

# Licensure, Website & Social Media

Adrian Guerrero – KSBN Director of Operations  
Sheila Rice – eGov Support Analyst



# Licensing



# Licensing Department

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785-296-2967

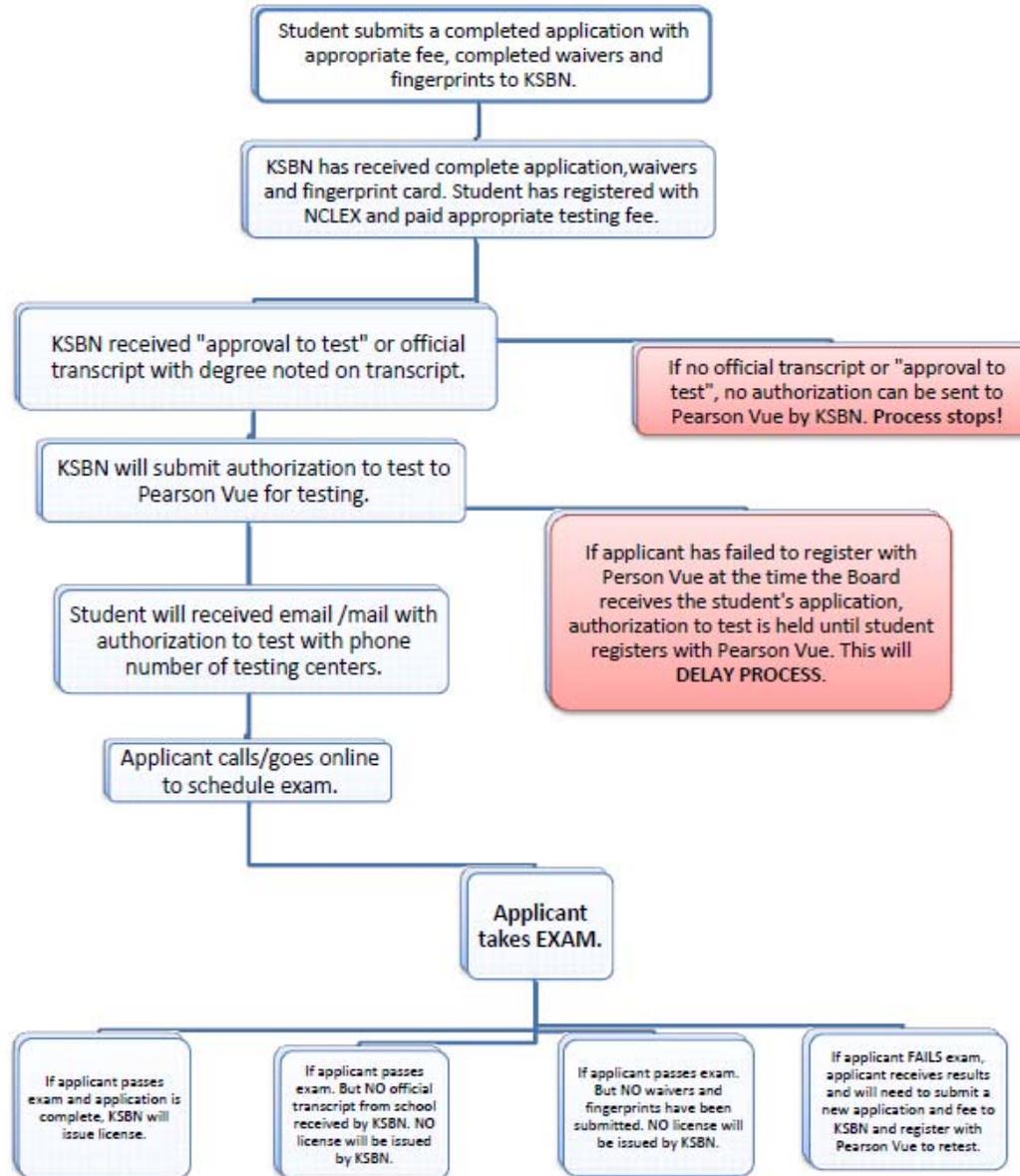
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785-296-2926

# Initial Application Process

# Initial Application Process



**KANSAS STATE BOARD OF NURSING**

**LANDON STATE OFFICE BUILDING**

**900 SW JACKSON, SUITE 1051**

**TOPEKA, KS 66612-1230**

FINGER PRINT CARD

ORDER FORM

Name and complete address required to mail out a card, all incomplete submissions will be discarded. The telephone number and email address are optional and only used if we need to contact you about the finger print card order.

Name

Street Address

City

State

Zip Code

Telephone

E-Mail Address

**Attestation**

I realize that this application is a legal document and by pressing the Submit button you are declaring under penalty of perjury under the laws of the State of Kansas that the information I have provided is true and correct to the best of my knowledge.

If all the above information is correct please press the Submit button .

Otherwise please go back and correct any information that is necessary.

---

# Licensing



Menu

Register a Person

### Welcome to the Kansas Board of Nursing

This site was created to give Nursing licensees the opportunity to manage their licenses online.

If you haven't already registered and wish to renew an existing practitioners license or address changes, click here to register (or click the **register a person** link on the left).

User Id:

Password:

Login

[Click here if you have forgotten your password.](#)

- Register a Person
- Input your information and Search



Menu

Login Page

### Search for Existing Personal/Professional Records

In order to renew an existing license, submit name or address changes, you must create a username and password and associate it to your records. This form allows you to search for your existing record.

1. Enter your information into *all three* fields below.
2. Press the **search button** to search for your record based on the information you provided.

Last Name:

Birth Date:

ex. 03/31/1950

SSN:

ex. 123456789

Search



Menu  
Login Page

### Initial Registration

We were unable to find your records based on the entered search criteria.

- If you do not currently hold a Nursing license with the Kansas State Board of Nursing and have not already submitted a paper application, the form below will allow you to register your personal information with the state and create a username and password. Complete the form below and press the **register** button to create your record. Once logged into the e-Government application you will be able to submit an electronic license application.
- If you currently hold a Nursing license with the Kansas State Board of Nursing or have already submitted a paper application to the state, click [here](#) to search again. Do not complete the form below to register as this will not allow you to access your license records. If you cannot find your record, or if you wish to apply for a new license, please contact the Kansas Board of Nursing at 785-256-4529.

Note that Required Fields are marked with an (\*) asterisk.

