CATALOG YEAR 2009-2010
(Please use separate form for each add/change)

COLLEGE/SCHOOL/SECTION: College of Nursing and Health Sciences; Dr. F.M. Canseco School of Nursing

Current Catalog Page(s) Affected 182

Course: Add: _____ Delete: _____ Change: Number _____ Title _____
(check all that apply) SCH _____ Description _____ Prerequisites _____
If new, provide Course Prefix, Number, Title, SCH Value, Description, prerequisite, and lecture/lab hours if applicable. If in current catalog, provide change and attach page with changes in red and provide a brief justification.

Program: Add: _____ Change: _____ Attach new/changed Program of Study description and 4-year plan. If in current catalog, provide change and attach page with changes in red.

If in current catalog, provide change and attach page with changes in red.

Faculty: Add: _____ Delete: _____ Change: _____ Attach new/changed faculty entry.
If in current catalog, provide change and attach page with changes in red.

College Introductory Pages: Add information: _____ Change information: _____
Attach new/changed information. If in current catalog, provide change and attach page with changes in red.

Other: Add information: _____ Change information: X _____
Attach new/changed information. If in current catalog, provide change and attach page with changes in red. Regulations for taking the licensure exam have changed. This is reflective of the changes

Approvals: 

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A petition for Declaratory Order must be submitted by the nursing candidate if one of the following criteria apply:

a. The candidate had any licensing authority refuse to issue a license or ever revoked, annulled, cancelled, accepted surrender of, placed on probation, refused to renew a professional license or certificate held by the candidate now or previously, or ever fined, censured, reprimanded, or otherwise disciplined the candidate.

d. The candidate has been convicted, adjudged guilty by a court, pled guilty or pled nolo contendere to any crime (felony or misdemeanor) whether or not a sentence was imposed (excluding minor traffic violations).

e. The candidate has been diagnosed, treated, or hospitalized in the past five (5) years for schizophrenia or other psychotic disorders, bipolar disorders, paranoid personality disorder, antisocial personality disorder, or borderline personality disorder.

f. The candidate has been addicted to or treated for the use of alcohol or any other drug within the past five (5) years.

g. The candidate has been issued an order concerning eligibility for examination or licensure by the Board of Nurse Examiners or received a proposal of ineligibility.

Effective 9/4/02: Two (2) FBI fingerprint cards must be submitted to the Board with the Petition for Declaratory Order form. To request the FBI fingerprint cards, complete the web form at www.bne.state.tx.us requesting a fingerprint card packet. Please allow three (3) weeks to receive the FBI fingerprint cards. The FBI cards will not be accepted in the cards are bent, folded, creased, cut, or damaged in any way. The fingerprint cards must be mailed and will not be faxed, e-mailed, or overnighted to the applicant.

Regulations have changed please see below

Declaratory Order Requirements of Texas Board of Nursing

A petition for Declaratory Order must be submitted by the nursing candidate/applicant if one of the following criteria apply:

i. For any criminal offense, including those pending appeal, has the candidate/applicant:
   A. been convicted of a misdemeanor?
   B. been convicted of a felony?
   C. pled nolo contendere, no contest, or guilty?
   D. received deferred adjudication?
   E. been placed on community supervision or court-ordered probation, whether or not adjudicated guilty?
   F. been sentenced to serve jail or prison time? court-ordered confinement?
   G. been granted pre-trial diversion?
   H. been arrested or have any pending criminal charges?
   I. been cited or charged with any violation of the law?
   J. been subject of a court-martial; Article 15 violation; or received any form of military judgment/ punishment/action? (Only exclude Class C misdemeanor traffic violations.)

NOTE: Expunged and Sealed Offenses: While expunged or sealed offenses, arrests, tickets, or citations need not be disclosed, it is your responsibility to ensure the offense, arrest, ticket or citation has, in fact,
been expunged or sealed. It is recommended that you submit a copy of the Court Order expunging or sealing the record in question to our office with your application. Failure to reveal an offense, arrest, ticket, or citation that is not in fact expunged or sealed, will at a minimum, subject your license to a disciplinary fine. Non-disclosure of relevant offenses raises questions related to truthfulness and character.

**NOTE: Orders of Non-Disclosure:** Pursuant to Tex. Gov't Code § 552.142(b), if you have criminal matters that are the subject of an order of non-disclosure you are not required to reveal those criminal matters on this form. However, a criminal matter that is the subject of an order of non-disclosure may become a character and fitness issue. Pursuant to other sections of the Gov't Code chapter 411, the Texas Nursing Board is entitled to access criminal history record information that is the subject of an order of non-disclosure. If the Board discovers a criminal matter that is the subject of an order of non-disclosure, even if you properly did not reveal that matter, the Board may require you to provide information about any conduct that raises issues of character.

In addition a petition for Declaratory Order must be submitted if the nursing candidate/applicant answers YES to the following questions:

**II.** Are you currently the target or subject of a grand jury or governmental agency investigation?

**III.** Has any licensing authority refused to issue you a license or ever revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a license, certificate or multi-state privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?

**IV.** Within the past five (5) years have you been addicted to and/or treated for the use of alcohol or any other drug?*

**V.** Within the past five (5) years have you been diagnosed with, treated, or hospitalized for schizophrenia and/or psychotic disorders, bipolar disorder, paranoid personality disorder, antisocial personality disorder, or borderline personality disorder?*

If "YES" must indicate the condition: [ ] schizophrenia and/or psychotic disorders, [ ] bipolar disorder, [ ] paranoid personality disorder, [ ] antisocial personality disorder, [ ] borderline personality disorder

***IF YOU ANSWER "YES" TO ANY QUESTION #1 - #V, YOU MUST PROVIDE A SIGNED AND DATED LETTER DESCRIBING THE INCIDENCE(S) THAT YOU ARE REPORTING TO THE Texas Board of Nursing.

*You may indicate "NO" if you have completed and/ or are in compliance with Texas Peer Assistance Program for Nurses (TPAPN) for substance abuse or mental illness.

Documentation requirements and forms for Declaratory Order Application can be found at:
http://www.bon.state.tx.us/olv/pdfs/DCapp.pdf

Information obtained from Texas Board of Nursing Website on 05/22/09