

State of Illinois

Department of Financial and Professional Regulation Division of Professional Regulation

LICENSE NO.
043.113425

The person, firm, or corporation whose name appears on this certificate has complied with the provisions of the Illinois Statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below:

EXPIRES:
01/31/2025

LICENSED PRACTICAL NURSE



JESSICA A WARREN
22029 E COUNTY RD 1300 N
ASHMORE, IL 61912-9105



MARIO TRETO, JR.
SECRETARY

CECILIA ABUNDIS
DIRECTOR

The official status of this license can be verified at IDFPR.illinois.gov

17398667

Cut on Dotted Line

For future reference, IDFPR is now providing each person/business a unique identification number, 'Access ID', which may be used in lieu of a social security number, date of birth or FEIN number when contacting the IDFPR. Your Access ID is: 3648422

LICENSE NO.
043.113425

Department of Financial and Professional Regulation
Division of Professional Regulation



LICENSED PRACTICAL NURSE

JESSICA A WARREN

EXPIRES:

01/31/2025

MARIO TRETO, JR.
SECRETARY

CECILIA ABUNDIS
DIRECTOR

The official status of this license can be verified at IDFPR.illinois.gov

Cut on Dotted Line

BASIC LIFE SUPPORT

**BLS
Provider**



**American
Heart
Association.**

Jessica A Warren

**has successfully completed the cognitive and skills evaluations
in accordance with the curriculum of the American Heart Association
Basic Life Support (CPR and AED) Program.**

Issue Date

1/20/2024

Training Center Name

Danville Area Community College

Training Center ID

IL15477

Training Center City, State

Danville, IL

**Training Center Phone
Number**

(217) 443-8777

Training Site Name

Renew By

01/2026

Instructor Name

jerry beckley

Instructor ID

01112240339

eCard Code

245414989931

QR Code



To view or verify authenticity, students and employers should scan this QR code with their mobile device or go to www.heart.org/cpr/mycards.

© 2023 American Heart Association. All rights reserved. 20-3001 R3/23

Mental Health
First Aid USA



MENTAL
HEALTH
FIRST AID®

Certificate

Jessica Warren

has completed the 8-hour course and is now certified in

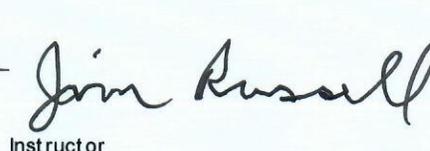
Mental Health First Aid USA

And has been trained to provide initial help to people experiencing problems such as depression, anxiety disorders, psychosis, and substance use disorders.

This certificate became effective on: **September 15, 2023**
Date

This certificate expires on: **September 15, 2026**
Date


Instructor


Instructor

NATIONAL COUNCIL
FOR BEHAVIORAL HEALTH
MENTAL HEALTH FIRST AID

National Council for Behavioral Health operates Mental Health First Aid in the USA. The National Council for Behavioral Health, the Maryland Department of Health and Mental Hygiene, and the Missouri Department of Mental Health founded Mental Health First Aid USA.

Sigma Theta Tau International Honor Society of Nursing

This certifies that

JESSICA ANN WARREN

was duly inducted into
the Honor Society of Nursing
as a member of
Alpha Alpha Delta Chapter
Lakeview College of Nursing



Sandra C. Bidd

President

Nancy Ann Bantz

Secretary

02 May 2024

Date

PRESENTED TO

Jessica Warren

For earning the designation of

Resident Assessment Coordinator – Certified
(RAC-CT)



Amy Stewart, MSN, RN, DNS-MT, QCP-MT, RAC-MT, RAC-MTA
Accredited Provider Program Director