#### Name

Name (First): <input type="text"/>	Date of Birth: <input type="text"/> Calendar
<small>ex. Mr.   Mrs.   Dr.</small>	<small>MMDDYYYY</small>
*First Name: <input type="text"/>	*SSN: <input type="text"/>
	<small>ex. 123-456-789</small>
Middle Name: <input type="text"/>	Gender: <input type="text" value="Please select a Gender"/>
*Last Name: <input type="text"/>	Ethnicity: <input type="text" value="Select"/>
Name Suffix: <input type="text"/>	Citizenship Status: <input type="text" value="Select"/>
<small>ex. Sr.   Jr.   III</small>	
National Provider ID: <input type="text"/>	

#### Address

Country: <input type="text" value="United States"/>	Phone: <input type="text"/>
<small>ex. 301-555-1212</small>	
*Line 1: <input type="text"/>	*Fax: <input type="text"/>
<small>ex. 123 Fourth St.</small>	<small>ex. 301-555-1212</small>
Line 2: <input type="text"/>	*Email: <input type="text"/>
<small>ex. Apt. 100</small>	<small>ex. username@domain.com</small>
*City: <input type="text"/>	
<small>Foreign Addresses: Enter city, region, postal code</small>	
*State: <input type="text" value="KS"/>	
*Zipcode: <input type="text"/>	
<small>ex. 02703 or 027051204</small>	

#### User ID

*Username: <input type="text"/>	
<small>ex. jsmith</small>	
*Password: <input type="text"/>	*Confirm Password: <input type="text"/>
<small>Minimum 8 characters</small>	
*Password Question: <input type="text"/>	*Password Answer: <input type="text"/>
<small>ex. Favorite color?</small>	<small>ex. Blue</small>

Register

Left:  
First time registration, must complete everything.



Menu  
Login Page

### Registration

We were able to find your records based on the entered search criteria. Please review the information below and double check that the search returned your record.

- If the record below is yours, enter a username and password in the form below and press the **register** button to create your record. Once logged into the e-Government application you will be able to maintain your records, apply for an additional license, and renew an existing license.
- If the information below is not yours, click [here](#) to search again. If your records can not be found, click [here](#) for information on contacting the proper department/agency/board.

NOTE: Required fields are marked with an asterisk (\*).

#### Name

Name (First): <input type="text"/>	Birth Date: <input type="text" value="3/31/1990"/>
*First Name: <input type="text" value="Joe"/>	SSN: <input type="text"/>
Middle Name: <input type="text"/>	Gender: <input type="text" value="Male"/>
*Last Name: <input type="text" value="Jones"/>	personEthnicity: <input type="text" value="Other"/>
Name Suffix: <input type="text"/>	personCitStatus: <input type="text" value="Select"/>

#### Address

Country: <input type="text" value="United States"/>	Phone: <input type="text" value="7852564529"/>
Line 1: <input type="text" value="500 BW Jackson"/>	*Fax: <input type="text"/>
Line 2: <input type="text"/>	*Email: <input type="text" value="njackson@ksbn.state.ks.us"/>
*City: <input type="text" value="Topeka"/>	
State: <input type="text" value="KS"/>	
Zip Code: <input type="text" value="66602"/>	

#### User ID

User ID: <input type="text" value="JonesJoe"/>	<input type="text" value="X"/>
<small>ex. jsmith</small>	
*Password: <input type="text"/>	*Confirm Password: <input type="text"/>
<small>Minimum 8 characters</small>	
*Password Question: <input type="text" value="First Color"/>	*Password Answer: <input type="text" value="Mustang"/>
<small>ex. Favorite color?</small>	<small>ex. Blue</small>

Register

Right:  
Already registered, but don't remember User ID or Password

# Check Status of Your Application



# Check the Status of your Application On Line

- Check the status 24 hours a day-7days a week
- May check a new application or renewal
- log into [www.ksbn.org](http://www.ksbn.org)
- Click on “Check Status of Application”.
- Simply enter your UserID and Password or register so you will have a UserID and Password.
- To check the status of your application click on “view checklist” for each license you are applying for or renewing
- The licensure requirements will display showing what has been completed and what is outstanding. The outstanding items are marked **unchecked**.
- Items that have been received will be marked completed



#### Menu

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User Id:

Password:

Login

Click [here](#) if you have forgotten your password.



# Kansas Online Nursing License Renewal

## Menu

Renew License

Address Change

Logout

## Licensing Home Page

The list below displays all licenses currently held by you and all licenses currently being applied for. To renew a license, click the **renew license** link on the left.

### Personal Information

bob doe  
900 SW Jackson, Suite 1051 S  
Landon Building  
Topeka, KS 66612  
United States

Phone: 7858175939

Cell:

Email: [it@ksbn.state.ks.us](mailto:it@ksbn.state.ks.us)

### Licenses

Registered Nurse		<a href="#">View Checklist</a>	
License Number:	13-0001-121	License Status:	Active
Issue Date:		Expiration Date:	2/27/2010
Registered Nurse		<a href="#">View Checklist</a>	
License Number:		License Status:	Reinstatement Pending
Issue Date:		Expiration Date:	
Registered Nurse		<a href="#">View Checklist</a>	
License Number:	14-594291-121	License Status:	Active
Issue Date:	12/6/1998	Expiration Date:	1/30/2010



# Kansas Online Nursing License Renewal

## Menu

Licensing Home Page

Logout

## Checklist Information

The license requirements for this license are listed below. Outstanding items are marked **unchecked**.

### License Requirements

Item	Fee	Amount Due	Status	Complete Date	Processed By
Completed Application			Completed	Feb/15/12	Shelia Rice
License Fee			Completed	Dec/12/11	Shelia Rice
Fingerprint Fee			Completed	Feb/15/12	Shelia Rice
Approved by Legal			Completed	Feb/15/12	Shelia Rice
Transcript from school of nursing			Completed	Feb/15/12	Shelia Rice
Passed NCLEX			Completed	Feb/15/12	Shelia Rice



Monday, October 27, 2014

- Forms
- Nurse Practice Act
  - Agency Fees
- Licensing Division
- Education Division
  - Legal Division
  - Board Meetings
- State Employment
  - Site Tools
  - Site Map
  - Contact Us

Landon State Office Building  
900 SW Jackson Street  
Suite 1051  
Topeka, Kansas 66612-1230  
Main: 785-296-4929  
Fax: 785-296-3929

Welcome to the Kansas State Board of Nursing

**Ebola Virus Information - NEW**

**General Information**

- [Nurse Practice Act](#)
- [Nursing Newsletter Library](#)
- [License Verifications](#)
- [On Site Application Process](#)
- [Licensees in Military Service](#)
- [Position Statements](#)
- [Proposed Regulations / Notice of Hearing](#)
- [Approved Regulations](#)
- [Attorney General Opinions](#)
- [Annual Report FY 2013](#)
- [Multi-Year Pass Rates](#)
- [Discipline Case List](#)
- [Kansas Nurse Assistance Program \(KNAP\)](#)
- [Board Meeting Packets](#)

**Scholarships - NEW**

- [KSBN Undergraduate Scholarship](#)
- [Dr. Nancy Mosbaek Doctorate in Nursing Scholarship](#)

**Help**

- [Frequently Asked Questions](#)
- [Helpful Links](#)

**Contact Information**

- [Have Questions, Comments, or Suggestions? Give us your feedback.](#)
- [KSBN Staff](#)
- [Board Members](#)
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- [Office Hours and Holidays](#)

**FYI**

- [New Advance Practice statutes effective January 1, 2012](#)
- [Guidelines in Finding CNE for APRNs](#)
- [WALLET CARDS WILL NO LONGER BE ISSUED ON RENEWAL OF A](#)

