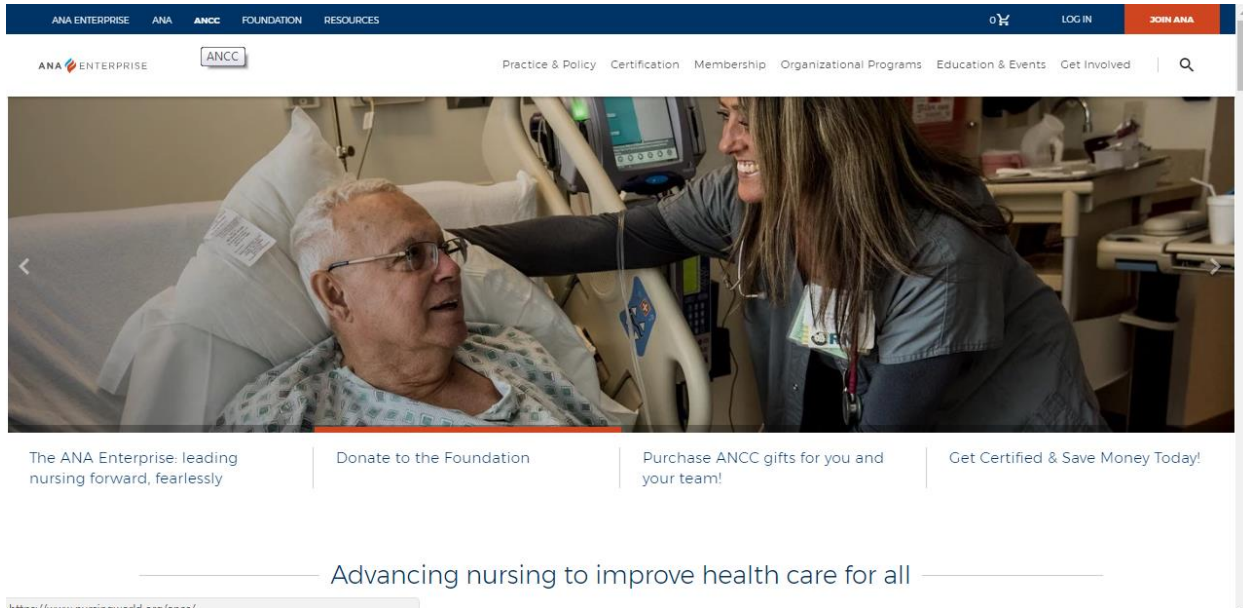
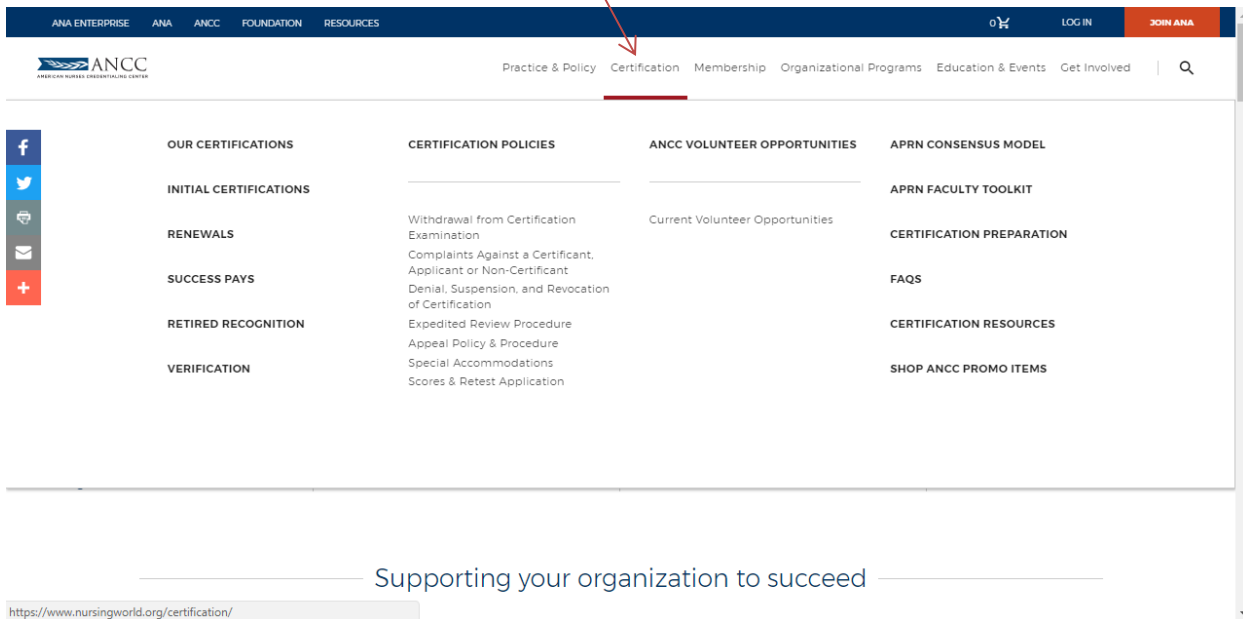


