

## Doctor of Nursing Practice Handbook

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## Introduction

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The Doctor of Nursing Practice (DNP) degree was designed by the profession of nursing to prepare advanced practice registered nurses (nurse practitioners, nurse midwives, nurse anesthetists, clinical nurse specialists) beyond the master's degree to meet the changing needs of the health care delivery systems in the United States. Expanding the advanced practice role through the DNP will enhance the translation of research for practice and population outcomes at an in-depth level to manage information systems, use appropriate technology for health care delivery, assess and manage health risks, enhance inter and intraprofessional communication, and design and develop health care delivery systems. Using transformational leadership, graduates will meet the demands of the nation's complex health care environment to assure quality patient outcomes (AACN, 2015).

The DNP is a practice-focused terminal degree earned by expert clinicians in advanced practice nursing. The DNP prepares advanced practice registered nurses (APRN) to analyze systems of care and provide transformational leadership that influences and impacts patient safety and quality of care through evidence-based culturally competent care in rural and underserved areas. Graduates interpret and apply research findings and conduct program evaluation in a variety of practice settings. They seek to determine and measure system and population outcomes, manage information and financial systems, and use appropriate technology to address the health care risks of the regional population. A unique contribution of this program includes elective courses which enable the achievement of graduate certificates in: nursing education; transcultural nursing; nurse executive leadership; and technology and informatics.

## School of Nursing

### Mission and Vision

The School of Nursing (SON) has been in existence since the early 1960's and offers both baccalaureate and master's degrees in nursing and clinical research. In July 2010, the SON moved into the newly constructed McNeill Hall. The learning facilities in the new building are state of the art in terms of educational technology, patient simulation and distance education. In August 2016, the DNP enrolled its first student cohort.

#### *Mission Statement*

The mission of the UNCW SON is to educate nursing and clinical research professionals through excellence in teaching, scholarship, service, and community engagement. Emphasis is placed on educating individuals to improve health outcomes and quality of life in diverse populations.

#### *Vision Statement*

The UNCW SON will be recognized as a center of excellence in education, practice, and research that prepares professionals to shape a dynamic health care environment and to serve a diverse community.

## Accreditation

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Officially recognized by the U.S. Secretary of Education as a national accreditation agency, the Commission on Collegiate Nursing Education (CCNE) is an autonomous accrediting agency contributing to the improvement of the public's health. CCNE ensures the quality and integrity of baccalaureate and graduate education programs preparing effective nurses.

CCNE serves the public interest by assessing and identifying programs that engage in effective educational practices. As a voluntary, self-regulatory process, CCNE accreditation supports and encourages continuing self-assessment by nursing education programs and the continuing growth and improvement of collegiate professional education. The Bachelor of Science in Nursing and Master of Science in Nursing were re-accredited in 2008. While all programs will seek re-accreditation again in 2018, the DNP will seek initial accreditation at that time. The American Association of Colleges of Nursing (AACN) is informed of the program.

## Student Learning Outcomes

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1. Analyze research evidence and theories from nursing and other relevant disciplines to integrate scientific foundations for developing new practice approaches in the advanced practice role.
2. Demonstrate leadership in health organizations and systems approaches to meet current and future needs of patient populations by evaluating the outcomes of quality health care and safety.
3. Design processes through clinical scholarship for health care outcomes that meet the nation's priority for patient-centered, high quality care that is seamless and affordable.
4. Implement programs that use critical elements of technology for patients, populations, and health care systems that are ethically sound and culturally appropriate to improve current health care information and communication networks.
5. Critically analyze health policies for the development and implementation of health care reforms that advocate for social justice and equity in all health care arenas.
6. Demonstrate leadership in inter-professional communication, collaboration and consultation to analyze complex practice and organizational issues.
7. Directly manage psychosocial and socioeconomic dimensions of health care for patients and populations to prevent disease and promote community, environmental and occupational health.
8. Demonstrate the advanced practice role for clinical judgment by assisting patients and populations to navigate through the health care systems for optimal outcomes.

## Contact Information

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Fax: (910) 962-3723  
Email: son@uncw.edu  
Internet: <http://uncw.edu/son/>

### Office of Student Success

[McNeill Hall](#), Room 1009  
910.962.3208  
Fax: 910.962.4921  
Email: [chhs@uncw.edu](mailto:chhs@uncw.edu)  
Internet: [www.uncw.edu/oss/students.html](http://www.uncw.edu/oss/students.html)  
<http://www.uncw.edu/oss/DNPCHHSUNCW.html>

### Graduate School

**James Hall**  
**910-962-7303**  
Fax: 910-962-3787  
Internet:  
<http://uncw.edu/gradschool/admissions.html>

### Financial Aid Office

(910) 962-3177  
Email: [finaid@uncw.edu](mailto:finaid@uncw.edu)  
Internet:  
<http://www.uncw.edu/finaid/process.html>

## Admission Requirements

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Students will be admitted to the DNP program by recommendation of the SON Graduate Admissions Committee based upon eligibility requirements and available resources. Admission requirements are:

1. Master's degree in nursing or post-master's certificate from a program accredited by the Commission on Collegiate Nursing Education (CCNE), the National League for Nursing Accrediting Commission (NLNAC), or the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA).
2. Current unrestricted registered nurse (RN) license in the state in which practicum will occur.
3. Advanced Practice RNs (APRN) must have current national certification and be licensed and approved to practice as an APRN in their state of residence and currently employed in an advanced practice role. The APRN roles as defined by the American Colleges of Nursing are nurse anesthetist, clinical nurse specialist, nurse midwife, or nurse practitioner.
4. GPA of 3.0 (on a 4.0 scale) or higher on all previous graduate coursework as documented by official transcripts with evidence of completion of graduate level pathophysiology, pharmacology, and advanced physical assessment courses from an accredited college or university.

5. The Test of English as a Foreign Language (TOEFL) or the International English Language Testing System (IELTS) for international students which is acceptable for two years from the date the test is administered and shows the minimum achievement levels. Students with foreign student visas must present evidence of professional standing in their home countries.
6. Written essay, limited to 600 words, addressing your advanced practice expertise, career goals, how earning the DNP will promote these goals, and brief description of DNP clinical scholarly project topic area.
7. Submit a completed application and the required application fee, (non-transferable and non-refundable) to the Graduate School. Applicants will be prompted by the system to pay the application fee only when their application form is complete.
8. Three professional letters of recommendation to substantiate practice and leadership capabilities (one each from a former nurse faculty member and a current or former employer, preferred).
9. Current curriculum vita/resume.
10. Criminal Background Check and 12 Panel Drug Screen is required for all students prior to the beginning the program. An annual drug screen may also be required. Costs for these requirements are the responsibility of the applicant.

- **Criminal Background Check (CBC)**

A criminal background check must be completed by each student as a condition of admission. The purpose for completing a criminal background check is to meet the requirements of UNCW's clinical agency partners to participate in clinical practicums.

*Current statute of limitation:* If students maintain continuous enrollment, they generally will not be required to repeat a background check unless a clinical site specifically requires an updated report. All applicants to the School of Nursing must submit a statewide criminal background history for all states of residency during the past seven years. A student having had residency in more than one state in the past seven (7) years must submit statewide criminal background histories for each state of residency during that period. International students are required to submit an international criminal background history. Any change from the student's initial criminal background history must be reported to the School of Nursing. Failure to report any change will result in withdrawal of acceptance to the program. Information received from the student's criminal background history will become part of the student's confidential academic file.

CBC reports are typically completed within ten working days (depending on the number of residences and volume of information covering the seven-year period that needs to be researched). At any time, a student can access, view and print his/her completed, confidential report via their online account. The Office of the Director and Student Success Services can access and view online the current status of a student's report. School officials will evaluate the CBC report to approve students for practicum experiences. Any questionable incidents on the CBC that would inhibit participation in a practicum will be addressed individually.

- **Negative 12-panel Urine Drug screen**

A drug screen is required by many of UNCW's clinical agency partners so all students beginning the program are required to complete a drug screen. If students maintain continuous enrollment, they will not be asked to repeat a drug screen by the majority of clinical agencies. Some agencies, however, may establish different time frames for their drug screening and students must adhere to the drug screening requirements for the site in which they will be completing practice immersion hours.

As a final step in the process, all students must visit a nearby lab collection site. A Medical Review Officer (MRO) consults confidentially with any student that tests positive to verify if there is a valid medical explanation. Complete and accurate results are typically available within 48 hours. At any time, a student can access, view and print his/her completed confidential report results from their online account.

The report must be issued from a National Institute of Drug Abuse (NIDA) approved laboratory. The Panel must include Amphetamines (AMP), Barbiturates (BAR), Benzodiazepines (BZO), Cocaine (COC) Metabolite, Marijuana (THC), Methadone (MTD), Methamphetamine (mAMP), Ecstasy (MDMA), Opiate (OPI), Phencyclidine (PCP), Propoxyphene (PPX), and Oxycodone (OXY). (Appendix A, CertifiedBackground.com)

11. Interview with the School of Nursing faculty may be required to determine congruence between student practice interests, career goals and faculty expertise.

## **Degree Requirements**

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1. A total of 36 graduate semester hours is required for the Doctor of Nursing Practice program.
2. All courses required in the program are open only to graduate students.
3. A total of six semester hours of transfer credit (non-clinical courses) may be accepted with approval from the DNP coordinator.
4. With the exception of six approved transfer credits, all graduate study must be completed in residence.
5. A DNP student must have a "B" or better in each required course. If a student earns a "C," he/she must repeat the course and must earn a "B" or better to progress in the program. A student will only be allowed to repeat one course. A student must maintain a cumulative GPA of 3.0.
6. A faculty-supervised DNP project is required. The DNP project emphasizes methods of implementing evidence to solve identified clinical problems that an APRN might encounter using appropriate EBP and translation methods. Students must defend the proposal before implementation of the DNP Project.
7. The DNP Project will be presented orally at the end of the DNP program.