**Online Services**

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- [Check Status of Application](#)
- [Online Address Change](#)
- [KS Automated Nurse Notification](#)
- [License Verification Database](#)
- [Online Education Annual Report](#)
- [New or Renewal 5 Year CNE Provider](#)
- [Finger Print Card Order Form](#)

**Need HELP with Online Services?**

- [Notice for Users of Windows 8 & Internet Explorer 10](#)
- [How Do I Register or Change My Password?](#)
- [How Do I Renew My License Online?](#)
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**How Are We Doing?**

- [Customer Service Survey](#)



**Keep Informed - Follow Us**



**Become a KS Emergency Volunteer**



[www.ksbn.org](http://www.ksbn.org)



Friday, October 14, 2016

- Forms
- Nurse Practice Act
- Agency Fees
- Licensing Division
- Education Division
- Legal Division
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- State Employment
- Site Tools
- Site Map
- Contact Us

Landon State Office Building  
900 SW Jackson Street  
Suite 1051  
Topeka, Kansas 66612-1330  
Main: 785-296-4929  
Fax: 785-296-3929

## Welcome to the Kansas State Board of Nursing

### General Information

- Nurse Practice Act
- Nursing Newsletter Library
- License Verifications
- On Site Application Process
- Licenses in Military Service
- Position Statements
- Proposed Regulations / Notice of Hearing
- Approved Regulations
- Attorney General Opinions
- Annual Report FY 2015
- Multi-Year Pass Rates for KS Nursing Programs
- Discipline Case List
- Kansas Nurse Assistance Program (KNAP)
- Public Notice of Meetings
- Board Meeting Packets
- LMHT Licensure Information

### Help

- Frequently Asked Questions
- Helpful Links

### Contact Information

- Have Questions, Comments, or Suggestions? Give us your feedback.
- KSBN Staff
- Board Members
- Directions to KSBN
- Office Hours and Holidays

### FYI

- KSBN Undergraduate Scholarship Application Instructions - NEW
- Dr. Nancy Mosabeek Doctorate in Nursing Scholarship Application - NEW
- Certified Nurse Midwife Council Meeting - NEW
- New Advance Practice statuses effective January 1, 2012
- Guidelines in Selecting CNE for APRNs

### Online Services

- Online Endorsement Application Instructions **NEW**
- Online Exam Application Instructions **NEW**
- Online Reinstatement Application Instructions **NEW**
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- Online Education Annual Report
- New or Renewal 5 Year CNE Provider
- IV Therapy Annual Report
- Single Program Offering Application
- Finger Print Card Order Form
- Mailing Date List Request Form

### Need HELP with Online Services?

- Notice for Users of Windows 8 & Internet Explorer 10
- How Do I Register or Change My Password?
- How Do I Renew My License Online?
- How Do I Change My Address Online?
- How do I Check the Status of My Application?

### How Are We Doing?

- Customer Service Survey



### Keep Informed - Follow Us



**Introduction**

Welcome to the Kansas Board of Nursing License Verification Web site. This page is the official verification Web site of the [Kansas State Board of Nursing](#).

The Kansas Board of Nursing License Verification system provides for quick online nursing license verifications of active licensees. To use this system, you will need to know the name or the license number of the person for whom you are searching.

- Up to 5 results will be displayed per search

**NEW!** The KSBN License Verifications app is now mobile!



→ Begin Searching

**NURSE PRACTICE ACT  
STATUTES & ADMINISTRATIVE  
REGULATIONS**



**July 2014**

**KANSAS STATE BOARD OF NURSING  
LANDON STATE OFFICE BUILDING  
900 SW JACKSON, SUITE 1051  
TOPEKA, KS 66612-1230  
www.ksbn.org**



**Why Kansas Does Not Belong to the Nurse Licensure Compact (NLC)**

Board Members and staff at the Kansas State Board of Nursing receive many calls and e-mails asking why Kansas does not belong to the nurse licensure compact. The Nurse Licensure Compact (NLC) was launched in 2000 to allow for nurses to see one multistate license and be able to practice in their home state the state they live in and the state which belong to the NLC.

In 1999 the Kansas State Board of Nursing equated the Kansas Attorney General review a Compact language and issue an opinion. On January 9, 1999 Attorney General Curtis Staveland issued an opinion (99-3) that if Kansas joined the Compact it would be an unconstitutional delegation of legislative authority because it grants her states the unqualified right to determine its qualifications for the practice of nursing in its state by referendum.

The mission of the Board of Nursing is to assure the citizens of Kansas safe and competent practice by nurses and that mission is met by the requirement set forth in statutes and regulations enacted by legislation by the Legislature and the Board of Nursing. By joining the compact at this time, we would not be fulfilling the statutory mission and would allow nurses to work in Kansas and not meet Kansas requirements. Listed are a few of the examples why joining the compact would be unconstitutional and not fulfilling the Board's mission.

Kansas requires fingerprints for licensure but there are currently five states in the compact: Colorado, Maine, Nebraska, Virginia, and Wisconsin that do not require fingerprints. States require fingerprints for a variety of the history of the applicant. It ensures the state that the applicant is worthy of the public trust to practice as a nurse. If Kansas was in the compact, we would be allowing nurses from five states to practice in Kansas without the knowledge of their background. It is unconstitutional to let a nurse from another state to come to Kansas with a compact license who has not been fingerprinted. It is also a question of fairness for the nurses who live and apply for licensure in Kansas. Why should a nurse from another state be allowed to work in Kansas on a compact license if they have a criminal history that would preclude professional licensure if they lived in Kansas? Why should a Kansas nurse have the added expense of fingerprints when a nurse from a state that does not require fingerprints can

work in Kansas with a compact license? Kansas statute K.S.A. 65-1219 (c) states that no license or authorization to practice shall be granted to a person with a felony conviction for a crime against persons as specified in article 54 of chapter 21 prior to the report it is now Article 54 chapter 21 of the Kansas Statutes Annotated. Crimes listed in this article are murder and aggravated offenses against a person. This statute has a public protect for the public. There are many states in the Compact that do not have an absolute bar for licensure. It would be unconstitutional for Kansas to join the Compact as it would allow for a nurse who was convicted of a felony against persons to live in a state that doesn't have the absolute bar (maine, Missouri, Nebraska, Colorado, etc) and come to Kansas to work as a nurse, but if they lived in Kansas, they would never be licensed as a nurse. Professional and practical nursing programs prepare a graduate for licensure as a RN or LPN. Clinical experience in conjunction with didactic instruction lead to a compact graduate. Kansas nursing licensure requirements include didactic and clinical experience across the lifespan to ensure a comprehensive nursing education. The licensure examination (NLEX) is designed to test knowledge, skills and abilities essential for the safe and effective practice of nursing at the entry level. Clinical experience across the lifespan assist the nursing student to apply



**Keep Informed - Follow Us**



**Become a KS Emergency Volunteer**



**Kansas Board of Nursing  
NOTICE OF NURSING LICENSURE RENEWAL**

Your current license to practice nursing in the State of Kansas will expire in approximately ninety (90) days. This notice provides information on the options available to renew your license. You may renew your license two ways, **ELECTRONICALLY** or **PAPER**. Submission of information does not guarantee your license has been processed. Please read all directions included with the application thoroughly.

