



North Dakota Workforce
Safety & Insurance

RETRAINING CHECKLIST
RETURN TO WORK DIVISION
SFN 60266 (10/2019)

1600 E Century Ave, Ste 1
PO Box 5585
Bismarck ND 58506-5585
Telephone 800-777-5033
Toll Free Fax 888-786-8695
TTY (hearing impaired) 800-366-6888
Fraud and Safety Hotline 800-243-3331
www.workforcesafety.com

SECTION 1 – Injured employee's information

Claim number	Injured employee's (Student) (First name)	(Last name)
--------------	-------------------------------------------	-------------

SECTION 2 – Tasks to complete

Complete and submit the following documents and/or any other paperwork as required by the school for your application file

- Application form and fee
- High school transcript or high school equivalency (GED, HiSet)
- Official transcripts – transcripts from previous schools must be sent directly to your new school
- Immunization records
- Reciprocity – if applicable; refers to tuition agreement for some border state residents
- Free Application for Federal Student Aid (FAFSA) www.fafsa.ed.gov

Contact the school to set up appointments for the following; provide a copy of each item below to Workforce Safety & Insurance (WSI)

<input type="checkbox"/> Complete placement testing (Accuplacer, ALEKS)	Date scheduled
<input type="checkbox"/> Meet with an advisor to obtain class schedule	Date scheduled
<input type="checkbox"/> Verify your residency status with the business office	Date completed
<input type="checkbox"/> Obtain cost of tuition and fees	Date completed

Locate the offices below to visit about available services

- Academic Success Center (Learning Center/Tutoring Center)
- Disability Services Office/Student Accommodations
- Financial Aid Office (FAFSA application assistance)