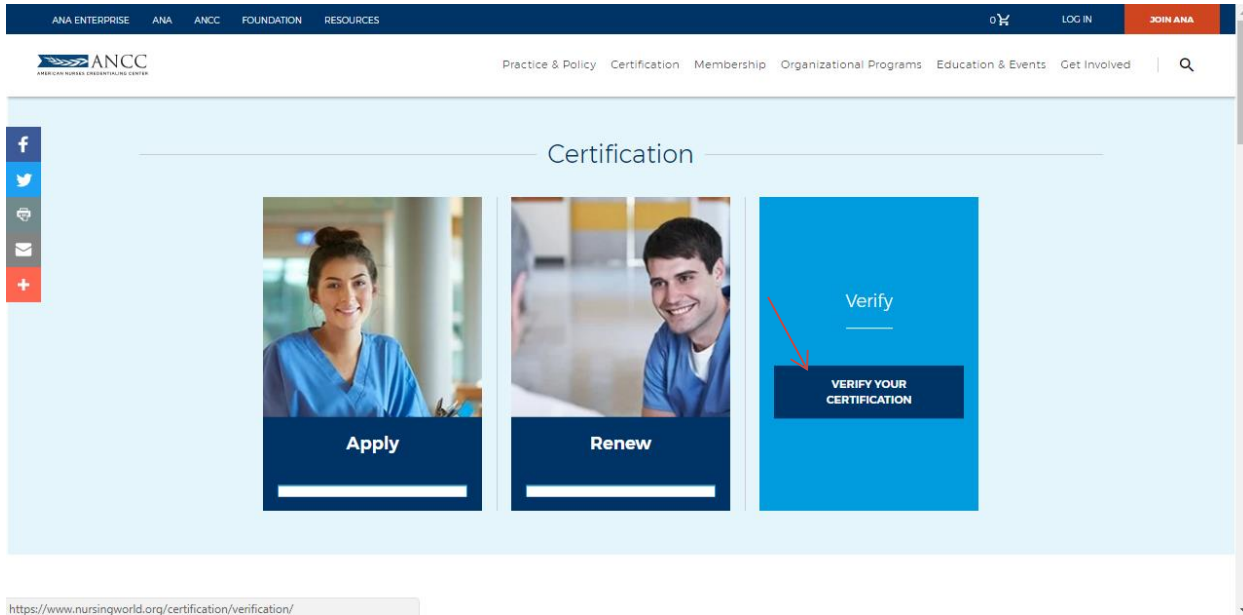
1. Click on ANCC in the top left corner of the website.



