## Kansas State Board of Nursing Minor Curriculum Change for Nursing Programs

60-2-104 (h) Prelicensure 60-17-105 (e)

Date:		
Name of Program:		<b>ken</b> ance Officer Review
Program Administrator Include credentials:		
Parent Institution:		
Address of Institution:		
Level of the Program for which the change Is being requested		
Briefly describe the Change being requested:		revisions of a course's:  e Officer Review Inly)  Deferred
Each nursing education program  content,  title,  objectives, or ou		revisions of a course's:
	Action Taken Nursing Education Complianc (Minor requests o	e Officer Review
☐ Approved	☐ Not Approved	Deferred
Nursing Education	on Compliance Officer	Date

## Instructions

- 1. Submit to KSBNs Nursing Education Compliance Officer for approval
- 2. Before implementation of the change, the signed Minor Curriculum Change form must be received by the program.

## Provide:

- Description of the change
- Comparison of old and new
- Rationale for the change