



National League for Nursing Accrediting Commission, Inc.

3343 Peachtree Road NE, Suite 850 • Atlanta, GA 30326  
P. 404.975.5000 • F. 404.975.5020 • www.nlnac.org

**APPLICATION FORM FOR ACCREDITATION VISIT**

**Fall 2012**

The information provided will be used when assigning the site visit dates and team. Please return the *Application for Accreditation Visit* and the *Official Authorization for Accreditation* forms to:

National League for Nursing Accrediting Commission  
3343 Peachtree Road NE, Suite 850  
Atlanta, GA 30326

The deadline for applying for Fall visits is August 1<sup>st</sup>.

**Purpose of Visit:**

- Initial accreditation
- Continuing accreditation

**Program(s) to be reviewed:**

- Clinical Doctorate
- Master's
- Master's with Post-Master's Certificate
- Baccalaureate
- Associate
- Diploma
- Practical

**Complete the following information:**

Indiana State University  
Name of Governing Organization

Daniel Bradley, Ph.D., President  
Name, Credentials, and Title of Chief Executive Officer of the Governing Organization

Department of Advanced Practice Nursing  
Name of Nursing Education Unit

Lea R. Hall, Ph.D., FNP-BC, Executive Director of Nursing  
Name, Credentials, and Title of Nurse Administrator

<u>749 Chestnut Street</u>	<u>Terre Haute</u>	<u>IN</u>	<u>47809</u>
Address: Street	City/Town	State	Zip Code

(812) 237-2326  
Phone Number

(812) 237-8895  
Fax Number

Lea.hall@indstate.edu  
Email

(812) 237-8963  
Emergency Contact Number

**Schedule of visit dates:**

Using the following list, indicate which dates your program is in session (fully operational). Of the dates your program is in session, indicate your 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> choice for the accreditation visit.

The visit is usually three days in length and begins on Tuesday. Upon request, arrangements can be made for the visit to begin on another day.

- September 18-20                       October 2-4                      2    October 16-18  
 September 25-27                      3    October 9-11                      1    October 23-25

First Date of Class: 8/21/2012                      First Date of Clinical: 8/22/2012

If the program has not yet had a class graduate, please provide the anticipated date (month and year) of the graduation for the first class: \_\_\_\_\_

**General information - Governing Organization:**

1. Indicate the agency by which the governing organization is accredited:

a. For Clinical Doctorate, Master's, Baccalaureate, Associate, or Practical Nursing Programs:

- Middle States Association of Colleges and Schools
- New England Association of Schools and Colleges
- North Central Association of Colleges and Schools
- Northwest Association of Schools and Colleges
- Southern Association of Colleges and Schools
- Western Association of Schools and Colleges
- Accrediting Bureau of Health Education Schools
- Accrediting Commission of Career Schools and Colleges
- Accrediting Commission of the Distance Education and Training Council
- Accrediting Council for Independent Colleges and Schools

b. For Diploma or Practical Nursing Programs:

- The Joint Commission
- DNV Healthcare
- Health Care Facilities Accreditation Program of the American Osteopathic Association

c. For Practical Nursing Programs:

- Council on Occupational Education
- State Department of Education/State Department of Vocation-Technical Education
- State agencies recognized by the USDOE for postsecondary vocational education:
  - \_\_\_\_ Kansas State Department of Education;
  - \_\_\_\_ Minnesota State Colleges and Universities;
  - \_\_\_\_ Missouri State Board of Education;
  - \_\_\_\_ New York State Board of Regents (Vocational Education Unit);
  - \_\_\_\_ Oklahoma Department of Vocational & Technical Education;
  - \_\_\_\_ Oklahoma State Regents for Higher Education;
  - \_\_\_\_ Puerto Rico Human Resources & Occupational Development Council;
  - \_\_\_\_ Utah State Board for Applied Technology Education

2. Identify the Carnegie Classification\* of the governing organization: Please check the appropriate box

**Doctorate-granting Universities** - Includes institutions that award at least 20 doctoral degrees per year.

- RU/VH                      Research Universities (very high research activity)
- RU/H                        Research Universities ( high research activity)
- DRU                         Doctoral/Research Universities

**Master's Colleges and Universities** - Includes institutions that award at least 50 master's degrees per year. Excludes Special Focus Institutions and Tribal Colleges.

- Master's/L                 Master's Colleges and Universities (larger programs)
- Master's/M                Master's Colleges and Universities (medium programs)
- Master's/S                Master's Colleges and Universities (smaller programs)

**Baccalaureate:** Includes institutions where baccalaureate degrees represent at least 10 percent of all undergraduate degrees and that award fewer than 50 master's degrees or fewer than 20 doctoral degrees per year. Excludes Special Focus Institutions and Tribal Colleges.