Certification Last Issued May 23, 2023

Certification Valid Through June 1, 2025



AAPACN.org | 400 S. Colorado Blvd. Ste. 500, Denver, CO 80246



Lakeview College of Nursing

COMMUNITY SERVICE FORM

AS A GRADUATION REQUIREMENT STARTING WITH THE FALL 2018 ADMISSION COHORT, FIVE (5) HOURS ARE TO BE COMPLETED EACH SEMESTER TOTALING THE REQUIRED TWENTY (20) BY GRADUATION. EACH SEMESTER PROOF OF COMPLETED HOURS MUST BE SUBMITTED VIA THIS FORM WITH ALL THE REQUIRED INFORMATION AND SIGNATURES. BELOW IS A LIST OF SUGGESTED AND PRE-APPROVED SITES TO COMPLETE HOURS, HOWEVER, STUDENTS ARE ALLOWED AND ENCOURAGED TO SELECT OTHER LOCATIONS. IF YOU WISH TO COMPLETE SERVICE HOURS NOT ON THE LIST BELOW, PLEASE GET PRE-APPROVAL BEFORE SERVICE HOURS ARE OBTAINED.

CUVolunteer	Daily Bread Soup Kitchen	Salvation Army of Champaign	Franklin Middle School
Salt and Light Ministries	Empty Tomb	Champaign Park District	Urbana Park District
Swann Special Care Center	Carle Foundation Hospital	The HAVEN	CCAR Industries
Carle Hospice	Crisis Nursery	Eastern Illinois Foodbank	
OSF Heart of Mary Medical Center	Champaign County Humane Society	United Way of Champaign County	
Standing Stone Community Center	Sarah Bush Lincoln Hospital	Family Service – Volunteer Service	
CRIS Senior Services - Meals on Wheels	Hospice Volunteers - Champaign	Fair Hope Children’s Ministry, Danville, Ill	
Harbor Light Hospice, Decatur, Illinois	American Red Cross Illini Prairie Chapter		
Give Back Garden - Champaign/Urbana Public Health District			

SECTION 1: STUDENT

STUDENT NAME: Jessica Warner

SEMESTER: FALL SPRING SUMMER YEAR: 2023

AGENCY LOCATION: Dwelling Place

IT IS RECOMMENDED TO GAIN PRIOR APPROVE IF THE AGENCY UTILIZED IS NOT LISTED ABOVE. GETTING PRIOR APPROVAL WILL ENSURE HOURS TO BE COUNT TOWARDS THE 20 HOURS REQUIRED FOR GRADUATION. (UNAPPROVED SERVICES COULD RESULT IN HOURS NOT BEING COUNTED TOWARDS GRADUATION REQUIREMENTS.)

AGENCY REPRESENTATIVE NAME: Hygiene Products for Professor Barkley project

HOURS SERVED: START DATE: END DATE:

FACULTY APPROVAL SIGNATURE Mary Barkley
IF NOT ABLE TO OBTAIN SIGNATURE PLEASE ATTACH DOCUMENTATION OF APPROVAL

SECTION 2: AGENCY SUPERVISOR

TYPE OF SERVICES PROVIDED BY STUDENT:

REPRESENTATIVE SIGNATURE: Mary Barkley PHONE #:

OFFICE USE ONLY

HOURS ENTERED FORM SCANNED AND UPLOADED DATE INITIALS



Lakeview College of Nursing

COMMUNITY SERVICE FORM

AS A GRADUATION REQUIREMENT STARTING WITH THE FALL 2018 ADMISSION COHORT, FIVE (5) HOURS ARE TO BE COMPLETED EACH SEMESTER TOTALING THE REQUIRED TWENTY (20) BY GRADUATION. EACH SEMESTER PROOF OF COMPLETED HOURS MUST BE SUBMITTED VIA THIS FORM WITH ALL THE REQUIRED INFORMATION AND SIGNATURES. BELOW IS A LIST OF SUGGESTED AND PRE-APPROVED SITES TO COMPLETE HOURS, HOWEVER, STUDENTS ARE ALLOWED AND ENCOURAGED TO SELECT OTHER LOCATIONS. IF YOU WISH TO COMPLETE SERVICE HOURS NOT ON THE LIST BELOW, PLEASE GET PRE-APPROVAL BEFORE SERVICE HOURS ARE OBTAINED.