8. Each student must complete an approved course of study within six years from the date of first registration to be eligible for graduation.
9. Practice immersion/clinical hours must include a minimum of 1000 hours post BSN.
10. Attendance in the DNP Orientation is required.

## **Program of Study**

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The program of study for the DNP includes 10 core courses. Electives at the graduate level which are specialization-specific may lead to a graduate certificate. Students must fulfill the requirements for the program as they work closely with advisers to plan their course of study.

### **Program Core (36 credit hours)**

The focus of the DNP program core is leadership in nursing practice. Skills will be developed for translating research to impact practice and population outcomes at an in-depth level. Emphasis placed on managing information systems, using appropriate technology for health care delivery, assessing and managing health risks, enhancing inter-professional communication, and designing and developing health care systems. Successful completion of all courses in the curriculum core is required for graduation.

- NSG 685 – Philosophical and Theoretical Basis for Clinical Scholarship and Practice: 3
- NSG 686 – Methodologic Approaches to Evidence-based Practice: 3
- NSG 687 – Clinical Epidemiology and Genomics for Advanced Practice Nursing: 3
- NSG 688 – Clinical Leadership, Ethics, and Legalities for Role Development: 3
- NSG 689 – Health Care Systems Policy and Financial Management: 3
- NSG 690 – Improving Health Outcomes: Understanding Global Justice and Social Determinants: 3
- NSG 692 – Information Systems and Technology in Health Care: 3
- NSG 696 – Method for Evidence Based Practice in Specialty Focused Practicum I: 5 (practice immersion hours)
- NSG 697 – Method for Evidence Based Practice in Specialty Focused Practicum II: 5 (practice immersion hours)
- NSG 698 – Method for Evidence Based Practice in Specialty Focused Practicum III: 5 (practice immersion hours)

## **Course Descriptions**

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### **DNP Orientation**

This mandatory orientation gives the student a thorough understanding of the expectations and outcomes of doctoral study. The students will also come to campus to meet each other, faculty and participate in scholarly discussions with experts to enhance the socialization into the advanced practice role at the doctoral level.

All students are required to attend an on-campus intensive session at the beginning of each year. Attendance is mandatory for successful completion of the DNP program.

**NSG 685 Philosophical and Theoretical Basis for Clinical Scholarship and Practice**

This course addresses the philosophical and theoretical underpinnings for clinical scholarship and practice. DNP students will use these theories, models and frameworks to develop advanced skills in exploring and critiquing evidence, identifying relevant data, analyzing research reports and programs to synthesize and translate the evidence for clinical practice. The theories and models discussed will provide a foundation for the DNP student's clinical scholarly project.

**NSG 686 Methodologic Approaches to Evidence-based Practice**

This course focuses on the skills necessary to translate the best available evidence into practice within healthcare organizations. Conceptualization, definition, theoretical rationale, and models of evidence-based practice are evaluated. Concepts include: a review of the research process, research critique, rating and synthesizing the strength of evidence, decision-making for practice, translation opportunities (outcomes, evaluation research, quality improvement, cost-effectiveness analysis), risk adjustment, and applied statistical analysis.

**NSG 687 Clinical Epidemiology and Genomics for Advanced Practice Nursing**

The focus of this course is on the role of the advanced practice nurse in improving the community's health outcomes. An integration of epidemiological principles, population health issues, and advanced nursing clinical concepts are presented to support decision making skills. Content includes the role of epidemiology and study designs, screening and disease prevention, epidemiology of chronic illnesses, culture, genetics, emergency preparedness and ethical and legal issues.

**NSG 688 Clinical Leadership, Ethics, and Legalities for Role Development**

Clinical leadership and role development are addressed. This course focuses on development of expertise in inter and intraprofessional collaboration across the health care team to create effective solutions and overcome complex issues related to health care delivery. Enhanced leadership and communication skills among various professionals in multiple disciplines are emphasized that involves populations of rural and under-served patients to create change. Focus will be on developing advanced leadership skills and understanding of complex ethical and legal issues as well as development and evaluation of potential solutions necessary for health care delivery in the DNP role.

**NSG 689 Health Care Systems Policy and Financial Management**

This course addresses the broad context of socio-economic, political, legal and power considerations in the development of state and national health policy with direct application to the role of the doctorate in nursing practice (DNP). Policy issues will be integrated as they influence advanced nursing practice using social justice theory. Critical analysis of health policy at the local, state and federal levels is seen as essential content along with the goal of developing leadership skills to influence policy. Focus will be on developing policy and advanced practice skills in financial management for health care coordination.

**NSG 690 Improving Health Outcomes: Understanding Global Justice and Social Determinants**

This course focuses on understanding the impact of global justice and social determinants on health outcomes. Healthy People 2020 address the social determinants of health and identifies ways to create social and physical environments that promote good health for all. Students will explore how programs, practices, and policies affect the health of individuals, families and communities. Global justice (fairness) will be discussed to help students better understand our world and our responsibility in it. Planning for this course may include travel abroad to observe and learn about health care systems management from a global perspective.

**NSG 692 Information Systems and Technology in Health Care**

This course addresses the use of information systems and patient care technology to support the clinical decision making process and to improve the safety and quality of patient care and health care systems. Students will design a plan for using information systems and technology in the implementation and evaluation of an evidence-based practice change initiative.

**NSG 696 Methods for Evidence Based Practice in Specialty Focused Practicum I**

This course builds on a foundation of knowledge about evidence-based practice for the advanced practice registered nurse. The need for a practice change initiative will be assessed in an actual clinical environment. Translation models, theories of change, financial, ethical, and social implications are considered in translating evidence into practice. Evaluation strategies, methods of measurement, and analysis are applied to assess proposed improvements in practice and clinical care outcomes. Formation of the DNP Project Team will provide students with the clinical and scholarly mentorship needed to assist in development of the DNP Project proposal.

**NSG 697 Methods for Evidence Based Practice in Specialty Focused Practicum II**

This course provides the opportunity for students to demonstrate achievement of DNP competencies via a practice immersion in which they implement the DNP project to improve patient outcomes in the practice setting. Students will integrate advanced clinical scholarship skills with an understanding of organizational behavior systems, change theory, policy-making, and informatics to execute an evidenced-based intervention, practice guideline, or health policy change. Methodologies to improve quality and safe outcomes in patient-centered care will be implemented to include interprofessional teams in systems of care.

**NSG 698 Methods for Evidence Based Practice in Specialty Focused Practicum III**

This course provides the opportunity for the student to analyze the outcomes of the DNP Project and to make recommendations for ongoing sustainability of the project in the clinical setting. The student will begin the process of dissemination of the DNP Project to the professional community.

**NSG 699 Clinical Scholarly Project**

The knowledge-generating effort the DNP student completes is a practice focused project. It is an integrated and integral part of the practice experience which is embedded in all course work throughout the entire program of study. The project purpose is to design and evaluate programs that change and enhance advanced nursing practice to improve the health of populations.

## Suggested Course Sequence

### Five Semester Sequence

Year One		
Fall (9)	Spring (9)	Summer (8)
Mandatory three day DNP Orientation <b>NSG 687</b> (3 cr) Clinical Epidemiology and Genomics for Advanced Practice Nursing <b>NSG 688</b> (3 cr) Clinical Leadership, Ethics, and Legalities for Role Development <b>NSG 690</b> (3 cr) Improving Health Outcomes: Understanding Global Justice and Social Determinants	<b>NSG 685</b> (3 cr) Philosophical and Theoretical Basis for Clinical Scholarship and Practice <b>NSG 686</b> (3 cr) Methodologic Approaches to Evidence-based Practice <b>NSG 692</b> (3 cr) Information Systems and Technology in Health Care	<b>NSG 689</b> (3 cr) Health Care Systems Policy and Financial Management <b>NSG 696</b> (5 cr) Methods for Evidence Based Practice in Specialty Focused Practicum I
Year Two		
Fall (5)	Spring (5)	Summer
<b>NSG 697</b> (5 cr) Methods for Evidence Based Practice in Specialty Focused Practicum II	<b>NSG 698</b> (5 cr) Methods for Evidence Based Practice in Specialty Focused Practicum III	

### Eight Semester Sequence

Year One		
Fall (6)	Spring (6)	Summer (3)
Mandatory three day DNP Orientation <b>NSG 688</b> (3 cr) Clinical Leadership, Ethics, and Legalities for Role Development <b>NSG 690</b> (3 cr) Improving Health Outcomes: Understanding Global Justice and Social Determinants	<b>NSG 685</b> (3 cr) Philosophical and Theoretical Basis for Clinical Scholarship and Practice <b>NSG 686</b> (3 cr) Methodologic Approaches to Evidence-based Practice	<b>NSG 689</b> (3 cr) Health Care Systems Policy and Financial Management <b>Electives</b> and/or other coursework as needed
Year Two		
Fall (3)	Spring (3)	Summer (5)
<b>NSG 687</b> (3 cr) Clinical Epidemiology and Genomics for Advanced Practice Nursing <b>Electives</b> and/or other coursework as needed	<b>NSG 692</b> (3 cr) Information Systems and Technology in Health Care <b>Electives</b> and/or other coursework as needed	<b>NSG 696</b> (5 cr) Methods for Evidence Based Practice in Specialty Focused Practicum I <b>Electives</b> and/or other coursework as needed
Year Three		
Fall (5)	Spring (5)	Summer
<b>NSG 697</b> (5 cr) Methods for Evidence Based Practice in Specialty Focused Practicum II	<b>NSG 698</b> (5 cr) Methods for Evidence Based Practice in Specialty Focused Practicum III	

## Practicum Hours

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Informed by *The Essentials of Doctoral Education for Advanced Nursing Practice* (2015), practice experiences for postmaster's entry students are designed for opportunities to expand on proficiency and mastery of APRN or systems competencies. Graduates are expected to collaborate with other professionals in complex health environments with diverse populations to translate and apply evidence for clinical decision making. They are also leaders in developing, evaluating and disseminating standards of care while advocating for policy and initiatives that improve health outcomes.

