

# Wisconsin Department of Safety and Professional Services

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## BOARD OF NURSING

### REQUEST FOR NURSING FACULTY EXCEPTION

As indicated in Wisconsin Administrative Code Chapter N 1.08(3)(d), educational administrators may apply to the Board of Nursing for approval of exceptions to faculty requirements; exception types include standard, emergency, and non-nursing masters.

A school of nursing that is granted a faculty exception for a faculty member must provide the exception faculty with a supervisor who is fully qualified as indicated in Chapter N 1.08(3)(b) or (c). For all exception requests, a minimum of 50% of faculty must meet the faculty qualifications and all faculty exception types must be counted in the total number of exceptions granted to a school.

- Pre-approval is required for all faculty exceptions; **completed faculty exception request must be received and approved in advance of the faculty hire.**

**Standard exception** – A baccalaureate degree in nursing is required for a standard exception. Approvals are valid for one year and may be renewed upon showing proof of progress and continued active enrollment each year in a master's degree program with a major in nursing, a bachelor's in nursing to doctorate program in nursing, or a doctorate program in nursing.

**Emergency exception** – A baccalaureate degree in nursing is required for an emergency exception. An emergency exception is intended to cover a short term, unanticipated emergency situation, including medical leave of fully qualified faculty. Approvals are valid for up to one semester only and may not be renewed.

**Non-nursing master's exception** – A bachelor's degree in nursing, a graduate degree related to the topic of the course the person is teaching, nursing experience in the area of teaching assignment, and a unique combination of knowledge, experience and skills that will best serve the school of nursing, faculty, and students in a specific content area are all required for a non-nursing master's exception. No school will be permitted to hold more than one non-nursing master's exception at a time.

**Send completed faculty exception requests to:**

Wisconsin Board of Nursing

[DSPSBON@wisconsin.gov](mailto:DSPSBON@wisconsin.gov)

FAX: (608) 251-3018

# **Request for standard faculty exception (valid for one year, may be renewed)**

## **Standard exception criteria:**

- Faculty member must have a baccalaureate degree in nursing and be actively enrolled in a master's degree program with a major in nursing, or a bachelor's in nursing-to-doctorate in nursing program, or a doctorate in nursing program.
- Exception faculty may be approved for up to one year and may be renewed upon submission of a new request form and proof of progress and continued active enrollment each year in a master's degree program with a major in nursing, or a bachelor's in nursing-to-doctorate in nursing program, or a doctorate in nursing program.

**Nursing school:** \_\_\_\_\_ **Program(s):** \_\_\_\_\_

**Educational administrator:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**NOTE:** Minimum of 50% of all faculty must be fully qualified and all exception types must be counted in total exception number below.

Number of fully qualified faculty: \_\_\_\_\_ Total number of current exceptions, including this request: \_\_\_\_\_

Name of proposed standard exception faculty: \_\_\_\_\_

Course/clinical faculty will teach: \_\_\_\_\_

Date of hire: \_\_\_\_\_ Current Wisconsin RN license #: \_\_\_\_\_

**Proposed standard exception faculty member must have a baccalaureate degree in nursing and be actively (currently) enrolled in a master's degree program with a major in nursing, a bachelor's in nursing-to-doctorate in nursing program, or a doctorate in nursing program. *A plan of study with timeline for completion of degree must be provided with the exception request, as well as documentation of active enrollment in the degree program.***

BSN degree school: \_\_\_\_\_ BSN graduation date: \_\_\_\_\_

Graduate school: \_\_\_\_\_

\*Graduate degree: \_\_\_\_\_ Expected graduation date: \_\_\_\_\_

\*Degree must be master's with a major in nursing, bachelor's in nursing-to-doctorate in nursing, or doctorate in nursing.

**The nursing school must provide the exception faculty member with a supervisor meeting qualifications in N 1.08(3)(b) for professional nursing faculty, and in N 1.08(3)(c) for practical nursing faculty.**

Name of qualified supervisor: \_\_\_\_\_

\*\*Extent and mode of contact: \_\_\_\_\_

\*\*Contact should occur throughout the teaching experience and may include verbal and telephone discussion on instructional guidelines, grading and evaluation of performance and joint review of performance issues.