**ELECTRONICALLY:**  
Go to [www.ksbn.org](http://www.ksbn.org) and click on "ONLINE LICENSURE RENEWAL". You must register the first time you renew. To create your profile you will need the following:

1. Law Name
2. Date of Birth (ex: 01.01.1930)
3. Social Security Number (ex: 123456789)

**PAPER:**  
To obtain a paper application, go to [www.ksbn.org](http://www.ksbn.org) forms and print. Please allow adequate time for mailing. If the renewal application is not postmarked by the last day of the renewal month, reinstatement will be required and you will be unable to practice in Kansas until the reinstatement process is complete. Reinstatement can take up to ten (10) business days or more from receipt by the Board. The application must be completed in its entirety unless otherwise noted (i.e. optional) and submitted with the appropriate fee(s).

If you should have questions you can submit your questions to the board at [www.ksbn.org](http://www.ksbn.org), click "questions and comments" at the bottom of the page, or you can email the board via phone at 783-239-2420.

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**Kansas State Board of Nursing  
900 SW Jackson, Suite 1051  
Topeka, KS 66612**

**It's time to renew your license.**

**PLEASE PLACE STAMP HERE**

Suele Smith  
700 SW Jackson  
Topeka KS 66612

**DISCLAIMER/STATE**

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**EGov**

- ❖ Online License Renewal
- ❖ Online License Applications
- ❖ Online Address Change
- ❖ Online Status Check



**Menu**

- License Home Page
- Logout

### Application for License Renewal

Select the license you would like to renew from the list below otherwise all licenses will be renewed. If you have multiple renewable license, you can only submit one renewal application at a time. Complete the process for each license you would like to renew.

There are some cases where individuals are not eligible to use the online license renewal process. If you have questions, please contact the board.

**Renewable Licenses**

Registered Nurse	Continue		
License Number:	14-594291-121	License Status:	Active
Issued:	12/6/1998	Expiration Date:	5/31/2010

Kansas Board of Nursing
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**Menu**

- Address change
- Finish
- Licensing Home Page
- Logout

### Update Person Address

Update the information in the form below and press the **update** button to save the changes. **NOTE:** Required fields are marked with an asterisk (\*).

**Name**

Full Name: bob doe  
 Birth Date: 12/31/1975  
 SSN: 111111111

**Address**

Country: United States Phone: 7858175939  
ex. 3015551212

Line 1: 900 SW Jackson, Suite 1051 S Fax:

Line 2: Landon Building Email: it@ksbn.state

City: Topeka

Foreign Addresses: Enter city, region, postal code

State: KS

ZipCode: 66612 Get City from Zip  
ex. 02705 or 027051234

Next

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**Menu**

- Licensing Home Page
- Logout

### Checklist Information

The license requirements for this license are listed below. Outstanding items are marked **unchecked**.

**License Requirements**

Item	Fee	Amount Due	Status	Complete Date	Processed By
Completed Application			Completed	Oct/12/09	Tammie Bush
License Fee			Unchecked		Tammie Bush
Copy of current nursing license			Unchecked		Tammie Bush
30 hours of CE within the last two years			Unchecked		Tammie Bush
Approved by Legal			Unchecked		Tammie Bush

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Menu  
Register a Person

### Welcome to the Kansas Board of Nursing

This site was created to give Nursing licensees the opportunity to manage their licenses online.

If you haven't already registered and wish to renew an existing practitioners license or address changes, click [here](#) to register (or click the **register a person** link on the left).

User Id:

Password:

Login

[Click here if you have forgotten your](#)

Kansas Board of Nursing

© 200



Menu  
Login Page

### Search for Existing Personal/Professional Records

In order to renew an existing license, submit name or address changes, you must create a username and password and associate it to your records. This form allows you to search for your existing record.

1. Enter your information into *all three* fields below.
2. Press the **search** button to search for your record based on the information you provided.

Last Name:

Birth Date:   
ex. 03/31/1950

SSN:   
ex. 123456789

Search

Kansas Board of Nursing

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- Register a Person
- Search
- Input Demographics
- Click Register



Menu  
Login Page

### Initial Registration

We were unable to find your records based on the entered search criteria.

- If you do not currently hold a Nursing license with the Kansas State Board of Nursing and have not already submitted a paper application, the form below will allow you to register your personal information with the state and create a username and password. Complete the form below and press the **register** button to create your record. Once logged into the e-Government application you will be able to submit an electronic license application.
- If you currently hold a Nursing license with the Kansas State Board of Nursing or have already submitted a paper application to the state, click [here](#) to search again. Do not complete the form below to register as this will not allow you to access your licensure records. If you cannot find your record, or if you wish to apply for a new license, please contact the Kansas Board of Nursing at 785-296-4929.

Note that Required Fields are marked with an (\*) asterisk.

Name

Name (First):  \*Date of Birth:  Calendar  
ex. Mr. / Mrs. / Dr. MM/DD/YYYY

First Name:  \*SSN:   
ex. 123456789

Middle Name:  Gender:  Male

\*Last Name:  \*Ethnicity:  Other

Name Suffix:  Citizenship Status:  Select

National Provider ID:

Address

Country:  United States \*Phone:  7852964929  
ex. 30 155912

\*Line 1:  900 SW Jackson \*Fax:   
ex. 123 South St. ex. 30 15591212

\*Line 2:  \*Email:  k@knsn.state.k.s.us  
ex. Apt. 100 ex. usename@domain.com

\*City:  Topeka

Foreign Address ex. \*State:  KS  
State, city, region, postal code

\*Zipcode:  66612  
ex. 02108 or 021091224

User ID

\*User ID:

\*Password:  \*Confirm Password:   
Minimum 6 characters

\*Password Question:  First Car \*Password Answer:  [Lasting] X  
ex. Favorite color ex. Blue

Register

- Login
- Select Initial Application
- Select License Type and Obtain by Method



**Kansas Nursing License Portal**

**Menu**  
Login Page

You have successfully registered!  
Please log in....

**Kansas Board of Nursing** © 2009 System Automation Corporation



**Kansas Nursing License Portal**

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Renew License  
Demographics Update  
Reinstate License  
Cart  
Logout

**Licensing Home Page**

The list below displays all licenses currently held by you and all licenses currently being applied for. To renew a license, click the **renew license** link on the left.

**Personal Information**

Joe Jones  
900 SW Jackson  
Topeka, KS 66612  
United States

Phone: 7852964929  
Cell:  
Email: it@ksbn.state.ks.us

**Licenses**

No license

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**Kansas Nursing License Portal**

**Menu**  
Licensing Home Page  
Logout

**Application for Licensure**

Select the profession, type and application method for the license you'd like to submit application.

**PLEASE READ BEFORE MAKING SELECTION:**

State/Providence: Enter the state of which you were originally licensed for the license type in which you are currently applying for in Kansas.