All DNP students are required to complete a minimum of 1000 practice immersion hours post baccalaureate in nursing. Practice immersion hours are designed to demonstrate synthesis of expanded knowledge acquired within the DNP curriculum. The practice portion of the curriculum demonstrates the student's capability to meet the core competences of the DNP degree.

Practical learning experiences are structured across a series of three specialty focused practicum courses, I, II, and III that include course objective strategies for meeting overall program outcomes. The series of courses provides the student the opportunity to develop, propose, implement, and present the DNP project. The project reflects and demonstrates synthesis of the student's knowledge from all curriculum courses and unique practice experiences in the student's specified area.

The practice immersion hours (relevant to their DNP project) can be demonstrated through a variety of methods including:

- In-depth work/mentorship/collaboration with experts from nursing, as well as other disciplines
- Meaningful student engagement within practice environments
- Building and assimilating knowledge for advanced specialty practice at a high level of complexity
- Experience in the context within which the DNP project is implemented
- Integration and synthesis the DNP *Essentials* and specialty requirements necessary to demonstrate competency in an area of specialized nursing practice.

Ratio of Credit Hours to Clock Hours:

- **Didactic.** Courses offered on-line or in a blended format. UNCW SON documents these activities through the class schedule or syllabus assuring that DNP students are meeting the minimum semester credit hour requirement for the credit awarded. One credit hour for one hour of activity per week – 1:1
- **Independent Study.** Independent learning or experience involving self-directed learning under indirect supervision by course or clinical faculty (credit varies according to type of activity).
- **Practicum.** Practica are designed to demonstrate synthesis of expanded knowledge acquired within the DNP curriculum. One credit hour for four hours of activity per week—1:4. Practicum hours are not validated by student employment or expertise prior to the DNP program. The practicum hours signify the capability of the student to meet the AACN Essentials for DNP education. A minimum of 1000 hours post BSN is required. The hours can be demonstrated through a variety of methods including:

- Most students complete practice immersion hours at their site of employment as an APRN.
- Students are required to submit a signed “Letter of Understanding” between UNCW and their employer or practice site. The letter, though not a formal contract, is a signed Memorandum of Understanding (MOU) that the student’s employer is aware of the enrollment in the DNP program at UNCW. Furthermore, the student will be able to work on the identified project topic within this professional practice setting under the supervision of an identified faculty adviser and in association with an agency facilitator.
- For students not employed in a setting appropriate to their area of study in the DNP program, UNCW will execute affiliation agreements with a specified agency and clinical liaison which the student identifies.
- All requirements for establishing the practicum should be completed and on file at the time of enrollment in the course.
- DNP students may be asked to complete unique immunization/certification requirements depending on the nature of their clinical situation. Clinical mentors and/or agencies may require a drug screening or additional criminal background check. Costs associated with these processes are the responsibility of the student.
- **DNP Clinical Log.** All practicum experiences must be recorded in a clinical log, which includes verification of practice immersion hours at particular sites with specific clinical liaisons and the student’s meeting of program outcomes and DNP Essentials. At graduation the student must have recorded all required practice immersion hours and essential practicum work. This log will become part of the student’s permanent file.

### Program Specialization Leading to Special Graduate Concentrations

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Four post-master’s concentrations are available that would enhance the student’s program of study through existing program core courses and focused electives. The concentration cognates are aligned with faculty expertise across the campus. Upon graduation, the concentration will appear on the official UNCW transcript and the School of Nursing will confer a certificate of completion.

1. **Nursing Education:** The *Nursing Education* concentration includes 9 credits of cognates that prepare the DNP graduate for faculty roles either in academia or the service arena. The didactic content in these courses are required by the North Carolina Board of Nursing to demonstrate minimum competency as nurse educators.
  - NSG 513 - Foundations and Evidence-Based Practices for Nursing Education Didactic Instruction
  - NSG 524 - Foundations and Evidence-Based Practices for Nursing Education Clinical Instruction
  - NSG 525 - Foundations and Evidence-Based Practices for Nursing Education Distance Learning
2. **Transcultural Nursing:** The *Transcultural Nursing* concentration includes 9 credits of cognates to better prepare the DNP graduate for global or community roles with diverse and under-served populations.

NSG 580 Transcultural Health Care: 3  
 NSG 583 Migrant and Farm Worker Health: 3  
 NSG 690 Improving Health Outcomes: Understanding Global Justice and Social Determinants: 3

3. **Nurse Executive Leadership:** The *Nurse Executive Leadership* concentration includes 9 credits of cognates which expand the DNP skills for leadership roles in the health care industry.

NSG 688 Clinical Leadership, Ethics, and Legalities for Role Development: 3

NSG 689 Health Care Systems Policy and Financial Management: 3

*(Select one of the courses below)*

MBA 562 Management: 3

MBA 532 Corporate Finance: 3

MBA 516 Operations Management: 3

MIT 502 The Systematic Approach to Performance Improvement: 3

4. **Technology and Informatics:** The *Technology and Informatics* concentration includes 9 credits of cognates focused on technology for the practice arena in the health care industry and academia.

NSG 692 Information Systems and Technology in Health Care: 3

*(Select two of the courses below)*

MBA 515 Business Analytics: 3

MBA 514 Information Analysis and Management: 3

MIT 530 Evaluation and Change in Instructional Development: 3

MIT 522 Organization & Management of Instructional Technology Programs: 3

## Core Performance Standards

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Admission to the School of Nursing Doctor of Nursing Practice is not based on the following performance standards, but on the eligibility requirements defined in the admissions materials. **The performance standards are used to assist students in determining whether accommodations or modifications are necessary and provide an objective measure upon which informed decisions can be based about whether the student can meet requirements.**

- Critical thinking ability sufficient for clinical judgment.
- Interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds.
- Communication abilities sufficient for interaction with others in verbal and written form.
- Physical abilities sufficient to move from room to room and maneuver in small spaces.
- Gross and fine motor abilities sufficient to provide safe and effective nursing care and perform evaluation activities.
- Auditory abilities sufficient to monitor and assess health needs.
- Visual ability sufficient for observation and assessment necessary in nursing care.
- Tactile ability sufficient for physical assessment.

If an otherwise qualified student believes that he or she cannot meet one or more of the standards without accommodation or modifications, the nursing program will determine, on an individual basis, whether or not the necessary modifications can be reasonably made.

The following process will be used:

1. Each student admitted to the DNP program will have online access to the **School of Nursing Graduate Handbook** which includes a list of the required Core Performance Standards.
2. A student with disabilities who believes that he or she may need assistance in meeting the Core Performance Standards should contact Disability Resource Center, DePaolo Hall, (910) 962-7555. [UNCW Disability Services](#)
3. Students will be required to use the latest technological equipment and programs to participate in the hybrid on-line courses. You must have access to appropriate hardware, software and systems to be successful. Advice for the most essential hardware can be obtained from the [Technology Assistance Center](#)
4. The learning management system in use at UNCW is Blackboard for course delivery. The Technology Assistance Center is the resource for this program [Blackboard Learn](#)

## Academic Regulations and Procedures

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With regard to academic regulations and procedures, students are responsible for knowing and abiding by all policies included in the current issue of the UNCW Graduate Catalogue [UNCW Graduate Catalogue](#)

### 1. Course Registration

The process for registering for graduate courses is described on the website “Steps to Search for Courses and Register for Courses”. This site also contains the instructions for dropping and adding courses after you have registered. You will have to complete the process through [SeaNet](#) which is the portal for accessing courses, schedules, the graduate catalogue, and financial aid. [Graduate Course Registration](#)

### 2. Retention and Progression Policy

Refer to “Retention Policy” as outlined in the University of North Carolina Wilmington Graduate Catalogue under “Academic Regulations and Procedures” section for graduate school policy. However, note that the following are School of Nursing specific policies related to retention and progression. Students are responsible for knowing and abiding by all Graduate School and SON policies related to retention and progression.

- A DNP student must maintain a grade of “B” (3.0) in each required course in the programs in order to remain in the program. A student who receives less than a “B” (3.0), but no lower than a “C” (2.0), in any course will be allowed to repeat the one (1) course. A student will only be allowed to repeat one (1) course. A student who is unsuccessful on the second attempt in a nursing course or a student who receives a grade of “C” or below in two or more nursing courses will be dismissed from the program. In accordance with the graduate school progression policy, a student must maintain a cumulative GPA of 3.0 at all times. Further, if a student falls below the required 3.0 GPA at any time, he or she goes on academic probation. The student will

- be given the opportunity to repeat the course a maximum of one time when the course is offered again.
- An incomplete grade (“I”) indicates that the student was passing the course at the time of consideration for Incomplete, and due to circumstances beyond the student’s control, is unable to complete the course requirements. It also indicates that the student received consent from the course faculty member to complete the work for which the “I” grade is awarded. An “I” grade must be removed no later than one calendar year from the time the grade is awarded. An “I” grade not removed will be converted to an “F.”
- In order to progress in each course in the curriculum, students are expected to adhere to professional standards of advanced nursing practice and exhibit behaviors demonstrating role readiness. Examples of readiness include: 1) availability to the program; 2) collaborative interpersonal skills; 3) emotional stability; 4) ethical behavior and legal behavior; 5) clinical skills, and 6) personal and professional accountability. Students deemed clinical unsafe will be dismissed from the program and will not be eligible for readmission.