CUVolunteer	Daily Bread Soup Kitchen	Salvation Army of Champaign	Franklin Middle School
Salt and Light Ministries	Empty Tomb	Champaign Park District	Urbana Park District
Swann Special Care Center	Carle Foundation Hospital	The HAVEN	CCAR Industries
Carle Hospice	Crisis Nursery	Eastern Illinois Foodbank	
OSF Heart of Mary Medical Center	Champaign County Humane Society	United Way of Champaign County	
Standing Stone Community Center	Sarah Bush Lincoln Hospital	Family Service – Volunteer Service	
CRIS Senior Services - Meals on Wheels	Hospice Volunteers - Champaign	Fair Hope Children’s Ministry, Danville, Ill	
Harbor Light Hospice, Decatur, Illinois		American Red Cross Illini Prairie Chapter	
Give Back Garden - Champaign/Urbana Public Health District			

SECTION 1: STUDENT

STUDENT NAME:

Jessica Warren

SEMESTER:



FALL



SPRING



SUMMER

YEAR:

2023

AGENCY LOCATION:

SGA sock drive

IT IS RECOMMENDED TO GAIN PRIOR APPROVE IF THE AGENCY UTILIZED IS NOT LISTED ABOVE. GETTING PRIOR APPROVAL WILL ENSURE HOURS TO BE COUNT TOWARDS THE 20 HOURS REQUIRED FOR GRADUATION.

(UNAPPROVED SERVICES COULD RESULT IN HOURS NOT BEING COUNTED TOWARDS GRADUATION REQUIREMENTS.)

AGENCY NAME:

HOURS SERVED:

5

START DATE:

10/17/23

END DATE:

10/17/23

FACULTY APPROVAL SIGNATURE

[Signature]

IF NOT ABLE TO OBTAIN SIGNATURE PLEASE ATTACH DOCUMENTATION OF APPROVAL

SECTION 2: AGENCY SUPERVISOR

TYPE OF SERVICES PROVIDED BY STUDENT:

REPRESENTATIVE SIGNATURE:

[Signature]

PHONE #:

REPRESENTATIVE PRINTED SIGNATURE:

OFFICE USE ONLY

HOURS ENTERED



FORM SCANNED AND UPLOADED



DATE

INITIALS



Lakeview College of Nursing

COMMUNITY SERVICE FORM

AS A GRADUATION REQUIREMENT STARTING WITH THE FALL 2018 ADMISSION COHORT, FIVE (5) HOURS ARE TO BE COMPLETED EACH SEMESTER TOTALING THE REQUIRED TWENTY (20) BY GRADUATION. EACH SEMESTER PROOF OF COMPLETED HOURS MUST BE SUBMITTED VIA THIS FORM WITH ALL THE REQUIRED INFORMATION AND SIGNATURES. BELOW IS A LIST OF SUGGESTED AND PRE-APPROVED SITES TO COMPLETE HOURS, HOWEVER, STUDENTS ARE ALLOWED AND ENCOURAGED TO SELECT OTHER LOCATIONS. IF YOU WISH TO COMPLETE SERVICE HOURS NOT ON THE LIST BELOW, PLEASE GET PRE-APPROVAL BEFORE SERVICE HOURS ARE OBTAINED.

CU Volunteer	Daily Bread Soup Kitchen	Salvation Army of Champaign	Franklin Middle School
Salt and Light Ministries	Empty Tomb	Champaign Park District	Urbana Park District
Swann Special Care Center	Carle Foundation Hospital	The HAVEN	CCAR Industries
Carle Hospice	Crisis Nursery	Eastern Illinois Foodbank	
OSF Heart of Mary Medical Center	Champaign County Humane Society	United Way of Champaign County	
Standing Stone Community Center	Sarah Bush Lincoln Hospital	Family Service - Volunteer Service	
CRIS Senior Services - Meals on Wheels	Hospice Volunteers - Champaign	Fair Hope Children's Ministry, Danville, Ill	
Harbor Light Hospice, Decatur, Illinois		American Red Cross Illini Prairie Chapter	
Give Back Garden - Champaign/Urbana Public Health District			

SECTION 1: STUDENT

STUDENT NAME: Jessica Warren

SEMESTER: FALL SPRING SUMMER YEAR: 2024

AGENCY LOCATION: Robinson Rehab + Nursing (Robinson, IL)

IT IS RECOMMENDED TO GAIN PRIOR APPROVE IF THE AGENCY UTILIZED IS NOT LISTED ABOVE. GETTING PRIOR APPROVAL WILL ENSURE HOURS TO BE COUNT TOWARDS THE 20 HOURS REQUIRED FOR GRADUATION. (UNAPPROVED SERVICES COULD RESULT IN HOURS NOT BEING COUNTED TOWARDS GRADUATION REQUIREMENTS.)