**IMPORTANT:** Applicant's who fall into one of the categories below will need to contact the KSBN office prior to reapplying online. KSBN staff will need to make you eligible to reapply for Kansas licensure/examination:

- Applicants who need to reapply to retake the NCLEX;
- Applicants who started the application process but their application expired at six (6) months and want to start the process over;

**STOP! PLEASE READ:**

If you are REINSTATING an exempt, inactive or expired LPN, RN or RNA license, you'll need to click "Add to Cart" button, review the fee(s), and then select the "Back to Home Page" button at the bottom of the Cart page. At the home page select the "Initial Application" on the menu. Select the profession type and method for your temporary permit.

If you are applying for an ADVANCED PRACTICE LICENSE for the first time and want a temporary permit, you'll need to click "Add to Cart" button, review the fee(s), and then select the "Back to Home Page" button at the Cart. At the home page select the "Initial Application" on the menu. Select the profession type and method for your temporary permit.

Once you've completed your application(s) and you are at the "cart" page you'll want to select the "checkout" button to pay the application(s) fee(s).

**License Type Selection**

Profession: --Select Profession--  
License Type: --Select License Type--  
Obtained By Method: --Select Obtained By--

**Start Application**

**Kansas Board of Nursing** © 2009 System Automation Corporation

**Kansas Nursing License Portal**

**Menu**

- Demographics
- Education
- Questions
- License Update
- Employment
- Finish
- Licensing Home Page
- Logout

**Education**

Your educational records are listed below. Press the **add button** to add new education records. If no changes are necessary, press the **complete button** to mark this step complete. Please add a new record for each Certificate/Degree separately.

No education records

**Add** **Complete**

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•Add Education

**Kansas Nursing License Portal**

**Menu**

- Demographics
- Education
- Questions
- License Update
- Employment
- Finish
- Licensing Home Page

**Add Education Record**

Enter your education information in the fields below. Press the **save button** when finished.

Profession: Nursing

School Type: Bachelors Degree Program

School: Wallace University

**Save** **Cancel**

ng © 2009 System Automation Corporation

•Select Degree Type and input your Nursing School Name

**Kansas Nursing License Portal**

**Menu**

- Demographics
- Education
- Questions
- License Update
- Employment
- Finish
- Licensing Home Page
- Logout

**Education**

Your educational records are listed below. Press the **add button** to add new education records. If no changes are necessary, press the **complete button** to mark this step complete. Please add a new record for each Certificate/Degree separately.

<a href="#">Delete</a>	<a href="#">Edit</a>	Wallace University
Profession:	Nursing	School Type: Bachelors Degree Program

**Add** **Complete**

Kansas Board of Nursing © 2009 System Automation Corporation

•Select Complete to move on



Menu	
<input checked="" type="checkbox"/>	Demographics
<input checked="" type="checkbox"/>	Education
<input type="checkbox"/>	Questions
<input type="checkbox"/>	License Update
<input type="checkbox"/>	Employment
<input type="checkbox"/>	Finish
Licensing Home Page	
Logout	

### Application Questions

Please answer the following question(s) by choosing the respective answer(s) from the drop-down menu(s). Click the **submit button** when you have answered the question(s).

Question	Answer
Have you ever been convicted of a misdemeanor or listed in KAR60-3-113?	Please Choose ▾
Have you ever been convicted of a felony?	Please Choose ▾
Are criminal proceedings pending in any federal, state or municipal court?	Please Choose ▾
Is an investigation and/or disciplinary action pending against any license, certification or registration (nursing or other)?	Please Choose ▾
Has any license, certification or registration (nursing or other) ever been denied, revoked, suspended, limited or disciplinary action taken by a licensing authority of any state, agency of the US government, territory of the US or country?	Please Choose ▾
Do you suffer from an impairment that affects your ability to practice nursing with reasonable skill and safety? Kansas law defines impairment as a physical or mental disability including deterioration through the aging process, loss of motor skill or abuse of drugs or alcohol (KSA 65-4924(a))	Please Choose ▾
Have you ever applied to take this NCLEX exam in any state/country?	Please Choose ▾
List the state/country that you made the application? (Enter NA if not applicable)	
List the dates that you made the application? (Enter 'No' if not applicable)	
How many times have you previously taken the NCLEX exam? Answer 'No' if Not Applicable.	
List the dates that you took the NCLEX exam. Answer 'No' if Not Applicable.	
<b>ENDORSEMENT/RESTATEMENT ONLY:</b> Have you worked in the Nursing Profession in Kansas over the past 5 years? Answer 'No' if Not Applicable.	Please Choose ▾
<b>ENDORSEMENT ONLY:</b> Do you wish to obtain a 120-day Temporary Permit? Answer 'No' if Not Applicable.	Please Choose ▾
<b>ENDORSEMENT ONLY:</b> Have you ever received a temporary permit in Kansas to practice as an LPN or RN? Answer 'No' if Not Applicable.	Please Choose ▾

If you have been convicted of a felony submit a certified copy of the court order outlining the charge(s), conviction(s) and sentencing order(s). A license will not be issued until the Kansas State Board of Nursing has fully reviewed the required documentation. K.S.A. 65-1120

### Attestation

By clicking the **submit button** you declare under penalty of perjury under the laws of the State of Kansas that the information provided above is true and correct to the best of your knowledge.

submit

- Answer ALL questions



- Demographics
  - Education
  - Questions
  - License Update
  - Employment
  - Finish
- Licensing Home Page  
Logout

### Update License Information

Use the form below to update the supplemental information. Press the **save** button to save the changes.

License Number: Pending  
Profession: Nursing  
License Type: Registered Nurse  
License Status: Pending  
Issued:  
Expired:

### Original License Information

Please complete the information below about your Original Nursing License. If you do not have a previous license then please enter 'NA' in the Original License # field in order to complete this part of your application.

Original License Type

Original License #

Original State of Licensure

Original License Status

- If no other Nursing License, place NA in the Original License Field



- Demographics
  - Education
  - Questions
  - License Update
  - Employment
  - Finish
- Licensing Home Page  
Logout

### Employment Information

This page displays the employment records associated with the person record. If you have worked as an RN, LPN or APRN within the past 5 years, you must list all Nursing employment for the last five (5) years.

Click the **edit link** to update an employment record. If no changes are necessary, press the **complete** button to mark this step complete and to proceed to the next step.

No employment records

- Include employment information if you've worked as a RN, LPN or APRN in the past 5 years.



- Menu**
- Demographics
  - Education
  - Questions
  - License Update
  - Employment
  - Finish
  - licensing Home Page
  - Logout

### Application Questions

Please answer the following question(s) by choosing the respective answer(s) from the drop-down menu(s). Click the **submit button** when you have answered the question(s).

