



Welcome to **ACEMAPP**

1. You will receive a welcome email from **ACEMAPP**

The email will contain a link allowing you to set your password.

2. Log into your **ACEMAPP** account

Navigate to acemapp.org and log in with your email address and password. When you log in you will be asked to agree to the FERPA consent, Honesty Pledge and Terms of Service.

3. Complete each component of your student profile

This information is shared with the sites you attend for rotations as well as VerifyStudents for your background check and drug screen. Please keep this information up-to-date.

4. Complete all courses and assessments

Any courses and assessments that you have been assigned will be listed; complete them by clicking “Take Course” or “Take Test”.

5. Connect to **Verify Students**

University of Detroit Mercy requires students to complete a Background Check and Drug Screen through VerifyStudents. Once in VerifyStudents, a program-specific promotional code must be entered to initiate the process. Please reference this code along with additional vendor instructions on the following page.

6. Log into **ACEMAPP** to track requirement progress

VerifyStudents will transfer completed dates for your requirements directly to your ACEMAPP account. Your account will display green checks as each of these components are completed.

If you require additional assistance, please visit:

<https://acemapp.org/kb/124>

www.acemapp.org



UNIVERSITY OF DETROIT MERCY

COLLEGE OF HEALTH PROFESSIONS & MCAULEY SCHOOL OF NURSING

UNDERGRADUATE NURSING PROGRAM Background & Drug Screening Instructions

*(*Please follow these instructions on page 2 if you have only lived in the United States for the last 7 years. If you have lived only in Canada, in the past 7 years, please follow Canada instructions starting on page 3. If you have lived in the United States and Canada, at any point in time in the past 7 years, please follow Canada & United States instructions on page 6.)*

Before Starting:

- A valid email is REQUIRED.
- Have your credit card (Visa/MasterCard/American Express/Discover) information ready in order to process payment. Your credit card will be charged **\$87.57** for the service.

Getting Started:

1. Log onto our website at www.VerifyStudents.com and click Students Start Here.



2. Use this special promotional code: **UNIV252B**
3. Complete profile & e-sign forms as they appear.

After Completing Online Process:

1. Drug testing: Go to collection site listed on the authorization form
 - Bring authorization form & government photo ID, e.g. – driver’s license
 - **Drug screening order expires 10 days after purchase.**

PLEASE NOTE THE DRUG SCREEN MUST BE COMPLETED
BY **3/1/2014 6:00:00 PM PST**

Authorization Form
REGISTRATION NUMBER: 112489992

Order Expiration Date/Time: 3/1/2014 6:00:00 PM PST Authority/Access Barcode #: 112489992

Employer/Contractor Information: CORPORATE SCREENING SERVICES HOUSE 1430 CONGRESS COURT CLEVELAND OH 44115 Phone: (216) 441-0700	Medical Review Officer/Managed Service Provider: DR. CHARLES MOOREFIELD MEDICAL REVIEW OFFICE 1121 S. WILSON ROAD WILSON, OH 43094 Phone: (614) 851-1310
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Test Information:	Test Details:
Name: Test Unit ID: ****1113 Date/Time: 03/01/14 Test/Phone: 480.321.7316 Test/Phone: 480.321.7316	Reason For Test: Pre Employment Access: 00000

Service(s) to be Performed:	Laboratory:	Laboratory Test:
10 Panel/Urine	L&C Corp	94330001

Collection Site Information:
LABCORP
1160 HARTWIG BLVD, SUITE 118
HARTWIG, CA 94529
Phone: (925) 875-3129

Please bring your government issued photo ID for identification at the collection facility.
You must bring this authorization form to the collection facility.



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Canada Background & Drug Screening Instructions

*(*Follow these directions if you have lived in Canada at any point in time in the past 7 years.)*

Before Starting:

- A valid email is REQUIRED.
- Have your credit card (Visa/MasterCard/American Express/Discover) information ready in order to process payment. Your credit card will be charged **\$93.83** for the service.

Getting Started:

4. Log onto our website at www.VerifyStudents.com and click Students Start Here.



5. Use this special promotional code: **UNIV8575**
6. Complete profile & e-sign forms as they appear.

Notes for Canadian Students

When registering for your account, use the screenshot below as a guide.

- Enter your address like the example.
- For ID Type use Other Country ID, enter the type and ID# with no dashes.

