

**FACULTY APPROVAL / RESIGNATION NOTIFICATION**  
(Submit forms electronically or if mailed in DUPLICATE)

**INSTRUCTIONS:**

Print or type. Complete **BOTH PAGES SIDES** of form for Faculty Approval.  
Check a box for approval or resignation notification.

*Provide the appointee with a photocopy of this form after it has been approved by a BRN consultant.*


Program Name: <b>LOS ANGELES COUNTY COLLEGE OF NURSING AND ALLIED HEALTH</b>		
Appointee's Name: <b>Martha Y. Guerrero</b>		
CA RN License: <b>687642</b>	Expiration Date: <b>September 30, 2018</b>	Verified by: <b>Joan W. Kohl</b>

**CLASSIFICATION AND STATUS**

In addition to California Code of Regulations (CCR) Section 1425, all faculty must meet CCR section 1424(h), which states nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned and Section 1420(d), which defines clinically competent to mean that a nursing program faculty member possesses and exercises the degree of learning, skill, care and experience ordinarily possessed and exercised by staff level registered nurses of the clinical unit to which the faculty member is assigned.

<p><b>Faculty Approval / Resignation Notification:</b> Check one box. Complete Page 1 for all approvals / resignation notifications.</p> <p><input checked="" type="checkbox"/> <b>Initial Faculty Approval</b> (Submit prior to employment) Complete Second Page: Section A for Instructor. Section B for Assistant Instructor Section C for Clinical Teaching Assistant.</p> <p><input type="checkbox"/> <b>Faculty Reclassification</b> (Complete Second Page) Attach previous approval form <u>and</u> documentation to demonstrate qualifications for requested change.</p> <p><input type="checkbox"/> <b>Faculty Resignation</b> (Complete only the top section; submit only one form) Effective Date _____</p>	<p><b>Clinical Assignment Area(s) Requested:</b> (Check the area(s) next to the classification being requested)</p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Classification</th> <th>M-S</th> <th>O</th> <th>C</th> <th>P/MH</th> <th>G</th> </tr> </thead> <tbody> <tr> <td>Instructor</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Assistant Instructor</td> <td><b>X</b></td> <td></td> <td></td> <td></td> <td><b>X</b></td> </tr> <tr> <td>Clinical Teaching Assistant</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>M-S = Medical-Surgical    O = Obstetrics    C = Children (Pediatrics) P/MH = Psych/Mental Health    G = Geriatrics</p>	Classification	M-S	O	C	P/MH	G	Instructor						Assistant Instructor	<b>X</b>				<b>X</b>	Clinical Teaching Assistant					
Classification	M-S	O	C	P/MH	G																				
Instructor																									
Assistant Instructor	<b>X</b>				<b>X</b>																				
Clinical Teaching Assistant																									

The above information is verified by:

Name of Program Director Joan W. Kohl	Signature: 	Date: 12-20-17
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**For Board Use Only:**

NEC / Approval Date	Approved Clinical Area(s)					Approved Classifications		
	M-S	O	C	P-MH	G	I	AI	CTA
Initial faculty approval 01-02-2018	X	NA	NA	NA	X	NA	X	NA

Date: \_\_\_\_\_ NEC \_\_\_\_\_

Does not qualify for \_\_\_\_\_ for the reason(s) listed below. Resubmit with **COMPETENCY EVIDENCE**.

Lacks required education.

Lacks previous teaching experience in pre-or post-licensure nursing programs or course in practice teaching.

Lacks one year of professional nursing experience.

Lacks evidence of clinical competence

Other: \_\_\_\_\_

**SECTION A - INSTRUCTOR**

Section 1425(c) states, " An instructor shall meet the following minimum qualifications: 1425(a)(1) A Master or higher degree from an accredited college or university which includes course work in nursing, education, or administration. If degree other than in nursing submit information verifying course work in nursing education."

COLLEGE/UNIVERSITY/CITY/STATE	DEGREE & YEAR COMPLETED	AREA OF PREPARATION

**1425(c)(3)** Completion of at least one (1) year's experience teaching courses related to registered nursing or completion of a post-baccalaureate course which includes **PRACTICE IN TEACHING REGISTERED NURSING**. Submit official course description to verify course content.

1. COLLEGE/UNIVERSITY/CITY/STATE (Teaching in Pre-Post RN program)	COURSE CONTENT/AREA	FROM MONTH/YR	TO MONTH/YR
2. COLLEGE/UNIVERSITY/CITY/STATE (Teaching in Pre-Post RN program)	PRACTICE TEACHING COURSE	UNITS	DATE

**1425(c)(2)** Direct patient care experience within the previous five (5) years in the nursing area to which he or she is assigned, which can be met by: (A) One (1) year's continuous, full-time or its equivalent experience providing direct patient care as a registered nurse in the designated nursing area; or (B) One (1) academic year of registered nurse level clinical teaching experience in the designated nursing area or its equivalent that demonstrates clinical competency.

AGENCY NAME AND CITY/STATE (List most recent first)	POSITION	CLINICAL AREA	FROM MONTH/YR	TO MONTH/YR

**SECTION B - ASSISTANT INSTRUCTOR**

**1425(d)** An assistant instructor shall meet the following minimum qualifications: (1) A Baccalaureate degree from an accredited college which shall include courses in nursing, or in a natural, behavioral or social science relevant to nursing practice;

COLLEGE/UNIVERSITY AND CITY/ STATE	DEGREE & YEAR COMPLETED	AREA OF PREPARATION
<i>University of Phoenix</i>	<i>MSN</i>	<i>Nursing Education</i>
<i>University of Phoenix</i>	<i>BSN</i>	<i>Nursing</i>

**1425(d)(2)** Direct patient care experience within the previous five (5) years in the nursing area to which he or she is assigned, which can be met by: (A) One (1) year's continuous, full-time or its equivalent experience providing direct patient care as a registered nurse in the designated nursing area; or (B) One (1) academic year of registered nurse level clinical teaching experience in the designated nursing area or its equivalent that demonstrates clinical competency.

AGENCY NAME AND CITY/STATE (List most recent first)	POSITION	CLINICAL AREA	FROM MONTH/YR	TO MONTH/YR
<i>LAC+ USC Medical Center</i>	<i>RNII</i>	<i>Medical surgical</i>	<i>October 2015</i>	<i>present</i>
<i>LAC+ USC Medical Center</i>	<i>RNI</i>	<i>Medical surgical</i>	<i>September 2006</i>	<i>2015</i>

**SECTION C - CLINICAL TEACHING ASSISTANT**

**1425(e)** A clinical teaching assistant shall have at least one (1) year continuous, full-time or its equivalent experience in the designated nursing area within the previous five years (5) as a registered nurse providing direct patient care.

AGENCY NAME AND CITY/STATE	POSITION	CLINICAL AREA	FROM MONTH/YR	TO MONTH/YR