Question	Answer
Have you ever been convicted of a misdemeanor or listed in KAR60-3-113?	Please Choose ▾
Have you ever been convicted of a felony?	Please Choose ▾
Are criminal proceedings pending in any federal state or municipal court?	Please Choose ▾
Is an investigation and/or disciplinary action pending against any license, certification or registration (nursing or other)?	Please Choose ▾
Has any license, certification or registration (nursing or other) ever been denied, revoked, suspended, limited or disciplinary action taken by a licensing authority of any state, agency of the US government, territory of the US or country?	Please Choose ▾
Do you suffer from an impairment that affects your ability to practice nursing with reasonable skill and safety? Kansas law defines impairment as a physical or mental disability including deterioration through the aging process, loss of motor skill or abuse of drugs or alcohol (KSA 65-4924(a)).	Please Choose ▾
Have you ever applied to take this NCLEX exam in any state/country?	Please Choose ▾
List the state/country that you made the application? (Enter NA if not applicable)	
List the dates that you made the application? (Enter 'No' if not applicable)	
How many times have you previously taken the NCLEX exam? Answer 'No' if Not Applicable.	
List the dates that you took the NCLEX exam. Answer 'No' if Not Applicable.	
<b>ENDORSEMENT/REINSTATEMENT ONLY:</b> Have you worked in the Nursing Profession in Kansas over the past 5 years? Answer 'No' if Not Applicable.	Please Choose ▾
<b>ENDORSEMENT ONLY:</b> Do you wish to obtain a 120-day Temporary Permit? Answer 'No' if Not Applicable.	Please Choose ▾
<b>ENDORSEMENT ONLY:</b> Have you ever received a temporary permit in Kansas to practice as an LPN or RN? Answer 'No' if Not Applicable.	Please Choose ▾

If you have been convicted of a felony submit a certified copy of the court order outlining the charge(s), conviction(s) and sentencing order(s). A license will not be issued until the Kansas State Board of Nursing has fully reviewed the required documentation. K.S.A. 65-1120

#### Attestation

By clicking the **submit button** you declare under penalty of perjury under the laws of the State of Kansas that the information provided above is true and correct to the best of your knowledge.

Submit

- All questions must have be answered
- A couple questions apply only to endorsement/reinstatement applicants, however Initial applicants will answer “no” to these questions



**Menu**

- Demographics
- Education
- Questions
- License Update
- Employment
- Finish

Licensing Home Page  
Logout

### Update License Information

Use the form below to update the supplemental information. Press the **save** button to save the changes.

License Number: Pending  
 Profession: Nursing  
 License Type: Registered Nurse  
 License Status: Pending  
 Issued:  
 Expired:

### Original License Information

Please complete the information below about your Original Nursing License. If you do not have a previous license then please enter 'NA' in the Original License # field in order to complete this part of your application.

Original License Type

**Original License #**

Original State of Licensure

Original License Status

- If you do not currently have a Kansas nursing license.



**Menu**

- Demographics
- Education
- Questions
- License Update
- Employment
- Finish

Licensing Home Page  
Logout

### Employment Information

This page displays the employment records associated with the person record. If you have worked as an RN, LPN or APRN within the past 5 years, you must list all Nursing employment for the last five (5) years.

Click the **edit** link to update an employment record. If no changes are necessary, press the **complete** button to mark this step complete and to proceed to the next step.

No employment records

↔

- Add work history only if worked as a RN, LPN or APRN, otherwise leave blank and click “complete”

- Menu
- Demographics
- Education
- Questions
- License Update
- Employment
- Finish
- Licensing Home Page
- Logout

### Application Summary

The changes you have made are listed below. Please review this information carefully to ensure it is correct. You may go back to any step in this process by clicking the corresponding link on the left.

When you have verified all information, click the **Submit** button to pay all applicable fees and submit your application.

#### Personal Information

Name: Joe Jones

License Address:  
 900 SW Jackson  
 Topeka, KS 66612  
 (913) 863-1234  
 7862964309

#### Licenses

Registered Nurse			
License Number:	Pending	License Status:	Pending
Issue Date:		Expiration Date:	

#### Question Responses

Question	Answer
Have you ever been convicted of a misdemeanor or listed in KRR 65-3-1127?	N
Have you ever been convicted of a felony?	N
Are criminal proceedings pending in any federal, state or municipal court?	N
Is an investigation and/or disciplinary action pending against any license, certification or registration (nursing or other)?	N
Has any license, certification or registration (nursing or other) ever been denied, revoked, suspended, limited or disciplinary action taken by a licensing authority of any state, agency of the US government, territory of the US or country?	N
Do you suffer from an impairment that affects your ability to practice nursing with reasonable skill and safety? (Kansas law defines impairment as a physical or mental disability including deterioration through the aging process, loss of motor skill or abuse of drugs or alcohol (KSA 65-424(a))	N
Have you ever applied to take the NCLEX exam in any state/country?	N
What state/country did you take the application? (Enter NA if not applicable)	NA
What is the date that you made the application? (Enter NA if not applicable)	NA
How many times have you previously taken the NCLEX exam? Answer NA if Not Applicable.	NA
What is the date that you took the NCLEX exam? Answer NA if Not Applicable.	NA
<b>REINSTATING ONLY:</b> Have you worked in the Nursing Profession in Kansas over the past 5 years? Answer NA if Not Applicable.	N
<b>REINSTATING ONLY:</b> Do you wish to obtain a 120-day Temporary Permit? Answer NA if Not Applicable.	N
<b>REINSTATING ONLY:</b> Have you ever received a temporary permit in Kansas to practice as an LPN or RN? Answer NA if Not Applicable.	N

#### Attestation

I realize that this application is a legal document and by pressing the **Submit** button, I am declaring under penalty of perjury under the laws of the State of Kansas that the information I have provided is true and correct to the best of my knowledge.

False or inaccurate information may be grounds for discipline of a license or application for a license.

If all the above information is correct please press the **Submit** button. Otherwise please go back and correct any information that is necessary.

#### STOP! PLEASE READ:

If you are REINSTATING an exempt, inactive or expired LPN, RN or RNA license, you'll need to click "Add to Cart" button, review the fee(s), and then select the "Back to Home Page" button at the bottom of the Cart page. At the home page select the "Initial Application" on the menu. Select the profession type and method for your temporary permit.

If you are applying for an ADVANCED PRACTICE LICENSE for the first time and want a temporary permit, you'll need to click "Add to Cart" button, review the fee(s), and then select the "Back to Home Page" button at the Cart. At the home page select the "Initial Application" on the menu. Select the profession type and method for your temporary permit.

Once you've completed your application(s) and you are at the "cart" page you'll want to select the "checkout" button to pay the application(s) fee(s).

- Menu
- Licensing Home Page
- Logout

### Cart

The list below shows all the items in your cart. To pay for the items, click the **checkout** button. Use the **update** and **remove** buttons to modify your cart.

#### STOP! PLEASE READ:

If you are REINSTATING an exempt, inactive or expired LPN, RN or RNA license, you'll need to click "Add to Cart" button, review the fee(s), and then select the "Back to Home Page" button at the bottom of the Cart page. At the home page select the "Initial Application" on the menu. Select the profession type and method for your temporary permit.

If you are applying for an ADVANCED PRACTICE LICENSE for the first time and want a temporary permit, you'll need to click "Add to Cart" button, review the fee(s), and then select the "Back to Home Page" button at the Cart. At the home page select the "Initial Application" on the menu. Select the profession type and method for your temporary permit.