### 3. Grading and Appeals

The University of North Carolina Wilmington uses the quality point system and semester hour credit for calculating student achievement. Only courses approved by the Graduate Council will be eligible for S/U or P/F grading. Up to six credit hours of S/U may be applied to any degree program; however, doctoral programs may exceed this limit with dissertation hours and research hours. Grade symbols and equivalent quality points used are as follows

#### Graduate Grading:

Grade	Points	Grade Point	
A	100-90	4.00 qp	Excellence
B	89-80	3.00 qp	Completely satisfactory
C	79-70	2.00 qp	This course (only one) must be repeated
F	<70	0 qp	Failure
I/F		0 qp	Failure
P/F			Pass/Fail
S			Satisfactory progress (DNP Project)
U			Unsatisfactory progress (DNP Project)
I/U			Unsatisfactory progress (DNP Project)
I			Work incomplete
W			Withdraw passing

Any student considering an appeal on a final course grade should understand that each faculty member has the academic freedom and responsibility to determine grades according to any method chosen by the faculty member that is professionally acceptable, communicated to everyone in the class, and applied to all students equally. However, discriminatory, arbitrary, or capricious academic evaluation by a faculty member is a violation of a student’s rights and is the only valid ground for a final course grade appeal. Any intent to appeal must be made in writing to the Graduate School within 30 days of the

issuance of the grade in dispute. Students will not be allowed to enroll in courses while appealing a grade that would result in dismissal from the graduate program; however the Dean of the Graduate School may allow continued enrollment in unusual circumstances. Grades not appealed by that time become permanent. [Grade Appeal Procedure](#)

#### 4. Student Misconduct & Academic Integrity

Every student attending the School of Nursing is expected to adhere to the UNCW Honor Code. Any violation of the above is considered an act of misconduct and warrants disciplinary action appropriate to the violation. A student has the right to contest any allegation of misconduct or disciplinary action. Whenever possible, allegations of misconduct should be settled at the lowest possible level — between the individuals involved. Allegations of misconduct should be resolved as quickly as possible. When a faculty member believes that a student has engaged in misconduct or scholastic dishonesty, the faculty member will submit a report to the Office of Student Affairs. The student may then be required to meet with a staff member to discuss the matter. If a student disagrees with the outcome of the case and does not wish to accept an informal resolution, the Campus Conduct Board composed of faculty and students will hear the case. When students are found responsible for scholastic dishonesty, the sanctions can include but are not limited to the following options: failing grade on an assignment, failing grade in a course, completing a required assignment, being placed on disciplinary probation, being suspended, or being expelled. Be advised that University policy prohibits withdrawing from a course to avoid a grade penalty due to scholastic dishonesty. The School of Nursing does not allow a student to withdraw from a class if accused of scholastic dishonesty. A student has the right to a hearing and to appeal any disciplinary action. Records of academic misconduct are kept on file in the college office and in the Office of Student Conduct.

The primary contact for the Student Academic Honor Code and the Student Academic Honor Board is Assistant Dean [Dr. Chip Phillips](#). The link below provides detailed information about the [Student Academic Honor Code](#), how to report suspected violations of the honor code, and educational information and resources for both students and faculty on issues of academic integrity.

#### 5. Maintenance of RN Licensure and APRN Certification

All DNP students are required to maintain continuous RN licensure and APRN certification during enrollment in the DNP program. If a student's RN license and/or APRN certification is renewed during the program, the student should provide documentation of this renewal to the adviser. If the student's RN license lapses or becomes encumbered due to a disciplinary action, or the APRN certification lapses, the student can be dismissed from the DNP program.

#### 6. Expenses and Equipment

An estimation of the costs of the required items is as follows:

- **Student Liability insurance** – \$17.00 per year, required by the first day of clinical classes for coverage while working in a **student capacity only**. See “Insurance.”
- **Health Insurance** – Variable/dependent upon policy/coverage. See “Insurance.”
- **Unrestricted NC RN license** – Renewal fee every 2 years
- **Supplies** – Lab Jacket; to be determined when style/vendor selected; Name Tag – \$6.00 + tax.

- **Name Tags** — All admitted DNP students must purchase UNCW name tags. It is the student's responsibility to pay for and pick up these tags. Each student must obtain a name tag with the following information, using a consistent format:
  - UNCW (Logo)
  - First M. Last, RN
  - Doctor of Nursing Practice Student
    - Two vendors in Wilmington are prepared to assist you in obtaining name tags—brushed gold background with black lettering, 1 ½ “by 3” plastic tag with magnetic clasp.
      1. Coastal Engraving, 118-A S. Kerr Ave., Wilmington, NC 28403, (910) 392-5340.
      2. Four Seasons Trophy Shop, 221 S. Kerr Avenue, Wilmington, NC 28403, (910) 799-8840.

## 7. Practicum Placement

The DNP program is clinically oriented, and therefore, includes required practice immersion hours. Placement of students with approved clinical liaison is a collaboration between the student, course faculty, and student adviser. Students are expected to begin the program with identified clinical sites that support their program of study. Clinical liaisons include experienced DNP, PhD prepared faculty, nurse executives, APRNs, and/or physicians. Exposure to a variety of rural and urban settings throughout the program is encouraged.

- **Practicum Faculty:**
  1. Send MOU for placement..
  2. Inform SON Director's office of placements to confirm MOUs.
  3. Determine in consultation with the graduate coordinator, that a signed MOU is on file in the SON prior to any student interacting with patients or providers in the clinical setting.
- **Clinical Liaisons:**  
Are responsible for:
  1. Collaborating with the student regarding the DNP Project activities.
  2. Serve as a member of their DNP Committee
- **Students:**  
Students are responsible for maintaining communication with the clinical liaisons and the practicum faculty member. Here are some tips for making your visits with the clinical liaison valuable.
  1. Share DNP Project and practicum course objectives.
  2. Discuss the clinical liaison's expectations for the experience.
  3. Identify dates and times for the practicum experiences.
  4. Log all practice immersion hours which support the DNP Project.

### Written Complaint

Complaints are formal allegations (written) against the university, its units, its faculty, and its students. Complaints covered by this policy include those directly addressing some element of the UNCW mission. Examples would include grade appeals, academic dishonesty, sexual misconduct, harassment and discrimination, disability, residency, financial aid, and those issues specifically identified in the university's grievance policies listed below

[http://uncw.edu/aa/Policies\\_Reports/StudentComplaintsPolicy.html](http://uncw.edu/aa/Policies_Reports/StudentComplaintsPolicy.html)

## 8. Exit Interview

Prior to graduation, each student will be required to complete an exit survey. If needed, the student can request an exit interview with the graduate coordinator.

## 9. DNP Designation

Upon graduation, the UNCW diploma indicates that the degree earned is the Doctor of Nursing Practice (DNP) and will appear on the UNCW transcript. There is no candidacy in the DNP program. Students may not use DNP(c) or DNP(s) while still enrolled in the program. Students should continue to use only the degree initials that have been earned. It is appropriate to state that you are a DNP student in the text of articles or biographical information that accompanies a published article, paper presentation, or poster. The DNP credential is used only after one has successfully completed the DNP program.

## DNP Project Guidelines

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### 1. Planning the DNP Project

All students enrolled in the DNP are required to complete a clinical scholarly project which must adhere to the rigor of doctoral academic work. The DNP Project is a faculty-guided experience that provides evidence of your critical thinking, ability to integrate information, and understanding of research and program evaluation process incorporating the best available evidence to improve outcomes. The guidelines for completion of the various project options are presented in this handbook. The student is responsible to review and follow the timeline posted on the graduate school website and use the approved thesis format. In Appendix B, there is a list of possible DNP projects and a rubric of how each one could meet the 2015 AACN Essentials.

The UNCW School of Nursing faculty promotes the nursing profession through programs of research to establish evidence-based practice focusing on the health care of adults, children, women's health, and nursing education. Prior to starting any project, you must complete the IRB Training as listed on the UNCW Office of Sponsored Programs and Research Compliance website: [Research Compliance Training](#)

### 2. Identifying a topic for the DNP Project

Identification of the topic early in the program will facilitate the completion of your project according to the timeline you decide with your DNP Project team. Students are encouraged to use the rubric in Appendix B alongside discussions with faculty and clinical partners. When you identify a topic of interest, become familiar with the literature in the area, clarify the concept, and develop a plan for your project.

