

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
Madison, WI 53705-8366

4822 Madison Yards Way
Madison, WI 53705

FAX #: (608) 266-2602
Phone #: (608) 266-2112

E-Mail: dspsExaminationsOffice@wisconsin.gov
Website: dsps.wisconsin.gov

BOARD OF NURSING

FACULTY / EDUCATIONAL ADMINISTRATOR QUALIFICATION RECORD

New nursing school seeking authorization to admit students: Completion of this form is required for each faculty member and the educational administrator. This form must be submitted to the Board of Nursing along with the request for authorization to admit students.

Nursing school approved by the Board of Nursing: Completion of this form is required for each faculty member and the educational administrator. The form must be kept on file in the school of nursing office and made available to the Board upon request for all faculty members and educational administrators hired by the nursing school.

Change in educational administrator: Institutions are required to notify the Board of Nursing within 48 hours of the termination, resignation or retirement of an educational administrator and designate an interim educational administrator (EA) within five (5) business days. Completion and submission of this form is required as part of the notification process.

Faculty/EA Name (*Last, First*): _____ WI RN License #: _____

School of Nursing Employed By: _____

Type of Nursing Program(s) (ADN, PN, BSN, etc.): _____

Position: _____ Educational Administrator _____ Faculty

Appointment Effective Date: _____

=====

FACULTY APPOINTMENTS (complete Section A below).

Fully-qualified faculty must have a current, active Registered Nurse license or privilege to practice in Wisconsin that is not encumbered and a graduate degree with a major in nursing.

A. EDUCATIONAL PREPARATION

Name of Institution	Location City/State	Graduation Date	Degree Earned or # of Credits	Major	Minor

Wisconsin Department of Safety and Professional Services

EDUCATIONAL ADMINISTRATOR APPOINTMENTS

Fully-qualified educational administrator must have current, active Registered Nurse license or privilege to practice in Wisconsin that is not encumbered, a graduate degree with a major in nursing, knowledge of learning principles for adult education, including nursing curriculum development, administration and evaluation, current knowledge of nursing practice, and **either** educational preparation (master's degree in nurse education or doctorate degree in nurse education) or at least two (2) years experience as an instructor in a nursing education program within the last five (5) years.

NOTE: Applicant must complete Section A below; complete Section B below only if teaching experience is being applied toward the requirements in lieu of an earned master's or doctorate degree in nurse education.

List most recent education preparation and teaching experience first. Attach additional pages as necessary.

A. EDUCATIONAL PREPARATION

Name of Institution	Location City/State	Graduation Date	Degree Earned or # of Credits	Major	Minor

B. NURSING INSTRUCTION EXPERIENCE*

*Complete this section only if a master's or doctorate degree in nurse education has not been earned and teaching experience is being applied in lieu of a master's or doctorate degree in nursing.

From Month/Year	To Month/Year	Part-time or Full-Time	Employer/School	Location City/State	Position/Job Title

Educational Administrator

Title

Signature

Date

Telephone Number

Email Address