information in the *Program Contact Name*, *Program Contact Phone* and *Program Contact Email* text boxes.

Step 5:

Select the start date of the student’s employment from the calendar, confirm the information entered is correct and click the *Submit* button. A confirmation will be sent to the email entered in the *Program Contact Email* text box.

←| July 2021 |→

27	28	29	30	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31
1	2	3	4	5	6	7

07-12-2021

Submit

If you entered any information incorrectly please contact nccaregivers@uwosh.edu.



Entering Employment End Dates

Step 1:

Navigate to https://oshkosh.co1.qualtrics.com/jfe/form/SV_2mXZICaX2OQjoGi

Step 2:

Enter the student's NC Caregivers Student ID number in the *text entry box* and click the *submit* button.

The screenshot shows the NCCaregivers Program form for '06A-Employment Complete (1st)'. It includes the NC Caregivers logo, the program title, and a note that all fields are required unless noted otherwise. A specific instruction asks the user to enter the NCCG Student ID Number without spaces. Below this, there is a 'Student ID' label next to a text entry box. A green arrow points to the text entry box, and another green arrow points to a blue 'Submit' button.

Step 3:

Review the student's information at the top of the screen and confirm it is correct. If you do not see an entry for the *Nursing Home* or *Nursing Home License Number* fields please do not enter any information and contact nccaregivers@uwosh.edu.

This screenshot shows the student information section of the NCCaregivers Program form. It includes the NC Caregivers logo, the program title, and a note that all fields are required unless noted otherwise. The fields are: 'NCCG Student ID Number:', 'First Name:', 'Middle Initial:', and 'Last Name:'. Below these fields, there is a note: 'Make sure the following information matches your facility:' followed by 'Nursing Home:' and 'Nursing Home License Number:'.



Step 4:

Enter your email address in the *Email of the person submitting this record* text entry box and select whether the student was *Terminated or Separated Prior to 6 month retention* or select *Meets Requirement for \$500 Retention Bonus*. If you are unsure of which option to select please contact nccaregivers@uwosh.edu. Next select the date the student's six month retention or termination date from the *calendar*.

Email of the person submitting this record

Final Disposition

Terminated or separated prior to 6-month retention.

Meets requirement for \$500 Retention Bonus

Six Month Retention Date (select from calendar):

←	August 2021						→
1	2	3	4	5	6	7	
8	9	10	11	12	13	14	
15	16	17	18	19	20	21	
22	23	24	25	26	27	28	
29	30	31	1	2	3	4	
5	6	7	8	9	10	11	

08-04-2021



Step 5:

If the student was terminated or separated prior to 6 months please enter a reason the student failed to meet the 6 month requirement in the text box.

If known, enter reason employee failed to stay the six months.

Step 6:

Click the *Submit* button to submit the information to the database. You will receive a confirmation email at the address you entered in the *Email of the person submitting this record* text box.

Submit