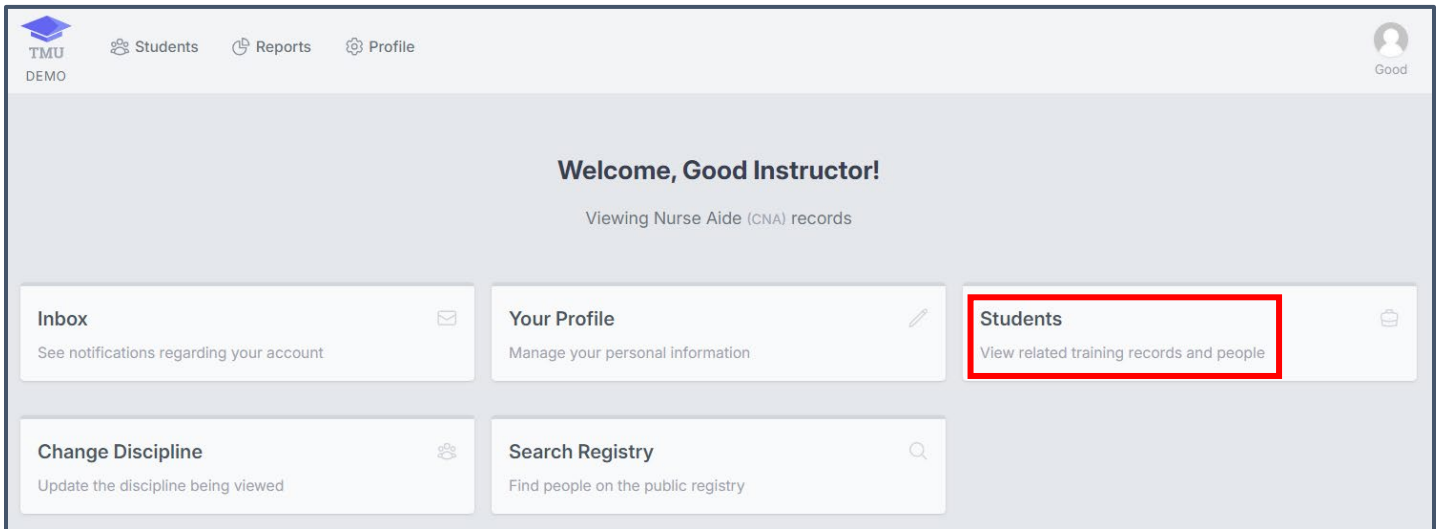


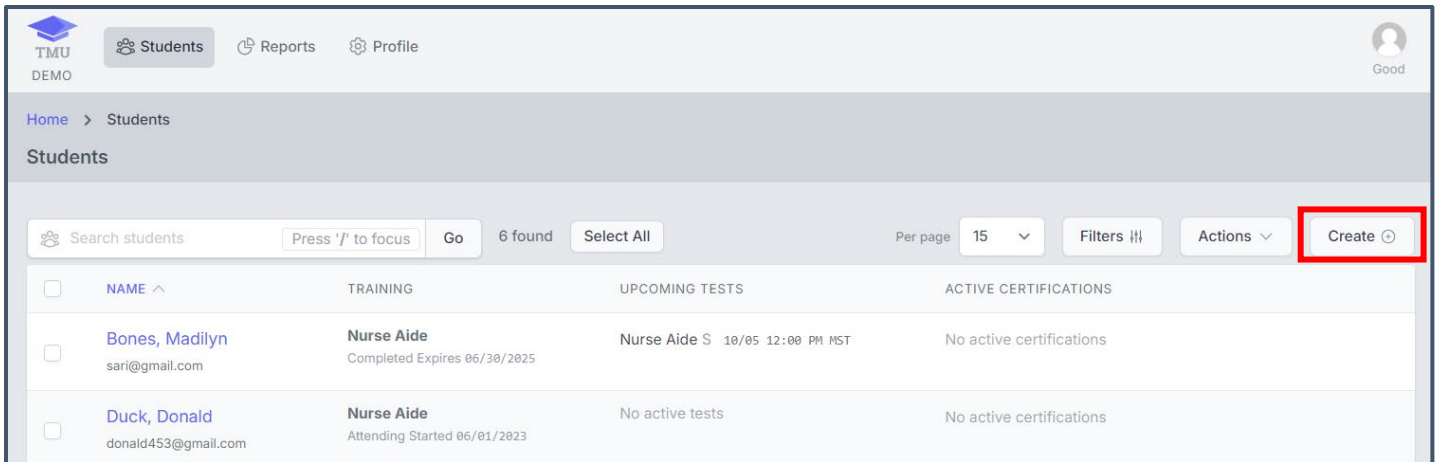
INSTRUCTORS
How to Enter Students/Candidates
How to Add State-Funded Employment
At the Start of Training

Sign in to your **Instructor** account at nm.tmutest.com, using your Instructor Email or Username and Password.