Is this a request for an extension beyond one year? +Yes \_\_\_\_\_ No \_\_\_\_\_

+Provide evidence of progress/continued active enrollment in graduate degree nursing program with exception request; list courses taken and courses that will be taken.

**Educational administrator signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# **Request for emergency faculty exception (one semester only)**

## **Emergency exception criteria:**

- Faculty member must have a baccalaureate degree in nursing.
- Emergency exceptions are intended to cover short-term, unanticipated emergency situations such as medical leave.
- Approvals are valid for up to one semester only and may not be renewed.

**Nursing school:** \_\_\_\_\_ **Program(s):** \_\_\_\_\_

**Educational administrator:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**NOTE:** Minimum of 50% of all faculty must be fully qualified and all exception types must be counted in total exception number below.

Number of fully qualified faculty: \_\_\_\_\_ Total number of current exceptions, including this request: \_\_\_\_\_

Name of proposed emergency faculty: \_\_\_\_\_

Course/clinical faculty will teach: \_\_\_\_\_

Date of hire: \_\_\_\_\_ Current Wisconsin RN license #: \_\_\_\_\_

**Proposed emergency exception faculty must have a baccalaureate degree in nursing.**

BSN degree school: \_\_\_\_\_ BSN graduation date: \_\_\_\_\_

**The nursing school must provide the exception faculty member with a supervisor meeting qualifications in N 1.08(3)(b) for professional nursing faculty, and in N 1.08(3)(c) for practical nursing faculty.**

Name of qualified supervisor: \_\_\_\_\_

\*Extent and mode of contact: \_\_\_\_\_

\_\_\_\_\_  
\*Contact should occur throughout the experience and may include verbal/telephone discussion on instructional guidelines, grading/evaluating performance and joint review of performance issues.

**Educational administrator signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# **Request for non-nursing master's exception (one allowed per school, no time limit)**

## **Non-nursing master's exception criteria:**

- Faculty member must have a baccalaureate degree in nursing and a graduate degree related to the topic of the course the person will teach.
- Faculty must have nursing experience in the area of teaching assignment and a unique combination of knowledge, experience and skills that will best serve the school of nursing, faculty and students in a specific content area.
- No school will be permitted to hold more than one non-nursing master's exception at a time.

**Nursing school:** \_\_\_\_\_ **Program(s):** \_\_\_\_\_

**Educational administrator:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**NOTE:** Minimum of 50% of all faculty must be fully qualified and all exception types must be counted in total exception number below.

Number of fully qualified faculty: \_\_\_\_\_ Total number of current exceptions, including this request: \_\_\_\_\_

Name of proposed non-nursing master's faculty: \_\_\_\_\_

Course/clinical faculty will teach: \_\_\_\_\_

Date of hire: \_\_\_\_\_ Current Wisconsin RN license #: \_\_\_\_\_

**Proposed non-nursing master's exception faculty must have a baccalaureate degree in nursing, a graduate degree related to the topic of the course the person will teach, and nursing experience in the area of teaching assignment along with a unique combination of knowledge, experience and skills that will best serve the school, faculty and students in a specific content area.**

BSN degree school: \_\_\_\_\_ BSN graduation date: \_\_\_\_\_

Graduate school: \_\_\_\_\_

Graduate degree: \_\_\_\_\_ Graduation date: \_\_\_\_\_

Nursing experience in the area of teaching assignment: \_\_\_\_\_

Knowledge, experience and skills in course content area: \_\_\_\_\_

**The nursing school must provide the exception faculty member with a supervisor meeting qualifications in N 1.08(3)(b) for professional nursing faculty, and in N 1.08(3)(c) for practical nursing faculty.**

Name of qualified supervisor: \_\_\_\_\_

\*Extent and mode of contact: \_\_\_\_\_

\*Contact should occur throughout the experience and may include verbal/telephone discussion on instructional guidelines, grading/evaluating performance, and joint review of performance issues.

**Educational administrator signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_