# VIEWPOINT VP SCREENING

**XAVIER UNIVERSITY**

**Full Screening Package for :**
**BSN STUDENTS**

- **Background Check**
- **Drug Test**
- **Health Portal**
- **eLEARNING**

**①** Visit the following link to get started:
https://www.viewpointscreening.com/syo2/?s=5038754

**②** **Review Package.**

Once you click on the link, you will be taken to a package summary screen.

After you review your package and the disclaimer/ refund policy, click the button to acknowledge and hit **NEXT**.

## ③ Complete the APPLICANT INFORMATION and address sections as prompted.

### Do not place multiple orders

PLEASE do not place multiple orders. Your school is being charged for your order and will receive duplicate charges for multiple orders. If you are unsure if your order went through or not, please contact Student Support to confirm: studentsupport@viewpointscreening.com

Or use the instant Chat Mon-Fri EST 9 am - 5pm at viewpointscreening.com

### Applicant Information

Do not place an order on someone's behalf. This form must be filled out by the individual who requires Viewpoint Screening services.

First Name*:

Last Name*:

Middle Name:

Alias/Maiden Name 1:
Please Note: If you DO NOT have an alias name, leave this field blank. Only provide if you have used an alias within the last 7 years.

Alias/Maiden Name 2:
Please Note: If you DO NOT have an alias name, leave this field blank. Only provide if you have used an alias within the last 7 years.

Alias/Maiden Name 3:
Please Note: If you DO NOT have an alias name, leave this field blank. Only provide if you have used an alias within the last 7 years.

Social Security Number*:
Please Note: If you have not been issued a valid U.S. SSN then enter all zeros (000-00-0000) instead.

Date of Birth*: (mm/dd/yyyy)

Gender*: ○ Male   ○ Female

Phone Number*: (111-111-1111)

E-Mail Address*:
IMPORTANT Your email address will be your user name to log in. If you have placed a previous order, it is recommended to...

**Current Residential Address:**

Address*:

City*:

State or U.S. Territory*:
For an international address, select "International" and select the foreign Country name below.

Country*: United States

Zip Code*: ZIP Code Look Up Tool
Please Note: If you have an international address that does not require a Zip Code, please fill in "00000".

Changes cannot be made once you have placed your order. Please make sure you have provided correct information.

[Back] [Next]

## ④ Log In to Your Account

Once your order is complete, you will be taken to a screen like the one shown to the right.

Your username will be the email you used to set up your account. Change password here, and **it will log you in to the Viewpoint System.**

Thank you, your order has been submitted. Please be aware that this order does not contain a background check or a drug test.

You can now access your Health Portal to upload required documents.

You will be automatically logged into your account once you create/change your password.

RESET THE PASSWORD to your account associated with greys@anatomy.com

Passwords must contain one or more numbers, one or more special characters, and must be at least 12 characters long.

Enter your NEW password    ☐ Toggle Password
Confirm your NEW password

☐ I have provided a strong password that will be remembered

[Reset Password]

### Next Steps

- **HEALTH PORTAL**: Follow instructions on the following pages to view your Health Portal requirements (to upload documents).
- **DRUG TEST**: You will receive an email from Viewpoint Screening in 1-2 days with your registration information and your testing location.
- **eLEARNING**: You will receive an email with instructions and registration info 1-2 days after ordering.

**NEXT ➡**

## TO LOG IN

Go to
www.viewpointscreening.com

Right Hand Corner:

**LOG IN**

Username

Password

☐ Show Password

**Log In**

Forgot username and/or password?

Click here if you forget your username or password to request to have it emailed to you.

## View your HEALTH PORTAL REQUIREMENTS

Now you are logged into your Viewpoint Screening Account.
This is your **Dashboard**. Click "**Health Portal**" to VIEW requirements.

### Dashboard

Hello Doctor

VIEWPOINT SCREENING
A BETTER POINT OF VIEW

- Log Out
- **Dashboard**
- View Results
- Place New Order
- Health Portal
- Drug Testing

**••• Results**
You have NOT placed an order that includes results for a background check and/or drug test.
Select "Place New Order" only if you need a background check and/or drug test.

**••• Drug Testing**
You have NOT placed an order that includes a drug test.
Select "Place New Order" only if you need a drug test performed.

**••• Health Portal**
You have placed an order that in... ...alth Portal.
Click "Health ...rt" to ac... ...quirements and start uploading documents.
Uploa... ...y reviewed within 24 business hours.

**••• Health Portal Messages**

**••• eLearning**
You have NOT placed an order for eLearning.
Select "Place New Order" only if your school has requested that you complete eLearning through Viewpoint Screening.