There are many different ways to identify a committee chair and a topic:

- Discuss project ideas with your academic adviser and find that this person is willing to work with you on a project.
- The academic adviser may recommend that you work with a particular graduate faculty member who has expertise in the topic area you are interested in.
- A listing of graduate faculty research interests can be found in Appendix C of the SON Graduate Handbook

### 3. Obtaining Approval for Your Proposal

DNP Project chair advisers will design a DNP Project team meeting to review and approve the project proposal. A formal committee meeting to approve your DNP Project is called an oral

presentation. You will supply a copy of the proposal draft to each committee member. **You should give your committee members at least 2 weeks to review your proposal before the meeting.** Be prepared to present a 15-20 minute summation of the proposed plan. Usually, the DNP Project chair will begin the meeting by asking you to briefly describe your project purpose, research or evaluation question and plan. Then the members will discuss what issues they feel are important. You can expect the committee to discuss the merits of your topic or clinical problem, the strengths and weaknesses of your approach to addressing the topic or clinical problem, any realistic and feasible changes they think you could make to improve it, and the limitations of what you are doing that cannot be reasonably overcome. They will also discuss any ethical and privacy concerns and the need for appropriate approvals and clearances, including Institutional Review Boards (IRB) and/or Health Insurance Portability Accountability Act (HIPAA) approvals. At the end of the meeting, the committee may approve the proposal as it is or with necessary changes. If they ask for substantial changes, they may want to meet again after you make those changes. Your faculty adviser and committee should make several issues clear to you before you begin your project:

- What changes need to be made in your plan.
- The approval process for the proposal once you have made the changes.
- When you can submit your papers for IRB/HIPAA approval.
- Once IRB/HIPAA approval is obtained, when you can begin your study.
- Obtain the project agreement form Appendix D.

#### **4. Human Subjects and Ethical Considerations**

UNCW researchers are responsible for designing and implementing ethical research, consistent with the three principles delineated in the Belmont Report: respect for persons, beneficence, and justice. They must also comply with all applicable federal regulations impacting the protection of human subjects, as well as all applicable UNCW policies and procedures, and IRB decisions, conditions, and requirements. Researchers are responsible for being properly trained, preparing timely research protocols and implementing them as approved, retaining research records, and reporting to the IRB. Researchers should refer to the relevant IRB policies which can be found on the IRB website [Research Compliance](#)

The procedure for seeking IRB approval for research with human subjects is as follows:

- Discuss your DNP Project and the type of review it requires and any special ethical considerations with your committee chair.
- Fill out the forms and have your committee chair approve and sign them.
- Obtain all other appropriate signatures.
- Take the signed forms to the [Office of Sponsored Programs and Research Compliance](#).
- You cannot proceed with program implementation and evaluation until you have written notification of IRB approval. A photocopy of your IRB approval letter and the approved consent form should be on file with your committee chair.

#### **5. Keeping on Schedule**

When you are developing the timeline for your DNP Project, be sure to leave enough time at the end for writing and revising the paper written to incorporate SQUIRE Guidelines. Unlike a course paper, your project will need to be revised until it is acceptable to your DNP Project team. **Remember that the timely completion of your project is your responsibility.** This includes identifying a clinical topic of interest, evaluation questions, working with your academic

adviser to obtain a committee chair, working on the project through completion, and staying in touch with your committee chair along the way.

## **6. Keeping in Touch with DNP Project Team Members**

The most common way Team Members operate is for you to work primarily with your DNP Project chair. Usually, the two of you will set up regular meetings so that you can continue to make progress. You show initial drafts to your chair and make revisions based on that person's comments. When your chair thinks that your project is ready, or thinks you need input from other DNP Project Team members, you will contact other members and arrange a meeting to review the project.

## **7. Process of Carrying out the DNP Project**

The DNP Project is a rigorous process to address relevant theoretical and clinical problems in health care systems. There is a primary student adviser and two other committee members who can offer expertise on the topic being investigated. The DNP Project Team members may be other faculty, field clinical liaisons or community members who would be of value in critiquing the students work. It is expected that the outcomes of the project may be ready for publication by the end of the final semester in the program. However, it is **not** a requirement for eligibility for graduation. The submission may be done after the completion of the project, often with additional help from the chair or members. Work on the DNP Project will span over the entire program with the student registering for NSG 699 credits in multiple semesters for a final total of 6-10 credit hours for completion.

The American Psychological Association (APA) style will be the format for the project regardless of the style required for the publication that might ensue. The process of completing the DNP Project is as follows:

- While enrolled in the DNP program, begin to identify a topic of interest. The project will be meaningful if it is aligned with your clinical practicum, topic of interest, and faculty adviser that will be your committee chair.
- To determine adviser's program of research, refer to Appendix C – Faculty Research Areas.
- Clarify availability of the faculty chair over the period you will be working on the project, develop a timeline for the project and identify which semesters you will register for NSG 699.
- Identify the type of DNP Project through a needs assessment conducted during Practicum I.
- Write a brief proposal and plan for developing the project.
- Review the proposal with your committee chair and revise as recommended.
- In consultation with your committee chair, identify the other committee members, and approach them to be on your committee.
- Submit the “DNP Clinical Scholarly Project Committee Agreement Form” to your committee chair. These forms may be obtained from the School of Nursing Graduate Student Handbook.
- Give the revised proposal to all committee members before the oral presentation of the proposal. Committee members may have suggestions for your proposal and may want to schedule a meeting to discuss the proposal before approving it.
- If IRB approval is needed, submit the appropriate forms to the appropriate IRB committees (UNCW and Other Institutions).
- DO NOT proceed with any type of recruitment, data collection, or analysis until you receive written approval from the respective IRB committees.

- Complete the project according to specified timeline established with faculty adviser.
- Write a complete draft of your project, submitting completed sections to your project adviser/committee chair, according to the schedule you have agreed upon.
- In consultation with your project adviser/committee chair, make revisions of the completed project draft and submit it to your committee members. You may need to schedule a meeting to discuss the proposal with them.
- In consultation with your committee chair, reserve a room for the oral defense of your project and bring the completed Graduate School Forms ready for signatures.
- After the oral presentation of the final project, make any requested revisions to the proposal and meet with committee members again if necessary.
- Consider the opportunities to disseminate the project findings:
  - The local chapter of Sigma Theta Tau International – Nu Omega research day as a poster or podium presentation
  - Journal article
  - Oral presentation at local clinical/community site forums
  - Other regional, national or international conferences

### **8. Writing the DNP Project**

There are several strategies that can help you in writing the final paper. What has already been written in your proposal, forms the basis for your final project. Review what is already written, incorporate recommendations from your committee chair or committee, and update and edit your work. The final paper describes what was done, the findings, and the conclusions. The tense found in the proposal is changed from future (what is the plan) to past (what was done). Any deviation from the original proposal must be noted and explained. Examining articles of similar format in the journal in which you hope to publish is a good idea before you begin writing for publication. You and your committee chair will determine the best audience and journal for article submission. The specific format for the final written report will be determined in consultation with the faculty adviser and should be suitable to the doctoral project.

Guideline for the order and content of final written DNP Project report

Title page – Appendix E

- Approval page with faculty signatures
- Abstract giving overview of the project

Introduction

- Problem description
- Available knowledge
- Rationale
- Specific aims

Methods

- Context
- Intervention
- Study of the intervention
- Measures
- Analysis
- Ethical considerations

Results

#### Discussion

- Summary
- Interpretation
- Limitations
- Conclusions

#### Other information

- Funding

The School of Nursing has adopted the style manual of the American Psychological Association (APA) as the format to be used by students. The student is expected to follow the APA style unless there is a compelling reason, approved by the committee chair, to use another format.

### **9.DNP Project Approval Meeting**

The procedures for the final presentation of the project is very much like the proposal meeting except there may be invited guests, students, and faculty from the School of Nursing and the University present. You set a date in consultation with all the committee members and a room is reserved for the meeting. You give each member a draft of the project at least 2 weeks before the meeting. You should be prepared to give a 20-minute oral summary of your project and its significance or implications for theory, future research, clinical practice, and/or health policy. Before you come to the meeting, be sure to have the signature page and the proposal approval form ready to be signed. During the meeting you will begin with an oral summary of your project. Handouts or PowerPoint presentations may be appropriate (you can discuss this with your Committee Chair before the meeting). Then, the committee members give their comments. The committee may ask you more questions regarding the purpose and overall implications and limitations of your project, proposed publications and dissemination of your findings.

The committee has three options:

- Accept the project as is
- Ask for minor revisions to be done but go ahead and approve the project pending these changes
- Request specific changes and review these changes before the project is officially approved.

If substantive changes are necessary, the committee will determine whether these changes are extensive enough to require another meeting. If not, the committee chair usually oversees revisions. When all the requested changes have been made, the members will sign the approval form Appendix F.

### **10.Graduation Deadlines**

Students completing a DNP Clinical Scholarly Project should have all aspects of their projects completed as directed by the project committee. Students should follow the deadlines set forth in the graduate school. Please go to the following website for details [Graduation Dates and Deadlines](#).

### **11.Disseminating the Results**

Your first responsibility is to share your results with the clinical site and/or subjects who are interested, if this is relevant for your project. For some projects, it is appropriate to share results

with participants, and if you have offered to do this, it is important to do so promptly. To share your results more widely, you should revise your paper and send it to a journal to be reviewed for publication. The final paper will need to be edited for submission to a journal. Look in the journal you are targeting for the **Guidelines for Authors** to get specific requirements. You improve your chances for publication by having your manuscript reviewed by others. Reviewers may include faculty, peers, and/or experts on your topic. The process of peer review is an important part of scholarship and one you will want to use whether you are preparing reports at your work site or writing for publication. You should also submit your project to be presented as a poster or a paper at a regional or national meeting. This is a good way to disseminate findings with clinical and educational relevance.