Create a new account

If you have a Social Security # (SSN), please enter it below. If you do not provide your SSN your background may be delayed or we may be unable to complete it. Please see our [Privacy Policy](#) for additional information. If you do not have a SSN, please select another option under ID Type

First Name	<input type="text" value="Jane"/>	ID Type	<input type="text" value="Other Country ID"/>
Middle	<input type="text"/>	Other Type	<input type="text" value="Social Insurance Number"/>
Last Name	<input type="text" value="Sample"/>	ID #	<input type="text" value="*****"/>
Suffix	<input type="text"/>	Confirm ID #	<input type="text" value="*****"/>
Address 1	<input type="text" value="321 Main Street"/>	Birthdate	<input type="text" value="03/15/2001"/>
Address 2	<input type="text"/>	Phone	<input type="text" value="(999) 999-9999"/>
City	<input type="text" value="Windsor, ON"/>	<input type="checkbox"/> Send notifications to my mobile device in regards to my background	
State	<input type="text" value=""/>	<small>Please use your school (.edu) email if available</small>	
Zip/Postal	<input type="text" value="H23 2Y7"/>	Email	<input type="text" value="jsample@gmail.com"/>
Country	<input type="text" value="Canada"/>	Verify Email	<input type="text" value="jsample@gmail.com"/>
Password	<input type="password" value="*****"/>		
Confirm Password	<input type="password" value="*****"/>		

Register
[Already have a profile?](#)

You will be presented with a screen to enter details for “International Criminal”. Use the guide below to enter the required information.

Order Details

International Criminal

Name	<input type="text" value="Jane Sample"/>	Address	<input type="text" value="321 Main Street"/>
Country	<input type="text" value="Canada"/>	Mother's Maiden Name	<input type="text" value="Smith"/>
City	<input type="text" value="Windsor, ON"/>	Father's Name	<input type="text" value="Bill Sample"/>
		Other Information	<input type="text" value="Ontario"/>

[Cancel](#) [Save](#)

[Save and Attach](#)

For your drug screen, enter the Zip Code for the university, **48221**, and click the search button to find available drug screen collection sites.

Drug Screening

Once you finish scheduling your drug screen you must click the FINISH button to complete your order

10-Panel Urine	
Zip:	Distance:
<input type="text" value="48221"/>	<input type="text" value="20"/>
<input type="button" value="Search"/>	

After Completing Online Process:

- 2. Drug testing: Go to collection site listed on the authorization form
 - Bring authorization form & government photo ID, e.g. – driver’s license
 - **Drug screening order expires 10 days after purchase.**

PLEASE NOTE THE DRUG SCREEN MUST BE COMPLETED
BY **8/1/2014 6:00:00 PM PST**

Authorization Form
REGISTRATION NUMBER: 112499992

Order Expiration Date/Time: 8/1/2014 6:00:00 PM PST Authorization Number: 112499992

Employer/Contractor Information: CORPORATE SCREENING SERVICES 1838 OGDON/COURT CLEVELAND, OH 44130 Phone: 330.224.6776; 330.262.0300	Medical Review Office/Managed Service Provider: DR. CHARLES MOOREFIELD MEDICAL REVIEW OFFICE 1122 S WOODLAND RD SUITE D WILMINGTON, OH 45394 Phone: 513.833.1333
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Test Information

Driver Information: Name: Test Test ID: ****1111 Work Phone: 888.222.3333 Work Phone: 888.222.3333	Test Details: Reason For Test: Pre-Employment Account: 88888
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Service(s) to be Performed

Service	Laboratory	Laboratory Test
10 Panel/Orine	L&C/Orp	84188001

Collection Site Information
LABCORP
1360 HARTSHORNE BLVD, SUITE 116
HARTSHORNE, CA 92029
Phone: 619.479.3030

Please bring your government issued photo ID for identification at the collection facility.
You must bring this authorization form to the collection facility.



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US and Canada Background & Drug Screening Instructions

*(*Please follow these instructions if you have lived in the United States and Canada, at any point in time in the past 7 years.)*

Before Starting:

- A valid email is REQUIRED.
- Have your credit card (Visa/MasterCard/American Express/Discover) information ready in order to process payment. Your credit card will be charged **\$132.57** for the service.