**••• Fingerprinting**
You have NOT placed an order for a fingerprint background...
Select "Place New Order" only if your school has requested... Viewpoint Screening.

# HOW TO SEE REQUIREMENTS & UPLOAD DOCUMENTS

### Health Portal

ˇ Acceptable Files

**This section has FAQ's and helpful information - please READ IT - it will help!**

**File Size:** The maximum file size that can be uploaded is 10 mb. If your PDF file is larger than 10 mb, please click here to compress the file. If yo...

**File Types:** Image files (jpeg, bmp, gif and png) may be uploaded or a PDF file may be uploaded. Any other file types cannot be uploaded. If...

› What to Upload

› Overwrite/Remove a Document

› What Does "Series In Process" Mean?

To VIEW YOUR GUIDELINES (what to do) for a particular requirement, click on that item's "Requirement Description."

**CHES Form**
Requirement Description

**Due Date:**
08/01/2022

**Upload CHES Form Document**

**SAMPLE HEALTH PORTAL**

**OSHA / Bloodborne Pathogens Training**
Requirement Description

**Due Date:**
08/01/2022

...load OSHA / Bloodborne Pathogens Training Document

**CHES Form**
Requirement Description

**Due Date:**
08/01/2022

Submit a copy of the signed CHES Form

This is 'Form C' from the Workforce Development Board website: https://wdbscw.org/clinical-

Click here for the CHES form

**Select File**    **Close**

## Guideline Description Box

From here, you can:
- View the guidelines for what to upload
- See important instructions
- View & download school forms
- Upload a file to correspond with this requirement

## TIPS

- READ the full guideline to make sure you provide the right documentation.
- Viewpoint Screening does not create your requirements. The school communicates requirements to us. Our role is to verify documentation.
- Make sure your name is visible on the document (before and AFTER upload).

## HOW TO UPLOAD A DOCUMENT

When you have the correct document available, you are ready to upload it to your Health Portal.

CHES Form
Requirement Description

Due Date:
08/01/2022

Upload CHES Form Document

Submit a copy of the signed CHES Form

This is 'Form C' from the Workforce Development Board website: https://wdbscw.org/clinical-p

Click here for the CHES form

**CLICK either of these places to upload a document**

Select File     Close

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Once the document has been successfully uploaded, a new button will appear in the Row of the item with the DATE UPLOADED.

date upload column | document status column | action date column

| Hepatitis B Requirement Description | Click to view the document(s) you have uploaded | Upload New Hepatitis B Document | Document Uploaded On 04/07/22 | Document Not-Approved 04/08/22 | Next Action Date |
| MMR Requirement Description | Click to view the document(s) you have uploaded | Upload New MMR Document | Document Uploaded On 02/17/22 | Document Approved 02/17/22 | Next Action Date 01/01/2030 |

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## Is my document approved or not approved? ?

Documents are reviewed in 24 hours, or in 1 business day if submitted on weekends. Once reviewed, every document is either APPROVED (and marked green), or NOT APPROVED (and marked red), with a date stamp of review.

| Upload New Hepatitis B Document | Document Uploaded On 04/07/22 | Document Not-Approved 04/08/22 | Next Action Date |
| Upload New MMR Document | Document Uploaded On 02/17/22 | Document Approved 02/17/22 | Next Action Date 01/01/2030 |

**How can I see what I uploaded?**

Click to view the document(s) you have uploaded

Always CHECK what you uploaded.
✓ Is it the right doc?
✓ Is my name visible?

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If a document is NOT APPROVED, you will receive an email notifying you with the reason for the rejection. This information can also be located at the bottom of your Health Portal listings under "HEALTH PORTAL MESSAGES."

| Hepatitis B Titer Requirement Description | Click to view the document(s) you have uploaded | Upload New Hepatitis B Titer Document | Documen Uplo... 04/... | Docu... Pend Revi... |

### Health Portal Messages

**04/20/2022**
blah blkjzhdfk

**04/08/2022**
Hepatitis B - Please make sure to include your name on your document.

**07/22/2021**
You did not provide the correct document.

**12/01/2020**
CPR Certification - You have provided a non-BLS (Basic Life Support) certificate. Please submit a BLS certificate in order to gain approval.

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You will receive a general reminder email once weekly until you have reached full compliance for all of your documents.

## Support

✉️

Email us at:
studentsupport@viewpointscreening.com

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Instant Chat - bottom right hand corner at ViewpointScreening.com
Monday - Friday 9 am - 5pm EST.