Rule 214.7 sets for the requirements for faculty qualifications in vocational nursing education programs. Rule 215.7 sets forth the requirements for faculty qualifications in pre-licensure nursing education programs (diploma, associate degree, baccalaureate degree, or entry-level master's degree).

Rule 214.7(d)(1) and Rule 215.7(d)(1) state that in fully approved programs, if an individual to be appointed as a faculty member does not meet the requirements for faculty as specified in subsection (c), the dean/director/coordinator is permitted to waive the Board’s requirements, without Board approval, if the program and prospective faculty member meet the minimum criteria outlined in the rules, and after notification to the Board of the intent to waive the Board’s faculty requirements for a temporary time period not to exceed one (1) year.

I. Minimum program criteria:
   A. The program’s NCLEX examination pass rate for the preceding examination year was 80% or above; and
   B. The total number of faculty waivers in the program shall not exceed 10% of the total number of nursing faculty.

II. Minimum criteria for prospective faculty member:

   Rule 214.7(d)(3) describes minimum faculty criteria for a waiver:
   (A) hold a current license or privilege to practice as a vocational or registered nurse in the State of Texas;
   (B) has been actively employed in nursing for at least two (2) years of the last three (3) years;
   (C) if not actively employed in nursing during the past three (3) years, the prospective faculty's advanced preparation in nursing, nursing education, and nursing administration shall be considered; and
   (D) prior relevant nursing employment.

   Rule 215.7(d)(3) describes minimum faculty criteria for a waiver:
   (A) hold a current license or privilege to practice as a registered nurse in the State of Texas;
   (B) has at least two (2) years in the last four (4) years of nursing practice experience in the anticipated subject areas of teaching responsibility;
   (C) has earned a bachelor's degree in nursing or completed, as part of a nursing education program culminating in a master's or doctorate degree in nursing, the course work equivalent to the course work required for a bachelor's degree in nursing; and either
   (i) is currently enrolled in a master's nursing education program and has earned a minimum of 50% of the required credits toward the master's degree in nursing, excluding thesis or professional paper; or
   (ii) holds a master's degree in another field and has a documented plan to complete, within a designated time frame, the required number of graduate semester hours in nursing appropriate to the anticipated subject areas of teaching responsibility, six (6) graduate semester hours in nursing to teach in a diploma or associate degree nursing education program or twelve (12) graduate semester hours in nursing to teach in a baccalaureate degree or entry-level master's degree in nursing education program.

II. Time period for a faculty waiver:

   Rule 214.7(d)(4) related to Faculty Waivers states that “A waiver is valid for up to one (1) year.”
   Rule 215.7(d)(5) related to Faculty Waivers states that “A waiver is valid for up to one (1) year.”
III. Notification of Waiver to the Board Office  (See Section I under PROCESS below.)

<table>
<thead>
<tr>
<th>Rule 214.7(d)(5) requires that “The director or coordinator shall submit a sworn (notarized) notification of waiver to the Board.”</th>
<th>Rule 215.7(d)(6) requires that “The dean or director shall submit a sworn (notarized) notification of waiver to the Board.”</th>
</tr>
</thead>
</table>

IV. When Minimum Program Criteria or Minimum Prospective Faculty Member Criteria is not Met:  (See Section II under PROCESS below.) Only Rule 215 provides the option for a request for an emergency waiver from Board Staff.

| Rule 215.7(d)(4) states that “When the program does not meet the minimum program criteria or the prospective faculty member does not meet the minimum criteria for a faculty member, a petition for an emergency waiver may be submitted to the Board Staff for approval when a vacancy occurs because a faculty member fails to report as planned, i.e., sudden illness or death of a family member, or there is an unexpected resignation, or qualified applicants/prospective faculty are not available.” |

