

# Wisconsin Department of Safety and Professional Services

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## BOARD OF NURSING

### OUT-OF-STATE NURSING SCHOOL SELF-EVALUATION REPORT FOR CONTINUATION OF APPROVAL

Wisconsin Administrative Code Chapter N 1.10 requires schools of nursing to file an annual self-evaluation report on a form approved by the Board of Nursing in order to maintain continuation of Board approval.

**NOTE: This form must be completed by out-of-state nursing schools only;** in-state nursing schools must complete form #3028, *In-State Nursing School Self-evaluation Report for Continuation of Approval*.

Submit this completed and signed report to: [dspsexaminationoffice@wisconsin.gov](mailto:dspsexaminationoffice@wisconsin.gov).

Name of nursing school: \_\_\_\_\_

Nursing school address: \_\_\_\_\_  
\_\_\_\_\_

Nursing program(s) (ADN, BSN, other): \_\_\_\_\_

Name of educational administrator: \_\_\_\_\_

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### CHAPTER N 1.06 (2) SCHOOL OF NURSING CONTINUED APPROVAL

1.  Yes  No School is approved by the Board of Nursing of the state where the school is located. Provide an explanation for "no" response: \_\_\_\_\_  
\_\_\_\_\_

2.  Yes  No School is accredited by the Commission on Collegiate Nursing Education (CCNE) or by the Accreditation Commission for Education in Nursing (ACEN). Provide an explanation for "no" response: \_\_\_\_\_  
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Educational Administrator

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Title

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Signature

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Date

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Telephone Number

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Email Address