Once you've completed your application(s) and you are at the "cart" page you'll want to select the "checkout" button to pay the application(s) fee(s).

Licensee	Token	Description	Fee Amount		
Joe Jones	569143873	Application for Nursing/Registered Nurse		Update	Remove
		Application Fee	\$75.00		
		Total	\$75.00		

•Double check information, if ok click "add to cart"

•Double check fees, click checkout to pay



- Menu
- Licensing Home Page
- Logout

### Application Fees

The accepted payment method is electronic check or credit/debit card (VISA, MasterCard, Discover or American Express.) There is a \$2.50 processing fee assessed for each online license application. Upon completion of the online application process, you will receive a confirmation screen. Without the confirmation number, it is possible the online application did not complete. You may contact Kansas.gov at 1-800-452-6727 for assistance. The Kansas State Board of Nursing reserves the right to assess you a \$30 service fee for all chargebacks and returns.

License Number	Description	Fee Amount
Pending	Application Fee	\$75.00

Pay by Credit Card  
 Pay by E-Check

- Select Pay by Method
- Click Pay Online
- Click Continue once you've entered all your payment information



### Payment Information for Test Application

#### Name and Address

\* Name:   
(as shown on credit card)

\* Address:

Secondary Address:

\* City:

\* State/Province:

\* Zip Code:   
(i.e. 00000-0000)

\* Country:

#### Account Information

Card Type:

\* Card Number:

\* Expiration Date:

#### Contact Information

\* Phone Number:   
(i.e. 000-000-0000)

\* E-mail Address:

### Payment Information for Test Application

Payment is NOT complete until you select "I Agree/Submit Payment" at the bottom of this page.

Please review the information below. If there are changes you need to make, select the "Make Changes" button to edit the information. After verifying all the information is correct, select the "I Agree / Submit Payment" button to proceed.

Your reference number is b25504e3c95cb8

#### Name and Address

Name: Joe Jones  
(as shown on credit card)  
Address: 930 SW Jackson  
City: Topeka  
State/Province: Kansas  
Zip Code: 66612  
Country: United States

#### Account Information

Card Type: Visa Card  
Card Number: \*\*\*\* \*1111  
Expiration Date: 01/2018

#### Contact Information

Phone Number: 785-298-4929  
E-mail Address: j5@ksbn.state.ks.us

[/ Make changes](#)

#### Cost Information

SKU	ID	Description	Quantity
APPLICATION FEE	000761	Application Fee	1

Total Order Amount: \$75.00

Understand that the above amount will be charged to my credit card, and that my credit card billing statement will show this amount as paid to "Kansas.gov KanPay Test". Kansas.gov reserves the right to assess you a \$15 service fee for all chargebacks and returns.

Please be patient once you have hit the "I Agree / Submit Payment" button, it may take up to 30 seconds before your order is completed. Upon completion you will be returned to the "Test Application".

#### NOTICE:

For Customers with Debit Cards: Please note our Originator ID has changed. Please contact your financial institution and ask them to allow debits from Originator ID 1522077561. Failure to allow debits by this Originator ID could cause your ACH debit to fail. Please contact our Help Center with any questions. helpcenter@ksbn.org

Your reference number is b25504e3c95cb8

[I Agree / Submit Payment](#) | [Diagnose / Cancel Order](#)

### Transaction Status

Your transaction has been successfully authorized.

Please do not use the browsers back button.

You will be redirected back to Test Application, where this action will be completed.

IMPORTANT: If for some reason the redirection fails or does not redirect to Test Application within 30 sec. then you MUST click the link below to complete your order.

[Test Application](#)

#### Menu

[Licensing Home Page](#)

[Logout](#)

### Application Submitted

Thank you for using the Kansas State Board of Nursing Online Services.

If you provided an email address, you will receive a confirmation that your application and payment was submitted.

Print this screen as a confirmation of payment.

If you submitted an Online Renewal Application, you may be selected for a CNE Audit. If you are selected for an audit, you will have 21 working days to submit copies of your continuing education certificates.

#### Application Information

Date Submitted: 17 October 2016  
Applicant Name: Joe Jones  
License Number:  
Agency: KSBON  
Process: Payment Cart

#### Payment Information

Authorization Code: 17517394  
Received Date: 10/17/2016 9:46:59 AM  
Transaction #: b25504e3c95cb8  
Fee Amount: \$75.00

For general license renewal questions, contact the Kansas State Board of Nursing

- Email: [help@ksbn.state.ks.us](mailto:help@ksbn.state.ks.us)
- Call (785) 298-4929 during the hours of 8am-4:30pm, Monday - Friday

Submission of information does not guarantee your license has been processed.

[Print Receipt](#)

# License Cards



Friday, February 17, 2012

[Home](#) > WALLET CARDS WILL NO LONGER BE ISSUED ON RENEWAL OF A LICENSE

## WALLET CARDS WILL NO LONGER BE ISSUED ON RENEWAL OF A LICENSE

Starting July 1, 2010 you will no longer receive the usual wallet card ("license") that you are accustomed to receiving. The change in procedure was made for public protection and also as a fiscal savings due to the decrease of budget the board has been required to take in FY 09 and FY 10.

It is estimated that \$16,000 will be saved yearly with this change.

# Address Change



**Kansas Online Nursing License Renewal**

**Menu**

- Address change
- Finish
- Licensing Home Page
- Logout

### Change Person Address

This Process can be used to change your address and contact information. If you need to make a change of name or other personal details, you will need to contact the board.

**Kansas Board of Nursing** © 2009 System Automation Corporation



**Kansas Online Nursing License Renewal**

**Menu**

- Address change
- Finish
- Licensing Home Page
- Logout

### Update Person Address

Update the information in the form below and press the **update button** to save the changes. **NOTE:** Required fields are marked with an asterisk (\*).

**Name**

**Full Name:** bob doe  
**Birth Date:** 12/31/1975  
**SSI:** 111111111

**Address**

**Country:**  **Phone:**   
ex. 3015551212

**Line 1:**  **Fax:**

**Line 2:**  **Email:**

**City:**   
Foreign Addresses:  
Enter city, region, postal code

**State:**

**ZipCode:**    
ex. 02705 or 027051234

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# Verifications



## Introduction

Welcome to the Kansas Board of Nursing License Verification Web site. This page is the official verification Web site of the [Kansas State Board of Nursing](#).

The Kansas Board of Nursing License Verification system provides for quick online nursing license verifications of active licensees. To use this system, you will need to know the name or the license number of the person for whom you are searching.