- Bac/A&S                  Baccalaureate Colleges - Arts & Sciences
- Bac/Diverse                Baccalaureate Colleges - Diverse Fields
- Bac/Assoc                 Baccalaureate/Associate's Colleges

**Associate's Colleges** - Includes institutions where all degrees are at the associate's level, or where bachelor's degrees account for less than 10 percent of all undergraduate degrees. Excludes institutions eligible for classification as Tribal Colleges or Special Focus Institutions

- Assoc/Pub-R-S            Associate's - Public Rural-serving Small
- Assoc/Pub-R-M            Associate's - Public Rural-serving Medium
- Assoc/Pub-R-L            Associate's - Public Rural-serving Large
- Assoc/Pub-S-SC          Associate's - Public Suburban-serving Single Campus
- Assoc/Pub-S-MC          Associate's - Public Suburban-serving Multicampus
- Assoc/Pub-U-SC          Associate's - Public Urban-serving Single Campus
- Assoc/Pub-U-MC          Associate's - Public Urban-serving Multicampus
- Assoc/Pub-Spec           Associate's - Public Special Use
- Assoc/PrivNFP            Associate's - Private Not-for-profit
- Assoc/PrivFP             Associate's - Private For-profit
- Assoc/Pub2in4            Associate's - Public 2-year Colleges under Universities
- Assoc/Pub4                Associate's - Public 4-year, Primarily Associate's
- Assoc/PrivNFP4          Associate's - Private Not-for-profit 4-year, Primarily Associate's
- Assoc/PrivFP4            Associate's - Private For-profit 4-year, Primarily Associate's

**Special Focus Institutions** - Institutions awarding baccalaureate or higher-level degrees where a high concentration of degrees is in a single field or set of related fields. Excludes Tribal Colleges.

- Spec/Faith                Theological seminaries, Bible colleges, and other faith-related institutions
- Spec/Medical             Medical schools and medical centers
- Spec/Health              Other health profession schools
- Spec/Engg                Schools of engineering
- Spec/Tech                Other technology-related schools
- Spec/Bus                 Schools of business and management
- Spec/Arts                Schools of art, music, and design
- Spec/Law                 Schools of law
- Spec/Other                Other special-focus institutions

\* Taken from the [2011 Higher Education Directory](#)

3. Total enrollment at the governing organization 11,422
4. **Attach a copy** of the governing organization (institutional) accrediting agency letter. The letter should verify current status, date of last visit, date of next visit, and due date for any reports if required.

Date of *last* institutional review: November 2011

Date of *next* institutional review: 2020

Date for any reports requested: None

5. Check all the following characteristics that describe the governing organization:

- Private  
 Public  
 Religious Affiliated  
 Single Purpose  
 Hospital  
 Vocational/Technical School  
 Public School System  
 Non-Profit

**General Information - Nursing Programs:**

6. **Attach a copy** of the State Board of Nursing letter indicating the program current approval status (if appropriate\*).

Date of Last Review: September 1999

Date of Next Review: No review scheduled

Approval Status: Full

\*Not Applicable

7. Total nursing student enrollment: (by program if more than one)

Undergraduate = 603

Graduate = 279

8. Will this visit be combined with one conducted by another accrediting agency or the State Board of Nursing? (Coordinated visit: a concurrent visit in which NLNAC cooperates with another agency in activities of mutual concern.)

No     Yes    If yes, please indicate agency

\_\_\_\_\_

9. Additional Locations

- Number of **additional** locations offering the nursing program \_\_\_\_\_
- Specify the locations, the distance of each from the main campus, and the options offered at each location:

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10. Does the program utilize distance education? yes

11. Track Options:

- nurse practitioner \_\_\_\_\_
- clinical specialist \_\_\_\_\_
- certified registered nurse anesthetist \_\_\_\_\_
- certified nurse midwife \_\_\_\_\_
- nurse educator \_\_\_\_\_
- nurse administrator \_\_\_\_\_
- Other, please specify \_\_\_\_\_

Post-master's Certificate \_\_\_\_\_

12. Do you participate in a state-wide curriculum?

No     Yes

13. What airport would you recommend that the site visit team use when making travel arrangements?

Indianapolis, IN

*Sean R. Hall*  
Signature of Individual Completing Form

5/8/12  
Date

## OFFICIAL AUTHORIZATION FOR ACCREDITATION

Indiana State University  
Name of Governing Organization  
Department of Advanced Practice Nursing

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Name of Nursing Education Unit

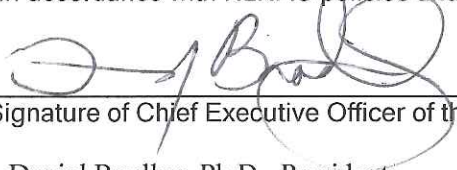
749 Chestnut Street    Terre Haute    IN    47809  
Address: Street    City/Town    State    Zip Code

Authorizes the National League for Nursing Accrediting Commission to conduct in **Fall 2012** the evaluation process for accreditation of its Doctor of Nursing Practice Nursing Program(s).  
(Program type e.g., baccalaureate)


A site visit by NLNAC representatives is one step in the evaluation of the nursing unit's offerings. In the interest of both groups concerned, the visit will be scheduled at a time that is mutually convenient.

Charges for the site visit will be made according to the prevailing accreditation fee schedule.\* *The processing/application fee must accompany this form.*

This authorization constitutes the initiation of planning between the school and the NLNAC for the various steps of the accreditation process. It is understood that the process can be terminated at any time in accordance with NLNAC policies and procedures.

By:   
Signature of Chief Executive Officer of the Governing Organization Authorizing the Visit

Daniel Bradley, Ph.D., President  
Print Name, Credentials, and Title of Chief Executive Officer

By:   
Signature of Nurse Administrator of the Nursing Unit

Lea R. Hall, Ph.D., FNP-BC, Executive Director of Nursing  
Print Name, Credentials, and Title of Nurse Administrator

Date: 5/8/12

\*See Schedule of Accreditation Fees