WISCONSIN STATE BOARD OF NURSING

Chapter N 10

FORMS

Printed forms Mimeographed forms and letters N 10.03 Typed forms N 10.01 N 10.02

N 10.01 Printed forms. (1) REGISTRATION AND LICENSURE.

(a) Professional nurse by examination.

1. Application (A1).

2. Student final record (A2).

(b) Professional nurse by endorsement.

1. Application (B1).

2. Professional educational record (B2).

(c) Trained practical nurse,

1. Application (C1).

2. Summary record (C2).

(2) RE-REGISTRATION AND RE-LICENSING.

(a) Application for re-registration (D2), (R.N.).

(b) Application for renewal (D11), (T.P.N.).

(3) GENERAL FORMS.

(a) Faculty qualification record (E1).

(b) Certificate of education (E2).

(c) Monthly report—accredited schools (E3).
(d) Monthly report—Wisconsin accredited agencies participating in educational program (E4).

(e) Admission card to examination (E6).

(f) Scholarship application (E8),

(g) Endorsement form (E11).

History: 1-2-56; renum. from N 9.01 to be N 10.01 and am. Register, June 1963, No. 90, eff. 7-1-63.

N 10.02 Mimeographed forms and letters. (1) FORMS.

(a) Annual questionnaire to recipients of State Board of Nursing scholarships (MB2).

(b) Agreement with scholarship recipient (MB5).

(c) Preliminary report for accreditation of basic nursing program (MB8).

(d) Preliminary report for the accrediting of a public health agency (MB9).

(e) Faculty questionnaire (MB21).
(f) Recommendations from employers for trained practical nurse applying for licensure (MC3).

(g) Preliminary report for the accrediting of schools of practical nursing, Part 1 (MC8).

(h) Preliminary report for the accrediting of schools of practical nursing, Part II (MC9).

(i) Annual report Wisconsin accredited nursing programs and cooperating institutions/agencies (ME3).

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(j) Change of name affidavit (ME5).

(k) Not practicing affidavit (ME6).

(1) Qualifications of applicants (nomination for committees of examiners) (ME7).

(m) Citizenship affidavit (ME8).

(n) Verification of professional program. (International Council ' of Nurses request) (ME13). (o) Claim for per diem (ME20).

(2) LETTERS.

(a) Letter to employers (for names of registered nurses and trained practical nurses employed) (ME1).

(b) Letter of inquiry regarding applicants for scholarships (ME2). History: 1-2-56; renum. from N 9.02 to be N 10.02 and am. Register, June, 1963, No. 90, eff. 7-1-63.

N 10.03 Typed forms. (1) Application to conduct an accredited school of nursing (T1),

(2) Agreement to conduct an accredited school of nursing (T2). Forms may be requested from the Wisconsin State Department of Nurses, 119 Monona Avenue, Room 607, Madison 3, Wisconsin.

History: 1-2-56; renum, from N 9.03 to be N 10.03 and am, Register, June, 1963, No. 90, eff. 7-1-63.

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