**\*\*Authorship for publications between the student, faculty adviser and committee members should be agreed upon early in the project development process\*\***

## Appendix A

### CertifiedBackground.com

You will order the required Criminal Background Check and Drug Test through CertifiedBackground.com. You will have access to these records and a student created portfolio, during your enrollment in the DNP program and after graduation. The total cost for this service is **\$61.00**, and includes the cost of your initial background check and urine screening. There will be an additional fee for any required repeat Criminal Background Check and Urine Drug Screen.

#### Create an Account:

To start this process, please go to <https://www.certifiedbackground.com/>. In the upper right corner, there are sign-in screens and an area to **Place Order**, requesting a **Package Code**. (See below) Use the Package Code: **UP29**, then click **GO**. You will be prompted to create an account. You can use any email of your choosing but will be required to use that same email when you return to access your account. SON administration cannot access your account; we can only view the documents that you submit to your *TO-DO LIST*. Please choose *Class of May (your graduation year)* as your classification and follow the prompts to create and pay for your account.



University of North Carolina - Wilmington - Nursing - DNP  
Instructions for Order Placement

## Welcome to CertifiedProfile!

When you place your initial order, you will be prompted to create your secure CertifiedProfile account. From within your CertifiedProfile, you will be able to:

- ✓ View your order results
- ✓ Manage the requirements specific to your program
- ✓ Complete tasks as directed to meet deadlines
- ✓ Upload and store important documents and records
- ✓ Place additional orders as needed

To place your order, go to [www.certifiedprofile.com](http://www.certifiedprofile.com)

In the "Place Order" field, enter the following package code specific to your school and program:

- UP29** – Background Check + Drug Test + Medical Document Manager
- UP29bg** – Background Check Package ONLY
- UP29dt** – Drug Test Package ONLY
- UP29im** – Medical Document Manager Package ONLY
- UP29re** – Recheck Background Check (with Drug Testing) Package ONLY

During order placement you will be asked for personal identifying information needed for security or compliance purposes. Supplying accurate and comprehensive information is important to the speed in which your order is completed.

The email address you use when placing your order will become your username for your CertifiedProfile and will be the primary form of communication for alerts and messages. Payment methods include: MasterCard, Visa, debit card, electronic check, money order, and installment payment.

You can respond to any active alerts or To-Do List items now, or return later by logging into your CertifiedProfile. You will receive alerts if information is needed to process your order and as requirements approach their due dates. Access your CertifiedProfile anytime to view order status and completed results. Authorized users at your school will have access to view your requirements and compliance status from a separate CertifiedBackground portal.



Your CertifiedProfile Service Desk is available to assist you via phone, chat and email  
Monday-Friday 8am-8pm & Sunday 10am- 6:30pm EST  
888-914-7279 or [cp servicedesk@certifiedprofile.com](mailto:cp servicedesk@certifiedprofile.com)

## Appendix B

DNP Clinical Scholarly Project Examples

DNP Essentials								
	<i>I</i>	<i>II</i>	<i>III</i>	<i>IV</i>	<i>V</i>	<i>VI</i>	<i>VII</i>	<i>VIII</i>
	<i>Scientific under-pinnings</i>	<i>Organization and system leadership/ management, quality improvement and systems thinking</i>	<i>Clinical Scholarship and Analytic methods for evidence-based practice</i>	<i>Utilization of technology and information to improve and transform health care</i>	<i>Health policy development, implementing and evaluation for advocacy</i>	<i>Inter-disciplinary collaboration for improving patient and population health care outcomes</i>	<i>Clinical prevention and population health, improving the nation's health</i>	<i>Advanced nursing practice</i>
<b>Quality improvement project</b>	Clinical related evidence	Systems in which program is embedded	Analysis matched to quality evaluation	Technology impacting quality of practices	Policy impacted by practice quality	Inter-disciplinary impact on practice quality	Impact of quality on health promotion/ outcomes	How APRN impacts practice quality
<b>Evaluation of new practice model</b>	Comparison evidence for practice model	System in which practice model is embedded	Analysis methods to evaluate practice model	Technology embedded in practice model	Policy changes related to practice model	Inter-disciplinary roles in new practice model	Health promotion impact in practice model	APRN role in new practice model
<b>Consultation project</b>	Evidence base for consultation project	System where consultation will occur	Analysis methods appropriate for consultation	Technology to carry out consultation, embedded in project	Policy change and impact from consultation outcomes	Inter-disciplinary providers impacting consultation	Health promotion/ outcomes impacted by consultation	APRN role in consultation
<b>Implement and evaluate evidence based practice guidelines</b>	Literature supporting practice guidelines	System in which guidelines will be implemented & evaluated	Analysis for evaluating practice guidelines	Technology impacting practice guidelines	Policy impacting or resulting from practice guidelines	Impact of practice guidelines on inter-disciplinary team members	Impact of practice guidelines on health promotion/ outcomes	APRN role in implementing and evaluating practice guidelines
<b>Analyze policy: develop, implement,</b>	Literature to support policy development,	System in which policy is embedded	Analysis methods for policy evaluation	Technology used for policy implementation	Policy impact on advocacy	Inter-disciplinary team members role in policy development,	Policy analysis impact on health	APRN expertise applied to policy analysis

<b>evaluate or revise</b>	implementation and evaluation			, evaluation and revision		implementation and revision	promotion/outcomes	
<b>Implement and evaluate innovative uses of technology to enhance/ evaluate care</b>	Literature supporting technology use in healthcare	Impact of technology on systems of care	Analysis methods appropriate to evaluate technology use in health care	Technology innovations for health care	Policy impact on designing innovative technology	Inter-disciplinary roles on technology use and evaluation	Technology impact on health care promotion and prevention	APRN competencies with innovative technology interventions for health care
<b>Provide leadership of inter-profession or intra-profession collaborative projects to implement policy, evaluate care models</b>	Literature supporting leadership of health care teams in collaborative projects, care models	Systems in which leadership is supported for inter-professional collaboration projects and care models exist	Analysis methods appropriate evaluate leadership role with inter-professional teams	Efficient use of technology for leaders of inter-professional collaborations and care models	Policy impact on leadership of inter-professional teams and care models	Leadership skills to influence inter-professional teams	Leadership practices that promote health, prevent illness and improve outcomes with inter-professional teams	APRN role in leading inter-professional teams in care models
<b>Collaborate on legislative change using evidence</b>	Literature underpinnings of legislative issues in health care	System circumstances that affect legislative actions	Analysis methods to evaluate legislative changes	Technology impacts on legislative changes	Policy outcomes from legislative changes in health care	Legislative changes that impact inter-professional collaboration	Legislative changes that impact health promotion, prevention	Legislative changes that influence the APRN role
<b>Work with lay &amp; professional coalitions-plan, implement, evaluate health programs.</b>	Literature revealing evidence related to health program evaluation	Systems supporting and sustaining health programs	Analysis methods appropriate to evaluate health programs	Technology influences on health program implementation and evaluation	Policy influences on health programs for lay or professional coalitions	Inter-professional collaborations with lay or professional coalitions to implement or evaluation health programs	Plan, implement & evaluate health programs that prevent illness and promote health	APRN role with lay or professional coalitions in regards to health program development

### Appendix C

#### School of Nursing Faculty Scholarship and Clinical Expertise

<b>Name/Rank/School</b>	<b>Degrees/Certifications</b>	<b>Scholarly and Research Interests</b>	<b>Clinical Expertise</b>	<b>Populations of Interest</b>
<b>Nancy Ahern PhD, RN</b> Associate Professor School of Nursing	<b>PhD</b> University of Central Florida  <b>MSN</b> University of Delaware  <b>MEd</b> Salisbury University  <b>BS</b> University of Delaware	Risks and resilience of adolescents  Contemporary risky behaviors of youth  Parent knowledge/awareness of adolescent risk-taking  Addictive gaming behaviors  Innovative teaching strategies  Using the arts in nursing education  Maternal-Fetal Attachment	Maternal-Child/CNS  Nursing Education  Nursing Administration  Perinatal loss (RTS Bereavement Counselor)	Adolescents  Junior faculty  Mothers and babies  Parents of adolescents  Nurse educators
<b>Omar Alzaghari, PhD, MSN, RN</b> Assistant Professor School of Nursing	<b>PhD</b> in Nursing, University of North Carolina Greensboro  <b>MSN</b> University of Jordan, Amman-Jordan  <b>BSN</b> Alzaytoonah University, Amman-Jordan	Management of chronic health conditions  Heart failure readmissions  Nursing management	Critical Care Nursing  Adult Health Nursing  Nursing Education	Older adults  Nurses  Nursing administration
<b>Tamatha Arms DNP, RN, PMHNP-BC, NP-C</b> Assistant Professor School of Nursing	<b>DNP</b> University of Tennessee Health Science Center University  <b>MSN</b> UNC-Greensboro  <b>RN-BSN</b> UNC-Greensboro  <b>ADN</b> Eastern Kentucky	Geriatric psychiatry  Interprofessional education	Geriatric psychiatry	Older adults