AGENCY NAME: Robinson Rehab + Nursing Center

HOURS SERVED: 8 START DATE: 6/3/24 END DATE: 6/7/27

FACULTY APPROVAL SIGNATURE: Shelly Basch
IF NOT ABLE TO OBTAIN SIGNATURE PLEASE ATTACH DOCUMENTATION OF APPROVAL

SECTION 2: AGENCY SUPERVISOR

TYPE OF SERVICES PROVIDED BY STUDENT: Assisted with activities - did 1:1 visits with Residents, reminisced about memories, played board games, assisted with group activities

REPRESENTATIVE SIGNATURE: Jamie Patten PHONE #: 615-544-3192

REPRESENTATIVE PRINTED SIGNATURE: Jamie Patten

OFFICE USE ONLY

HOURS ENTERED FORM SCANNED AND UPLOADED DATE INITIALS



Lakeview College of Nursing

COMMUNITY SERVICE FORM

AS A GRADUATION REQUIREMENT STARTING WITH THE FALL 2018 ADMISSION COHORT, FIVE (5) HOURS ARE TO BE COMPLETED EACH SEMESTER TOTALING THE REQUIRED TWENTY (20) BY GRADUATION. EACH SEMESTER PROOF OF COMPLETED HOURS MUST BE SUBMITTED VIA THIS FORM WITH ALL THE REQUIRED INFORMATION AND SIGNATURES. BELOW IS A LIST OF SUGGESTED AND PRE-APPROVED SITES TO COMPLETE HOURS, HOWEVER, STUDENTS ARE ALLOWED AND ENCOURAGED TO SELECT OTHER LOCATIONS. IF YOU WISH TO COMPLETE SERVICE HOURS NOT ON THE LIST BELOW, PLEASE GET PRE-APPROVAL BEFORE SERVICE HOURS ARE OBTAINED.

CUVolunteer	Daily Bread Soup Kitchen	Salvation Army of Champaign	Franklin Middle School
Salt and Light Ministries	Empty Tomb	Champaign Park District	Urbana Park District
Swann Special Care Center	Carle Foundation Hospital	The HAVEN	CCAR Industries
Carle Hospice	Crisis Nursery	Eastern Illinois Foodbank	
OSF Heart of Mary Medical Center	Champaign County Humane Society	United Way of Champaign County	
Standing Stone Community Center	Sarah Bush Lincoln Hospital	Family Service - Volunteer Service	
CRIS Senior Services - Meals on Wheels	Hospice Volunteers - Champaign	Fair Hope Children's Ministry, Danville, Ill	
Harbor Light Hospice, Decatur, Illinois		American Red Cross Illini Prairie Chapter	
Give Back Garden - Champaign/Urbana Public Health District			

SECTION 1: STUDENT

STUDENT NAME: Jessica Warren

SEMESTER: FALL SPRING SUMMER YEAR: 2024

AGENCY LOCATION: Robinson, IL

IT IS RECOMMENDED TO GAIN PRIOR APPROVE IF THE AGENCY UTILIZED IS NOT LISTED ABOVE. GETTING PRIOR APPROVAL WILL ENSURE HOURS TO BE COUNT TOWARDS THE 20 HOURS REQUIRED FOR GRADUATION.
(UNAPPROVED SERVICES COULD RESULT IN HOURS NOT BEING COUNTED TOWARDS GRADUATION REQUIREMENTS.)