- Up to 5 results will be displayed per search

**NEW!** The KSBN License Verifications app is now mobile!



→ Begin Searching



## Kansas Automated Nurse Notification System



### Account Information

Kansas State Board of Nursing 1 (ksbn1)

Subscription Type: Tier 3 Edit Information Change Password Log Out

### Recent Activity

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z ALL

Page 1 of 1

Select Licensee	Licensee Name <	Profession	License Number	License Expiration Date	Activity
<input type="checkbox"/>	Mary Irene Blubaugh	RN	13-50237	01/31/2012	Status changed
<input type="checkbox"/>	Melissa Dee Boyle	LPN	23-30466	10/31/2011	Expired
<input type="checkbox"/>	Eva Amy Curtis	RN	14-49873	10/31/2013	Renewed
<input type="checkbox"/>	Tammy Lynn Eastland	LPN	23-26613	10/31/2011	Expired
<input type="checkbox"/>	Christina Louise Espinosa	RN	13-76172	10/31/2011	Expired
<input type="checkbox"/>	Jeffrey E Estopare	RN	13-70171	11/30/2011	Unchanged
<input type="checkbox"/>	Greg Stafford Gaba	RN	14-77452	11/30/2011	Unchanged
<input type="checkbox"/>	Steven Lynn Hull	RN	13-96199	01/31/2012	Status changed
<input type="checkbox"/>	Helen Corene Lewis-brown	RN	14-53292	01/31/2012	Status changed
<input type="checkbox"/>	Mary E Peterson	LPN	23-29020	11/30/2011	Unchanged
<input type="checkbox"/>	Ethel Mae Ricketts	LPN	23-22600	11/30/2011	Unchanged
<input type="checkbox"/>	Nicole Helen Sloan	RN	13-98936	10/31/2011	Expired
<input type="checkbox"/>	Richard Howard Swan	RN	13-66480	10/31/2013	Renewed
<input type="checkbox"/>	Nakisha Denise Webster	LPN	23-29710	10/31/2013	Renewed
<input type="checkbox"/>	Mickey Lee Whitney	LPN	23-12715	10/31/2011	Expired

Page 1 of 1

Status recently changed  Has disciplinary actions  Renewed  30 days or less until license expires  Expired

Email View Hide

### Tracking List

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z ALL

Select Licensee	Licensee Name <	Profession	License Number	Activity
<input type="checkbox"/>	Deborah Ann Abreo	RN	14-52581	Unchanged
<input type="checkbox"/>	Christine Jessica Adams	LPN	23-31807	Expired
<input type="checkbox"/>	Wesley E Alexander	RN	13-87659	Unchanged
<input type="checkbox"/>	Jennifer Ann Allen	RN	13-80432	Expired
<input type="checkbox"/>	Bethleen Armstrong	RN	13-61391	Unchanged
<input type="checkbox"/>	Shannon Lee Arnold	RN	13-73530	Expired
<input type="checkbox"/>	Sharon Kay Arnold	RN	13-44952	Unchanged
<input type="checkbox"/>	Stacia Dawn Ayalla	LPN	23-32018	Expired
<input type="checkbox"/>	Marguerite Dawn Baringer	RN	13-73135	Expired
<input type="checkbox"/>	John Allen Barker	RN	13-65437	Unchanged
<input type="checkbox"/>	Brian Charles Barrager	LPN	23-21291	Expired
<input type="checkbox"/>	Brenda Ilene Bauman	RN	13-51738	Expired

# KANN



# Social Media

# Social Media The Revolution



<http://youtu.be/QUCfFcchw1w>

Twitter

facebook

[www.ksbn.org](http://www.ksbn.org)

Keep Informed - Follow Us Online

flickr<sup>TM</sup>

YouTube<sup>TM</sup>



TWEETS 674 PHOTOS/VIDEOS 68 FOLLOWING 319 FOLLOWERS 767 FAVORITES 4 More ▾

## KS Board of Nursing

@ksnursingboard

Assuring the Citizens of Kansas safe and competent practice by nurses and mental health technicians

Topeka, Kansas

[ksbn.org](http://ksbn.org)

Joined September 2009

68 Photos and videos



Tweets Tweets & replies

**KS Board of Nursing** @ksnursingboard · Sep 17  
Election of Officers Results - President - Brenda Moffitt, CNS, APRN

**KS Board of Nursing** @ksnursingboard · Sep 17  
Election of Officers Results - Vice President - JoAnn Klaassen, RN, MN, JD

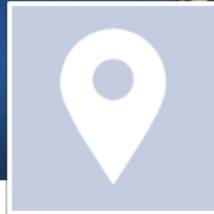
**KS Board of Nursing** @ksnursingboard · Sep 17  
Election of Officers Results - Secretary - Carol Bragdon, PhD, APRN

KS Board of Nursing retweeted  
**NCSBN Learning Ext** @NCSBNLearnExt · Sep 16  
Want the rationale for our #NCLEX weekly question? Listen to our Question Dissection podcast! [learningext.com/students/stude...](http://learningext.com/students/stude...)

**KS Board of Nursing** @ksnursingboard · Sep 15  
Sept 2014 On-Site Board Packet is now available for download...  
[ksbn.org/boardpacket.htm](http://ksbn.org/boardpacket.htm)

**KS Board of Nursing** @ksnursingboard · Sep 15  
KSBN welcomes the 2014 Nursing Program Administrators...  
[ksbn.org/education/Admi...](http://ksbn.org/education/Admi...)

**KS Board of Nursing** @ksnursingboard · Sep 3  
Sept 2014 Board Packet is now available for download...



# Kansas State Board of Nursing

Education · Government Organization

[Timeline](#) | [About](#) | [Photos](#) | [Reviews](#) | [Likes](#)

## PEOPLE



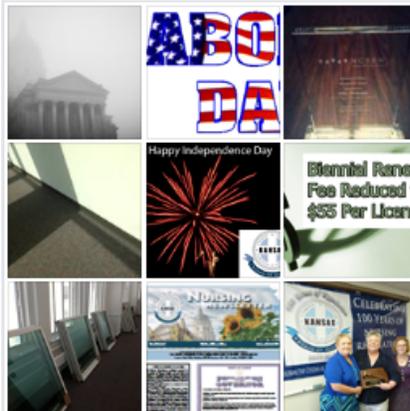
**735** likes  
55 visits

## ABOUT

“Protect the Public Health, Safety and Welfare of the Citizens of Kansas through the Licensure and Regulation Process.”

<http://www.ksbn.org/>

## PHOTOS



### Kansas State Board of Nursing

September 17

Election of Officers Results - President - Brenda Moffitt, CNS, APRN

[Like](#) · [Comment](#)

[Ragan Spence VanLeeuwen, Sarah Larson Willits, Inge Cox Reed and 2 others](#) like this.



### Kansas State Board of Nursing

September 17

Election of Officers Results - Vice President - JoAnn Klaassen, RN, MN, JD

[Like](#) · [Comment](#)

[Inge Cox Reed, Janet Jacobs and Kim Hensley](#) like this.



### Kansas State Board of Nursing

September 17

Election of Officers Results - Secretary - Carol Bragdon, PhD, APRN

[Like](#) · [Comment](#)

[Sarah Larson Willits, Inge Cox Reed and Kim Hensley](#) like this.



### Kansas State Board of Nursing

September 15

Sept 2014 On-Site Board Packet is now available for download...

<http://www.ksbn.org/boardpacket.htm>

# Contact Info

## Adrian Guerrero

Kansas State Board of Nursing

Director of Operations

[adrian.guerrero@ksbn.state.ks.us](mailto:adrian.guerrero@ksbn.state.ks.us)

785-296-5935



## Sheila Rice

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