Click on **STUDENTS**:



Click on **CREATE**:



See the **CREATE NEW STUDENT** screenshot on the next page with the fields that need to be entered.

*Enter the five required fields with the **red ***.* It is important that the information entered is correct. (If the student's **FIRST** and **LAST** names do not **exactly match** the printed names on their ID(s) when they check in for their exam, they are not allowed to test.)

1. **First Name** [exactly] as printed on their required ID(s) they need to present at test check-in]
2. **Last Name** [exactly] as printed on their required ID(s) they need to present at test check-in]
3. **Phone #** [student's personal number (usually a cell phone #)]
4. **Email** [student's personal email that they check]
5. **Training Start Date**
6. **EMPLOYMENT FUNDING VERIFICATION** [if the candidate's employer is a state-funded facility, choose the candidate's employer at this time]
7. **Sponsor** [if the candidate has a 'sponsor' who will be paying their testing fees, choose the sponsor at this time]
8. **SAVE STUDENT**

INSTRUCTORS
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Home > Students > Create

Create New Student

Make sure the student's first and last name **EXACTLY MATCH** the printed name on their required ID(s) they need to present at testing when they check in.

LEGAL FIRST NAME * 1 MIDDLE LEGAL LAST NAME * 2 SUFFIX

PHONE * 3 ALTERNATE PHONE

BIRTHDATE EMAIL * Generate Fake 4

Enter the student's **personal** phone number.
Enter the student's **personal** email address.

GENDER
☐ MALE ☐ FEMALE ☐ OTHER

☐ AUDIO TESTS?
☐ UNLISTED FROM PHONE AND MAILING LISTS

Mailing Address ADDRESS

CITY STATE ZIPCODE
New Mexico

Funding Type Self Pay

Initial Training

CHOOSE DISCIPLINE * Nurse Aide

CHOOSE TRAINING * Nursing Assistant

CHOOSE TRAINING PROGRAM * (TP)

CHOOSE INSTRUCTOR * Brown

STATUS Attending TYPE Normal

STARTED * 5 ENDED

EXPIRES

CLASSROOM HOURS CLINICAL HOURS

DISTANCE HOURS

TRAINEESHIP HOURS

SPONSOR is for those students affiliated with a sponsor who will be paying the student's testing fees, you would select the sponsor from the drop-down list.
Please see the Training Program and Sponsoring Facilities 'How to Pay Testing Fees' document.

STATE FUNDED FACILITY 6

SPONSOR 7

No Employer

ADVANCED HEALTH CARE OF ALBUQUERQUE (EMP)
ALBUQUERQUE HEIGHTS CARE AND REHABILITATION CENTER (EMP)
ARTESIA HEALTHCARE & REHABILITATION CENTER (EMP)
Aztec Wellness and Rehabilitation Center (EMP)

8 Save Student

EMPLOYMENT FUNDING VERIFICATION: If you have students in your class that are employees of a state-funded facility, you need to select the funding facility from the drop-down list when entering your students. **The funding facility box only becomes available once the first and last names, phone # and email address are entered.**

The discipline, training, training program, and instructor will default to your information.

Enter the student's **TRAINING START DATE.**

INSTRUCTORS
How to Enter Students/Candidates
How to Add State-Funded Employment
At the Start of Training

When you click **SAVE STUDENT**, the student's record is added as **INCOMPLETE**, and the **STUDENT VERIFICATION** will open. Click **PRINT** to print a copy for your records if you wish.

The student will be sent an email with this information. They need to check that the information is accurate. Their **EMAIL**, **USERNAME**, and **temporary PASSWORD** are provided.

- The student will need to sign in to their account in TMU®, update their password, and complete their demographic information.
- Please refer your students to read the New Mexico Candidate Handbook, which is available on the D&SDT-HEADMASTER's New Mexico main webpage at www.hdmaster.com for further information.

[Home](#) > [Students](#) > [Verification](#)

Student Verification

✓ Student added as incomplete

ⓘ This student has been sent an email with this information. Feel free to print this page for your records.

Identification

Name	STUDENT, EXCELLENT
Gender	
Phone	(444) 555-2222
Date of Birth	Unavailable
Address	Unavailable

Login Information

URL	https://demo.tmu.dev
Email	excellentstudent@student.com
Username	estudent
Password	qbgXRL38

Initial Training

Training	Nurse Aide
Status	Attending
Training Program	Good Training Program
Started	12/01/2023

Print

Continue to Student →

NOTE: The STUDENT VERIFICATION is not saved and cannot be replicated. When this screen opens, it is the only time it will be viewable. (The candidate will be emailed the information, and you may print a copy for your records.) **Please call D&SDT-HEADMASTER if you have questions at (888)401-0462.**