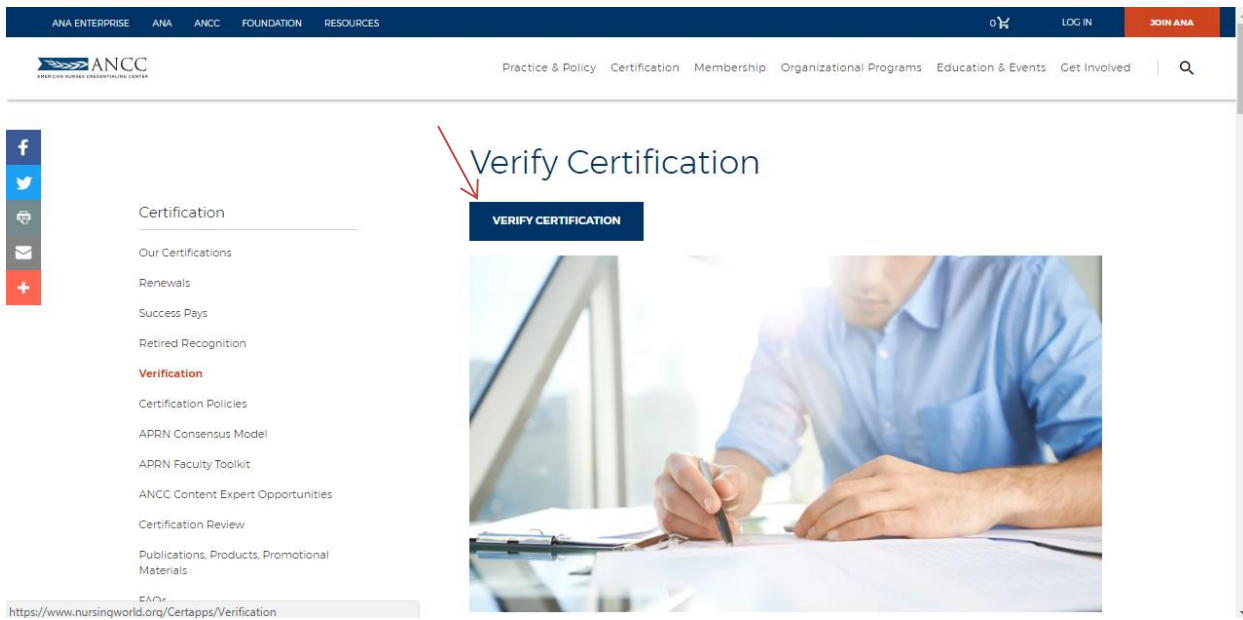
2. Click on the word Certification



3. Click on Verify



4. Click the blue button Verify Certification



5. If you're not logged into your account, the website will require you login. If not it will take you to step 6.

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Have an Account or already a member? If you are a member you already have an account! Please login. Don't have an Account?

Returning Customers

Username

Password

[Forgot Password](#) LOGIN

Register for an account

CREATE AN ACCOUNT

If you are a member or have an account and cannot login, please contact the Membership Department at 1-800-925-7700 or memberinfo@ana.org

Select 6: Type in the nurse/clinician information and Click Search

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Verification Search

First Name:

Certification No:

Last Name:

City:

State:

Search

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Step 7: Select the nurse/clinician you would like to verify. Then click Select at the bottom of the page

Verification Search

First Name:	<input type="text"/>
Certification No.:	2017030784
Last Name*:	Daquila-Casey
City:	<input type="text"/>
State:	<input type="text"/>
	<input type="button" value="Search"/>

Select	Last Name	First Name	City	State	Postal Code	Country
<input type="radio"/>	Daquila-Casey	Cely Joy	Silver Spring	MD	20910-3492	USA

1

Step 8: Select the certification of your choice, update your shipping details, and add to cart.

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Verification Letter Selection


Certification Letter	Status	Application Date	Certification Programs	
<input checked="" type="checkbox"/>	Certified	10/16/2017	Adult-Gerontology Primary Care Nurse Practitioner	<input type="button" value="Shipping Details"/>
<input type="checkbox"/>	In Process	05/15/2018	Cardiac Vascular Nurse	
<input type="checkbox"/>	In Process	04/13/2018	Family Nurse Practitioner	
<input type="checkbox"/>	In Process	04/17/2018	National Healthcare Disaster	
<input type="checkbox"/>	Certified	10/10/2017	Nurse Executive	
<input type="checkbox"/>	In Process	04/16/2018	Nurse Executive Renewal	
<input type="checkbox"/>	In Process	04/16/2018	Nursing Professional Development	
<input type="checkbox"/>	In Process	04/16/2018	Psychiatric and Mental Health Nurse Renewal	

