

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

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

Date: _____

Name of Program: _____

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: _____

Each nursing education program shall submit minor curriculum revisions of a course's:

- content,
- title,
- objectives, or outcomes

Action Taken
Education Specialist Review
(Minor requests only)

Approved Not Approved Deferred

Education Specialist

Date

Instructions

1. Submit to the Board of Nursing's education specialist 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

Dec04/nm