<p><b>Laurie Badzek LLM, JD, MS, RN, FAAN</b> Professor and Director School of Nursing</p>	<p><b>LLM</b> DePaul University, Chicago <b>JD</b> West Virginia University <b>MS</b> DePaul University, Chicago <b>BSN</b> West Virginia University</p>	<p>Ethical Issues and Obligations in Professional Practice Ethical Work Environments Moral Resilience Integration of Genomics into Nursing Practice Health Policy Legal issues in Professional health practice</p>	<p>Ethics Consultant Policy expert</p>	<p>Patients Nurses Administrators Health System Populations</p>
<p><b>April A. Bice PhD, RN, CPNP</b> Assistant Professor</p>	<p><b>PhD</b> University of Tennessee Knoxville <b>MSN</b> University of Tennessee Knoxville <b>BSN</b> University of Central Florida <b>Certification:</b> CPNP Pediatric Nursing Certification Board</p>	<p>Pediatric Health Pediatric Pain Management Pediatric Procedural Holistic Comfort Safe Execution of Pediatric Invasive Procedures</p>	<p>Pediatric acute care Pediatric Urgent and emergency care Pediatric &amp; Neonatal Intensive Care Pediatric Resource and Clinical Nursing Pediatric Advanced Practice Nursing- Primary Care</p>	<p>Infants Children Adolescents</p>
<p><b>Traci Bramlett DNP, RN</b> Assistant Professor School of Nursing</p>	<p><b>DNP</b> Mercer University <b>MS</b> Kennesaw State University <b>BS</b> Kennesaw State University <b>AS</b> Dalton State College <b>Certification:</b> FNP-Peds</p>	<p>Advanced practice nursing Pediatric obesity School and community health promotion Family health promotion</p>	<p>Pediatrics Family Primary Care</p>	<p>Children Adolescents Adults Families</p>

<b>Jeeyae Choi, RN, PhD</b> Associate Professor School of Nursing	<b>PhD</b> Columbia University <b>MS</b> Boston University <b>BS</b> University of Illinois at Chicago, IL <b>BS</b> Seoul National University, Seoul, Korea	Nursing Informatics: knowledge representation, Decision Support Systems Mobile technology for healthcare	Clinical decisions support systems Health information systems	Nurses Chronic illness
<b>Crissy Dodson, PhD, RN, BC-ADM</b> Assistant Professor School of Nursing	<b>PhD</b> University of North Carolina at Chapel Hill <b>MSN</b> University of North Carolina at Greensboro <b>BSN</b> University of North Carolina at Greensboro <b>Certification:</b> BC-ADM	Pharmacogenomics/Personalized Medicine Genomics Competency	Nursing Education Diabetes Intensive Care	Oncology Diabetes Nurses
<b>Kelly Ellington, DNP, APRN, WHNP-BC, RNC-OB</b> Assistant Professor School of Nursing	<b>DNP</b> University of South Alabama <b>Graduate Certificate</b> Nursing Education University of South Alabama <b>MSN</b> University of South Alabama <b>BSN</b> Winston Salem State University <b>Certification:</b> WHNP, RNC-OB	Women's Health Oncology Perinatal Loss Stem Cell Cord Blood Transplantation Increasing Utilization of LARC Web-Based Education Comprehensive Evidence-Based Obstetrical Care	Advanced practice nurse Women's Health Nurse Practitioner Maternal/Child Nursing Nurse Educator Web based teaching	Women Obstetrics Gynecology

<p><b>Jane A. Fox EdD, RN, PPCNP-BC</b> Professor School of Nursing</p>	<p><b>EdD</b> Columbia University Teachers College</p> <p><b>MS</b> Long Island University</p> <p><b>MA</b> Columbia University Teachers College Professorial Role in Nursing</p> <p><b>Pediatric Nurse Practitioner</b> Babies Hospital Columbia University</p> <p><b>MEd</b> Columbia University Teachers College</p> <p><b>BSN</b> Cornell University, New York Hospital School of Nursing</p> <p><b>BA</b> Communication Arts/Journalism</p>	<p>Family Violence</p> <p>Advanced Practice Nursing</p> <p>Pediatric Primary Care</p> <p>Global Health</p> <p>Cultural competence</p> <p>Education of APNs</p>	<p>Pediatric Primary Care</p> <p>Family health</p>	<p>Children and Vulnerable Populations</p>
<p><b>Matthew J. Gallek, PhD, RN</b> Associate Professor School of Nursing</p>	<p><b>PhD</b> University of Pittsburgh</p> <p><b>BSN</b> University of Pittsburgh</p> <p><b>BS</b> Psych Allegheny College</p> <p><b>Certification:</b> Certified Neuroscience Register Nurse</p>	<p>Genetics</p> <p>Aneurysmal Subarachnoid Hemorrhage</p> <p>Ischemic Stroke</p> <p>Surgical Treatment of Epilepsy</p>	<p>Neurovascular ICU,</p>	<p>Hospitalized Neurological Patients</p>

<p><b>Elizabeth Gazza PhD, RN</b> Associate Professor School of Nursing</p>	<p><b>PhD</b> Duquesne University <b>MSN</b> Indiana University of Pennsylvania <b>BSN</b> Indiana University of Pennsylvania <b>LPN</b> Indiana County Technology Center, Indiana, PA</p>	<p>Nursing faculty experience Nursing faculty development Mentoring Healthful Work Environments Facilitating scholarly writer development Online nursing education</p>	<p>Nursing Education Nursing Education Administration</p>	<p>Nursing faculty Nursing students</p>
<p><b>Susan Glose, PhD, ANP-BC</b> Assistant Professor School of Nursing</p>				
<p><b>Anne-Marie Goff PhD, RN</b> Assistant Professor School of Nursing</p>	<p><b>PhD</b> University of North Carolina at Greensboro <b>MS</b> Boston University <b>BS</b> Syracuse University</p>	<p>Stressors, Academic Performance &amp; Learned Resourcefulness Resilience Simulation learning, development, and evaluation Measuring Family Caring Higher Education</p>	<p>Maternal-Infant Nursing Psych/Mental Health Nursing and Higher Education 1. Curriculum Development 2. Teaching/Learning Strategies, 3. Learning Styles, 4. Problem-Based Learning, 5. Test Construction</p>	<p>Baccalaureate Nursing Students Other Health &amp; Human Services Students Faculty Families</p>

<p><b>Kellie M. Griggs, DNP, RNC-OB</b> Assistant Professor School of Nursing</p>	<p><b>DNP</b> (Education and Administration) Gardner-Webb University</p> <p><b>MSN</b> (Nursing Education and Leadership Focus) Gardner-Webb University</p> <p><b>BSN</b> Gardner-Webb University</p> <p><b>Certification:</b> RNC-OB (Inpatient Obstetrics Certification), AWHONN Certified Fetal Monitoring Instructor</p>	<p>Fetal Monitoring</p> <p>Nursing Safety and Perceptions</p> <p>High Risk Obstetrics</p> <p>Political Policy and Advocacy</p>	<p>Obstetrics and Gynecology</p>	<p>Women's Health (adolescents through middle-age)</p> <p>Childbearing age</p>
<p><b>Carol Heinrich PhD, RN</b> Associate Professor School of Nursing</p>	<p><b>PhD</b> Rutgers University</p> <p><b>MS</b> Bloomsbury University</p> <p><b>MA</b> New York University</p> <p><b>BS</b> College of New Jersey</p>	<p>Health Literacy</p> <p>Older Adults</p>	<p>Primary Health Care</p> <p>Adult Health</p> <p>Health Literacy</p>	<p>Vulnerable Populations: Adults</p>
<p><b>Denise Isabel, DNP, RN</b> Assistant Professor School of Nursing</p>	<p><b>DNP</b> Vanderbilt University</p> <p><b>MSN</b> University of Texas Health Science Center San Antonio</p> <p><b>BSN</b> Villanova University</p> <p><b>Certification:</b> Nursing Education</p>	<p>Health Literacy</p> <p>Health literate organizations</p> <p>Chronic disease management and Quality of Life</p>	<p>Public and community health</p> <p>Nursing leadership and management</p>	<p>Adults with chronic diseases</p>

<p><b>Carolyn Jones PhD, RN</b> Assistant Professor School of Nursing</p>	<p><b>PhD</b> University of North Carolina Chapel Hill <b>MSN</b> Medical University of South Carolina <b>BSN</b> Lenoir-Rhyne College <b>Certification</b> Neonatal, pediatric</p>	<p>Family-centered care  Experiences of families with a hospitalized child  Social support, stress, and coping  Impact of illness on family members and caregivers  Health care issues of individuals with cognitive and developmental disabilities</p>	<p>Simulation-based learning  Technology-based communication</p>	<p>Infants, children, and individuals with cognitive and developmental disabilities  Families and caregivers of individuals with chronic illness</p>
<p><b>Yeoun Soo Kim-Godwin PhD, RN</b> Professor School of Nursing</p>	<p><b>PhD</b> University of South Carolina <b>MN</b> University of South Carolina <b>MPH</b> Yonsei University, Seoul, Korea <b>MA</b> Asian Center for Theological Seminary <b>BS</b> Seoul National University, Seoul, Korea</p>	<p>Spirituality and Health  Prayer Intervention Research/healing  Cultural Competence</p>	<p>Global public health  Parish nursing  Service Learning/Teaching - International</p>	<p>Underserved countries  Vulnerable Populations</p>
<p><b>RuthAnne Kuiper PhD, RN, CNE, ANEF</b> Professor School of Nursing</p>	<p><b>PhD</b> University of South Carolina <b>MN</b> UCLA <b>BSN</b> The University of the State of New York <b>Certification</b> Nursing Education</p>	<p>Self-regulated learning  Cognitive &amp; Metacognitive models of learning  Clinical reasoning  Teaching/Learning Technologies</p>	<p>Critical Care Nursing  Adult Health Nursing  Clinical Education</p>	<p>Students  Faculty  Nursing staff  Educators</p>