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Step 9: Check out

Item Item Price Quantity Item Total

 Certification Verification Letter Adult-Gerontology Primary Care Nurse Practitioner - Ms Cely Joy Daquila-Casey	Regular Price: \$50.00 \$0.00 FREEVERIFICATION	1 Remove	\$0.00
---	---	-----------------------------	--------

[Continue shopping](#) [+ Add a discount code](#)

Applied Discount: -\$50.00
American Nurses Foundation Donation: \$0.00

Subtotal: \$0.00

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[JOIN ANA NOW](#)

American Nurses Foundation:
Add a tax-deductible gift to the American Nurses Foundation.

Add a tax deductible donation to the American Nurses Foundation and make a difference through your generosity. Through research grants, leadership programs, our Honor a Nurse program and more, donations are transforming the health of the nation through the power of nursing. Click one of the donation amounts to add or remove a donation from your shopping cart. [Click here](#) to donate a different amount.

[Continue shopping](#) [CHECKOUT](#)

Step 10: Agree to the terms and conditions and click place order.

Checkout

Your Details
CertOps Verification
verification@ana.org

Billing Address
Choose a saved address
CertOps Verification, 8515 Georgia Avenue, Silver Spring, MD, 20910 [▼](#)
[+ Add a new address](#)

CertOps Verification
8515 Georgia Avenue
Silver Spring
MD
20910
USA
[Edit address](#)

Shipping Address
 My billing and shipping addresses are the same
Choose a saved address
CertOps Verification, 8515 Georgia Avenue, Silver Spring, MD, 20910 [▼](#)
[+ Add a new address](#)

Order Summary [Edit cart](#)

Items	\$50.00
Tax	\$0.00
Coupon Discount	-\$0.00
Applied Discount	-\$50.00
Shipping	\$0.00

[+ Add a discount code](#)

Total: \$0.00

I have read and agree to the [Terms and Conditions](#)

[PLACE ORDER](#)

For bulk or invoice purchases, please contact customerservice@ana.org

Step 11: Review information is correct in regards to billing address (etc)

Your Details
Casey Credentialing
casey@ana.org

Billing Address
Choose a saved address
Casey Credentialing, 8515 Georgia Ave, Silver Spring, MD, 20910-3403
[+ Add a new address](#)

Casey Credentialing
8515 Georgia Ave
Silver Spring
MD
20910-3403
USA

[Edit address](#)

Shipping Address
 Use billing address as shipping address

Order Summary [Edit cart](#)

Items	\$50.00
Tax	\$0.00
Coupon Discount	-\$0.00
Applied Discount	-\$0.00
Shipping	\$0.00

[+ Add a discount code](#)

Total: \$50.00

I have read and agree to the [Terms and Conditions](#)

PLACE ORDER

For bulk or invoice purchases, please contact customerservice@ana.org

Step 12: Enter in your payment details

Shipping Method
Choose a shipping method
Electronic Delivery - Free Shipping

Payment details

Cardholder's name

Card number

Expiration date
Jan 2018

Security code



Save card for future use

Step 13: Select Place Order


casey@ana.org

Billing Address

Choose a saved address

 Casey Credentialing, 8515 Georgia Ave, Silver Spring, MD, 20910-3403 

 [+ Add a new address](#)

 Casey Credentialing
8515 Georgia Ave
Silver Spring
MD
20910-3403
 USA

[Edit address](#)

Shipping Address

My billing and shipping addresses are the same

Choose a saved address

Casey Credentialing, 8515 Georgia Ave, Silver Spring, MD, 20910-3403 

Items	\$50.00
Tax	\$0.00
Coupon Discount	-\$0.00
Applied Discount	-\$0.00
Shipping	\$0.00

[+ Add a discount code](#)

Total: \$50.00

I have read and agree to the [Terms and Conditions](#)

PLACE ORDER

For bulk or invoice purchases, please contact customerservice@ana.org