Getting Started:

7. Log onto our website at www.VerifyStudents.com and click Students Start Here.



8. Use this special promotional code: **UNIVE2AE**
9. Complete profile & e-sign forms as they appear.

Notes for Students

- If you currently reside in Canada enter your address using the example below as a guide.
- If you do not have a social security number, for ID Type use Other Country ID, enter the type and ID# with no dashes.

Create a new account

If you have a Social Security # (SSN), please enter it below. If you do not provide your SSN your background may be delayed or we may be unable to complete it. Please see our [Privacy Policy](#) for additional information. If you do not have a SSN, please select another option under ID Type

First Name	<input type="text" value="Jane"/>	ID Type	<input type="text" value="Other Country ID"/>
Middle	<input type="text"/>	Other Type	<input type="text" value="Social Insurance Number"/>
Last Name	<input type="text" value="Sample"/>	ID #	<input type="text" value="*****"/>
Suffix	<input type="text"/>	Confirm ID #	<input type="text" value="*****"/>
Address 1	<input type="text" value="321 Main Street"/>	Birthdate	<input type="text" value="03/15/2001"/>
Address 2	<input type="text"/>	Phone	<input type="text" value="(999) 999-9999"/>
City	<input type="text" value="Windsor, ON"/>	<input type="checkbox"/> Send notifications to my mobile device in regards to my background	
State	<input type="text" value=""/>	<small>Please use your school (.edu) email if available</small>	
Zip/Postal	<input type="text" value="H23 2Y7"/>	Email	<input type="text" value="jsample@gmail.com"/>
Country	<input type="text" value="Canada"/>	Verify Email	<input type="text" value="jsample@gmail.com"/>
Password	<input type="password" value="*****"/> <small>Must be at least 6 characters including at least one number</small>		
Confirm Password	<input type="password" value="*****"/>		

[Register](#)
[Already have a profile?](#)

You will be presented with a screen to enter details for “International Criminal”. Use the guide below to enter the required information.

Order Details

International Criminal

Name	<input type="text" value="Jane Sample"/>	Address	<input type="text" value="321 Main Street"/>
Country	<input type="text" value="Canada"/>	Mother's Maiden Name	<input type="text" value="Smith"/>
City	<input type="text" value="Windsor, ON"/>	Father's Name	<input type="text" value="Bill Sample"/>
		Other Information	<input type="text" value="Ontario"/>

[Cancel](#) [Save](#)
[Save and Attach](#)

For your drug screen, if you do not currently live in the US, enter the Zip Code for the university, **48221**, and click the search button to find available drug screen collection sites.

Drug Screening

Once you finish scheduling your drug screen you must click the FINISH button to complete your order

10-Panel Urine

Zip: Distance:

[Search](#)

After Completing Online Process:

3. Drug testing: Go to collection site listed on the authorization form
 - Bring authorization form & government photo ID, e.g. – driver’s license
 - Drug screening order expires 10 days after purchase.

PLEASE NOTE THE DRUG SCREEN MUST BE COMPLETED
BY **8/1/2014 6:00:00 PM PST**

Authorization Form
REGISTRATION NUMBER: 112499992



112499992
Authorization Barcode #: 112499992

Order Expiration Date/Time: 8/1/2014 6:00:00 PM PST

Employer/Contractor Information: CORPORATE SCREENING SERVICES 1450 COMMERCE COURT CLEVELAND, OH 44130 Phone: (216) 441-0774; (888) 300-0300	Medical Review Office/Managed Service Provider: DR. CHARLES MOOREFIELD MEDICAL REVIEW OFFICE 1122 S WOODMAN RD SUITE D WILHELMSDALE, IN 46084 Phone: (317) 831-1111
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Test Information	
Donor Information State: TX ID: ****1111 Work Phone: (800) 232-3232 Work Phone: (800) 232-3232	Test Details Reason for Test: Pre-Employment Account: 000000

Service(s) to be Performed		
Screen	LabCorp	LabCorp
10 Panel (Urine)	LabCorp	LAB100001

Collection Site Information
 LABCORP
 1360 HARTBORNE BLVD, SUITE 116
 HARTBORNE, CA 94520
 Phone: (925) 479-3030

Please bring your government issued photo ID for identification at the collection facility.
You must bring this authorization form to the collection facility.