

Nursing Care Quality Assurance Commission

PO Box 47864

Olympia, WA 98504-7864

360-236-4703

Nurse Administrator  
[WAC 246-840-517](http://apps.leg.wa.gov/WAC/default.aspx?dispo=true&cite=246-840-517)

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| --- | --- |
| College/University Name: | City: |
| Name of Nursing Program: |  |
| Nurse Administrator’s Name: | Date Appointed: |
| Nurse Administrator’s Credentials: | |
| Nurse Administrator’s Title at Nursing Program: | |
| RN License Number: | |
| Type of Nursing Program:   LPN  LPN to ADN  LPN to BSN  BSN  ADN  ADN with PN option  Master’s Entry  RN to BSN  Graduate | |

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| **Nurse Administrator’s Educational Background** | | | |
| College or University | Major | Degree | Year(s) |
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| **Educational Preparation in Teaching Nursing** | | | |
| College or University | Course Title/Focus | | Year(s) |
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| **Curriculum Development and Administrative Experience** | | | |
| Institution/Organization | Position Title/Role | | Year(s) |
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| **Nursing Education Experience** | | |
| Institution/Organization | Position Title/Role | Year(s) |
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| **Experience as a Registered Nurse** | | |
| Institution/Organization | Position Title/Role | Year(s) |
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Nurse Administrator’s Signature: Date:

Email at Nursing Program:

Best phone (with area code) to reach you:

**Please return completed form to:**   
[ncqac.education@doh.wa.gov](mailto:ncqac.education@doh.wa.gov?subject=Director%20of%20Nursing%20Program%20Form)

[WAC 246-840-517(1)](http://apps.leg.wa.gov/WAC/default.aspx?dispo=true&cite=246-840-517)

The nursing education program administrator must be a professional and academically qualified registered nurse with an active unencumbered Washington nursing license.  
(This rule identifies the requirements for practical, associate degree and bachelor’s degree programs.)