



**STAFF INFORMATION SUMMARY**  
NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES  
ROAP  
SFN 602 (10-2016)

To be completed when a ROAP ID is requested.

Staff Name (First, Middle Initial, Last)		Date of Birth
Social Security Number *	Date of First Hire	HSC Telephone Number
Email Address		
Staff Type <input type="checkbox"/> Employee <input type="checkbox"/> Contract <input type="checkbox"/> Student	Employee	
ROAP Home RU	Job Title	
Supervisor		Supervisor's ROAP ID
NPI Number	Medicare Provider/PTAN Number	
Licenses		Date First Licensed

**NOTE: Please efax copy of license ASAP**

\* In compliance with the Federal Privacy Act of 1974, the disclosure of the social security number on this form is voluntary. They are not disclosed to the public. The numbers are used to maintain accurate files. Therefore, while voluntary disclosure is requested, failure to do so will not invalidate this application..