AGENCY NAME: Robinson Rehab + Nursing Center

HOURS SERVED: 8 START DATE: 6/3/24 END DATE: 6/7/24

FACULTY APPROVAL SIGNATURE Shelley Bose
IF NOT ABLE TO OBTAIN SIGNATURE PLEASE ATTACH DOCUMENTATION OF APPROVAL

SECTION 2: AGENCY SUPERVISOR

TYPE OF SERVICES PROVIDED BY STUDENT:

Assisted during meal times with encouraging Residents to eat, provided cueing + instruction - Assisted with passing snacks + hydration

REPRESENTATIVE SIGNATURE: Jamie Pahl PHONE #: 618-544-3192

REPRESENTATIVE PRINTED SIGNATURE: Jamie Pahl

OFFICE USE ONLY

HOURS ENTERED FORM SCANNED AND UPLOADED DATE _____ INITIALS _____



Lakeview College of Nursing

COMMUNITY SERVICE FORM

AS A GRADUATION REQUIREMENT STARTING WITH THE FALL 2018 ADMISSION COHORT, FIVE (5) HOURS ARE TO BE COMPLETED EACH SEMESTER TOTALING THE REQUIRED TWENTY (20) BY GRADUATION. EACH SEMESTER PROOF OF COMPLETED HOURS MUST BE SUBMITTED VIA THIS FORM WITH ALL THE REQUIRED INFORMATION AND SIGNATURES. BELOW IS A LIST OF SUGGESTED AND PRE-APPROVED SITES TO COMPLETE HOURS, HOWEVER, STUDENTS ARE ALLOWED AND ENCOURAGED TO SELECT OTHER LOCATIONS. IF YOU WISH TO COMPLETE SERVICE HOURS NOT ON THE LIST BELOW, PLEASE GET PRE-APPROVAL BEFORE SERVICE HOURS ARE OBTAINED.

- | | | | |
|---|--|--|------------------------|
| CU Volunteer | Daily Bread Soup Kitchen | Salvation Army of Champaign | Franklin Middle School |
| Salt and Light Ministries | Empty Tomb | Champaign Park District | Urbana Park District |
| Swann Special Care Center | Carle Foundation Hospital | The HAVEN | CCAR Industries |
| Carle Hospice | Crisis Nursery <i>By Carle</i> | Eastern Illinois Foodbank | |
| OSF Heart of Mary Medical Center | Champaign County Humane Society | United Way of Champaign County | |
| Standing Stone Community Center | Sarah Bush Lincoln Hospital | Family Service - Volunteer Service | |
| CRIS Senior Services - Meals on Wheels | Hospice Volunteers - Champaign | Fair Hope Children's Ministry, Danville, Ill | |
| Harbor Light Hospice, Decatur, Illinois | | American Red Cross Illini Prairie Chapter | |
| | Give Back Garden - Champaign/Urbana Public Health District | | |

SECTION 1: STUDENT

STUDENT NAME: Jessica Wainen

SEMESTER: FALL SPRING SUMMER YEAR: 2024

AGENCY LOCATION: Summer Meal Program

IT IS RECOMMENDED TO GAIN PRIOR APPROVE IF THE AGENCY UTILIZED IS NOT LISTED ABOVE. GETTING PRIOR APPROVAL WILL ENSURE HOURS TO BE COUNT TOWARDS THE 20 HOURS REQUIRED FOR GRADUATION. (UNAPPROVED SERVICES COULD RESULT IN HOURS NOT BEING COUNTED TOWARDS GRADUATION REQUIREMENTS.)

AGENCY REPRESENTATIVE NAME: Judy Brown, Wesley U.M. Church

HOURS SERVED: 10 START DATE: 6/12/24 END DATE: 7/2/24

FACULTY APPROVAL SIGNATURE Shelley Bosch
IF NOT ABLE TO OBTAIN SIGNATURE PLEASE ATTACH DOCUMENTATION OF APPROVAL

SECTION 2: AGENCY SUPERVISOR

TYPE OF SERVICES PROVIDED BY STUDENT:

Summer lunch program: making sandwiches, packing snack bags, distributing food to children + adults in 3 locations in Charleston.

REPRESENTATIVE SIGNATURE: Judy Brown PHONE #: 217 549 7592

OFFICE USE ONLY

HOURS ENTERED FORM SCANNED AND UPLOADED DATE INITIALS