

FACULTY APPROVAL / RESIGNATION NOTIFICATION
(Submit forms in DUPLICATE)

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EDP-P-02 (Rev. 06/02)

INSTRUCTIONS:

Print or type. Complete **BOTH SIDES** of form for Faculty Approval.
Check a box for approval or resignation notification.
Provide the appointee with a photocopy of this form after it has been approved by a BRN consultant.

Program Name:		
Appointee's Name:		
CA RN License:	Expiration Date:	Verified by:

CLASSIFICATION AND STATUS

In addition to California Code of Regulations (CCR) Section **1425**, all faculty must meet CCR section **1424(h)**, which states nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned and Section **1420(c)**, which defines clinically competent to mean that a nursing program faculty member possesses and exercises the degree of learning, skill, care and experience ordinarily possessed and exercised by staff level registered nurses of the clinical unit to which the instructor is assigned.

<p>Faculty Approval / Resignation Notification: Check one box. Complete Page 1 for all approvals / resignation notifications.</p> <p><input type="checkbox"/> Initial Faculty Approval (Submit prior to employment) Complete Second Page: Section A for Instructor. Section B for Assistant Instructor Section C for Clinical Teaching Assistant.</p> <p><input type="checkbox"/> Faculty Reclassification (Complete Second Page) Attach previous approval form and documentation to demonstrate qualifications for requested change.</p> <p><input type="checkbox"/> Faculty Resignation (Complete only the top section; submit only one form) Effective Date _____</p>	<p>Clinical Assignment Area(s) Requested: (Check the area(s) next to the classification being requested)</p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Classification</th> <th>M-S</th> <th>O</th> <th>C</th> <th>P/MH</th> <th>G</th> </tr> </thead> <tbody> <tr> <td>Instructor</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Assistant</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Clinical Teaching Assistant</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p style="text-align: center; font-size: small;">M-S = Medical-Surgical O = Obstetrics C = Children P/MH = Psych/Mental Health G = Geriatrics</p>	Classification	M-S	O	C	P/MH	G	Instructor						Assistant						Clinical Teaching Assistant					
Classification	M-S	O	C	P/MH	G																				
Instructor																									
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The above information is verified by:

Name of Program Director	Signature:	Date:
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For Board Use Only: BRN Copy Program Copy

NEC / Approval Date	Approved Clinical Area(s)					Approved Classifications		
	M-S	O	C	P-MH	G	I	AI	CTA

Date: _____ NEC _____

Does not qualify for _____ for the reason(s) listed below. Resubmit with **COMPETENCY EVIDENCE**.

- Lacks required education.
- Lacks previous teaching experience in pre-or post-licensure nursing programs or course in practice teaching.
- Lacks one year of professional nursing experience.
- Lacks evidence of clinical competence

Other: _____

SECTION A - INSTRUCTOR

Section **1425(d)** states, "An instructor shall meet the following requirements: (b)(1) A Master or higher degree from an accredited college or university which includes course work in nursing, education, or administration. If degree other than in nursing submit information verifying course work in nursing education."

COLLEGE/UNIVERSITY/CITY/STATE	DEGREE & YEAR COMPLETED	AREA OF PREPARATION

1425(d)(2) Completion of (1) at least one year's experience teaching courses related to nursing OR (2) a course which includes **PRACTICE IN TEACHING NURSING**. Submit official course description to verify course content.

1. COLLEGE/UNIVERSITY/CITY/STATE	COURSE CONTENT/AREA	FROM MONTH/YR	TO MONTH/YR
2. COLLEGE/UNIVERSITY/CITY/STATE (Teaching in Pre-Post RN program)	PRACTICE TEACHING COURSE	UNITS	DATE

1425(b)(4) At least one year's continuous, full-time experience in **direct patient care practice** as a registered nurse; list most recent.

AGENCY NAME AND CITY/STATE	POSITION	CLINICAL AREA	FROM MONTH/YR	TO MONTH/YR

SECTION B - ASSISTANT INSTRUCTOR

1425(e) An assistant instructor shall have: (1) A Baccalaureate degree from an accredited college which shall include courses in nursing, or in a natural behavioral or social science relevant to nursing practice;

COLLEGE/UNIVERSITY AND CITY/ STATE	YEAR	AREA OF PREPARATION	DEGREE

1425(e)(2) At least one year's continuous, full-time experience in **direct patient care practice** as a registered nurse, list experience within the last 5 years.

AGENCY NAME AND CITY/STATE	POSITION	CLINICAL AREA	FROM MONTH/YR	TO MONTH/YR

SECTION C - CLINICAL TEACHING ASSISTANT

1425(f) A clinical teaching assistant shall have had at least one year's experience, within the previous five years, as a registered nurse providing **direct patient care**.

AGENCY NAME AND CITY/STATE	POSITION	CLINICAL AREA	FROM MONTH/YR	TO MONTH/YR