<p><b>Sarah Lawson PhD, RN</b> Associate Professor School of Nursing</p>	<p><b>PhD</b> University of Virginia <b>MSN</b> University of Virginia <b>BSN</b> University of Virginia <b>ADN</b> Kauai Community College</p>	<p>Sexual assault/injury patients Prevention of sexual assault Health care access</p>	<p>Health disparities Bystander interventions</p>	<p>Underserved populations Abuse survivors/victims</p>
<p><b>Tammy Link, DNP, FNP</b> Assistant Professor School of Nursing</p>	<p><b>DNP</b> Duke University, Durham NC <b>MSN</b> Uniformed Services University of the Health Sciences, Bethesda, MD <b>BSN</b> Bowling Green State University/Medical College of Ohio</p>	<p>Antibiotic stewardship Infectious respiratory illnesses Adult and pediatric primary care</p>	<p>Primary Care/Family Practice Urgent Care</p>	<p>Children Adolescents Adults Women's Health Military populations</p>
<p><b>Barbara Lutz PhD, RN</b> Professor School of Nursing</p>	<p><b>PhD</b> University of Wisconsin-Madison <b>MSN</b> University of Wisconsin-Madison <b>MS</b> Northern Illinois University <b>BSN</b> University of Iowa</p>	<p>Transitional care Care coordination Systems of care Interventions for stroke care givers</p>	<p>Public health nursing Rehabilitation nursing Health care delivery</p>	<p>Aging Family caregiving Stroke</p>
<p><b>April Matthias PhD, RN, CNE</b> Assistant Professor School of Nursing</p>	<p><b>PhD</b> East Carolina University <b>MSN</b> Duke University <b>BSN</b> Waynesburg University</p>	<p>Nursing History Professional Identity Role Development Differentiated practice Nursing Education</p>	<p>Interprofessional Collaboration Nursing Practice Models On-line Education</p>	<p>Nurses Nursing Students</p>

<p><b>Brandy Mechling PhD, RN, PMHCNS-BC</b> Assistant Professor School of Nursing</p>	<p><b>PhD</b> University of North Carolina Chapel Hill <b>MS</b> Hampton University  <b>BS</b> Indiana University of Pennsylvania</p>	<p>Ambiguous Loss Theory</p> <p>Parental depression, changes in family dynamics, and the impact on children; young adult outcomes</p> <p>Youth care giving by children to parents with a mental illness</p> <p>Resiliency in young adults who face adverse childhood experiences (ACEs)</p>	<p>Psychiatric Mental Health Nursing</p> <p>Community Health Nursing</p> <p>Pediatric Nursing</p>	<p>Young or emerging adults (ages 18-25 years)</p> <p>Children and adolescents</p> <p>Families in which a parent suffers from a mental illness</p>
<p><b>Ruthanne Palumbo DNP, RN, CNE</b> Assistant Professor School of Nursing</p>	<p><b>DNP</b> Gardner-Webb University  <b>RN-MSN</b> University of North Carolina-Wilmington  <b>AD</b> Cape Fear Community College  <b>Certification:</b> CNE-Nursing Education</p>	<p>Opioid Addiction and IV drug use; Risk assessment and intervention.</p> <p>Fostering civility amongst nursing students.</p>	<p>Nursing Education</p> <p>Nursing Administration</p> <p>Clinical Education: Cardiac, Neurology, Oncology, Med-Surg.</p>	<p>Young adults-addiction</p> <p>Nursing student-civility</p>
<p><b>Diane Pastor PhD, MBA, NP-C, RN</b> Associate Professor School of Nursing</p>	<p><b>PhD</b> Columbia University  <b>MBA</b> Boston College  <b>BSN</b> University of Maryland  <b>Certification:</b> AANP Adult NP ANCC Nurse executive</p>	<p>Chronic illness and family caregiving</p> <p>Community geriatrics</p> <p>NP education</p> <p>Dementia caregiving</p>	<p>Cognitive impairment</p> <p>Palliative &amp; hospice care</p>	<p>Community geriatrics</p> <p>Advanced practice nurses</p>
<p><b>Linda C. Pugh, PhD, RNC, FAAN</b> Professor School of Nursing</p>	<p><b>PhD</b> University of Maryland  <b>MS</b> University of Maryland  <b>BSN</b> University of Maryland  <b>Certification:</b> Inpatient Obstetrics</p>	<p>Breastfeeding duration and exclusivity</p> <p>Theory of Unpleasant Symptoms</p> <p>Evidence-based practice</p>	<p>Childbearing women</p>	<p>Low-income women</p>

<p><b>Paula Reid RN PhD, RN</b> Associate Professor School of Nursing</p>	<p><b>PhD</b> Texas Woman's University <b>MSN</b> University of Alabama Birmingham <b>BSN</b> Columbia Union College <b>Certification</b> Women's Healthcare Nurse Practitioner (WHNP-BC)</p>	<p>HIV self-management strategies to improve quality of life  Social Support</p>	<p>Women's Health Issues HIV-AIDS  Community Health</p>	<p>Underserved Communities and Vulnerable Populations  HIV  Women Minorities - African Americans &amp; Hispanics</p>
<p><b>Penny Sauer PhD, RN</b> Assistant Professor School of Nursing</p>	<p><b>PhD</b> University of North Carolina at Greensboro <b>MSN</b> University of North Carolina at Greensboro <b>BSN</b> University of North Carolina at Greensboro <b>ADN</b> Scottsdale Community College <b>Certification:</b> Critical Care Nursing</p>	<p>Workplace violence  Bullying in nursing workforce issues  Resilience</p>	<p>Adult Critical Care  Stress reduction through Mindful practice</p>	<p>Nursing workforce  Adult health</p>
<p><b>Micah Scott, PhD, FNP</b> Assistant Professor School of Nursing</p>	<p><b>PhD</b> Hampton University <b>MS</b> Medical College of Virginia/Virginia Commonwealth University <b>BSN</b> Old Dominion University</p>	<p>Military Families  Veteran's Health  NP Education  Standard Patients</p>	<p>NP Education  Military Families  Family Medicine  Gastroenterology  Correctional Medicine/Health</p>	<p>Family and Adult Health  Free Clinic Care  NP Curriculum</p>

<p><b>Stephanie Smith, PhD, RN</b> Assistant Professor School of Nursing</p>	<p><b>BSW</b> Pembroke State University <b>BSN</b> Western Carolina University <b>MS</b> Auburn University at Montgomery <b>PhD</b> Auburn University</p>	<p>Health Systems  Community/Population Health</p>	<p>Medical/Surgical Nursing  Primary Care  Community Health</p>	<p>Health/Public Health Systems  Community Populations  Community Partnerships</p>
<p><b>Elise Thompson PhD, RN</b> Assistant Professor School of Nursing</p>	<p><b>PhD</b> University of Hawaii at Manoa  <b>MS</b> University of Hawaii at Manoa  <b>BSN</b> University of North Carolina Charlotte</p>	<p>Simulation methods  Anxiety effects on learning  Nursing Education Technology  On-line Learning</p>	<p>Adult Health  Nursing Education</p>	<p>Adults  Nursing Students</p>
<p><b>Stephanie Turrise PhD, RN, BC, APRN, CNE</b> Assistant Professor School of Nursing</p>	<p><b>PhD</b> Rutgers The State University of New Jersey-Newark  <b>Post-Master's Certificate in Nursing Education</b> Indiana University-Purdue University Indianapolis  <b>MSN</b> Adult NP Track: Rutgers The State University of New Jersey-Newark  <b>BSN</b> Bloomsburg University, PA  <b>Certification:</b> Nurse Educator Medical-Surgical Nursing</p>	<p>Health and illness beliefs – related to illness management, treatment adherence and health outcomes</p>	<p>Health care utilization  Hospital readmissions  Enhancing self-care and quality of life  Cardiovascular disease - heart failure</p>	<p>Adults and elderly  Chronically ill  Underserved and vulnerable populations  Self regulation theory  Simulation learning</p>

**Appendix D**

**DNP Project Agreement Form**

1. Students name: \_\_\_\_\_

2. Anticipated semester of graduation: \_\_\_\_\_

3. Project idea:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Chair signature: \_\_\_\_\_ Date \_\_\_\_\_

5. Student signature \_\_\_\_\_ Date \_\_\_\_\_

6. Committee member signature \_\_\_\_\_ Date \_\_\_\_\_

7. Committee member signature \_\_\_\_\_ Date \_\_\_\_\_

\*Completed at the end of NSG 696

**Appendix E**

**SAMPLE DNP PROJECT TITLE PAGE**

PROJECT TITLE: ALL CAPS AND CENTERED  
(Aligned as in Graduate School Thesis Format Manual)

Student (Author) Name (First MI. Last)  
A Project Submitted to the  
University of North Carolina at Wilmington in Partial Fulfillment  
Of the Requirements for the Doctor of Nursing Practice degree  
School of Nursing  
University of North Carolina Wilmington  
Year (4 digits)

Approved by

\_\_\_\_\_ (line 33)  
Print Name Committee Chair

\_\_\_\_\_ (line 40)  
Print Name Graduate Coordinator

**Appendix F**

**DNP Project Approval Form**

Student Name: \_\_\_\_\_

Title of Project: \_\_\_\_\_

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

The SON Graduate Council has judged the proposal to be:

Acceptable \_\_\_\_\_ Unacceptable \_\_\_\_\_

Suggestions/Recommendations: \_\_\_\_\_

Graduate Council Chair's Signature

Date

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_

\_\_\_\_\_  
Committee Chair's Signature

Date

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_

\_\_\_\_\_  
Committee Member's Signature

Date

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_

\_\_\_\_\_  
Committee Member's Signature

Date

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_

\_\_\_\_\_