V. Extension of a Waiver:  (See Section III under PROCESS below.)

<table>
<thead>
<tr>
<th>Rule 214.7(d)(6) requires that “If an extension of the waiver is needed, the director or coordinator shall petition the Board for an extension of the original waiver.”</th>
<th>Rule 215.7(d)(7) requires that “If an extension of the waiver is needed, the dean or director shall petition Board Staff for an extension of the original waiver.”</th>
</tr>
</thead>
</table>

VI. Implications for Programs Holding National Nursing Accreditation:

Nursing programs holding national nursing accreditation are exempt from Rule 214.7 and Rule 215.7 related to Faculty. However, if nursing programs using the faculty waiver under Board rules wish to file a notification form for the waiver, it will be acknowledged and logged into the Education Log. This provides documentation that the program is adhering to Board rules which allow flexibility in faculty requirements but may not match accreditation requirements for faculty qualifications.

PROCESS:

I. Waiving the Board’s Requirements for Prospective Faculty

Nursing programs that hold national nursing accreditation are exempt from Rule 214.7 or Rule 215.7 and are not required to complete the waiver process. However, they must be in compliance with accreditation standards regarding faculty qualifications. If the program chooses to complete the waiver notification form based upon Board rules, it will be processed and documented in the Board office to support the program decision to employ the faculty member under the waiver process.

A. The dean, director, or coordinator shall review the prospective faculty member's qualifications against the required qualifications listed in either Rule 214.7 or Rule 215.7, as applicable, to determine if the prospective faculty member meets the Board's requirements for faculty or if it is appropriate to waive the Board’s requirements for prospective faculty.

B. The dean, director, or coordinator shall review the minimum program criteria and the minimum criteria for prospective faculty to determine if all minimum criteria is met.

C. If all minimum program criteria and all minimum criteria for prospective faculty are met, the dean, director, or coordinator is permitted to waive the Board’s requirements for prospective faculty and appoint the individual as a nursing faculty member after notification to the Board of the intent to waive the Board’s faculty requirements for a temporary time period not to exceed one (1) year.

D. The dean, director, or coordinator shall complete the “TEXAS BOARD OF NURSING NOTIFICATION FORM: FACULTY WAIVER”, have the form notarized, and submit the completed, notarized form to the office of the Texas Board of Nursing, ATTENTION - Education (See attached form).

II. Petition for An Emergency Faculty Waiver when Minimum Program Criteria or Minimum Prospective Faculty Member Criteria is Not Met (professional nursing programs only):

A. When petitioning for an emergency waiver of the Board's requirements regarding faculty qualifications when either the minimum program criteria or minimum prospective faculty member criteria is not met, the dean, director or coordinator shall submit to the Board office the following:

1. Completed Petition for Waiver of Faculty Qualifications Form (see attached form), stating the circumstances constituting the necessity for requesting the Emergency Waiver, date of planned appointment, rationale for
appointing individual, teaching assignment, plan for supervising and mentoring individual, and, if applicable, anticipated date of degree completion or completion of required graduate level nursing credits;
2. Completed Program Demographic Data Form (See attached form);
3. Updated Faculty Profile Form from the program’s last Texas Board of Nursing Education Program Information Survey (NEPIS);
4. Evidence of program’s recruitment efforts; and
5. Prospective faculty's:
   a. Curriculum Vitae/resume, including description of nursing and teaching experience; and, if applicable, 

III. Petition for an Extension of a Faculty Waiver
When petitioning for an extension of a prior faculty waiver, the dean, director, or coordinator shall submit to the Board office, ATTENTION - Assigned Education Consultant:
A. Completed Petition for Extension of a Faculty Waiver Form formally requesting the extension of the prior faculty waiver and including the rationale for needing an extension of the waiver, a plan for supervising, mentoring, and assisting the individual to complete the requirements of the faculty waiver, and, if applicable, the revised anticipated date of degree completion or completion of required graduate level nursing credits, and
B. Following documents -
   1. If applicable, copies of updated official transcripts;
   2. If applicable, revised graduate degree plan showing expected completion date of degree or evidence showing revised expected completion date of the required number of graduate level nursing credits;
   3. If applicable, evidence of CURRENT enrollment in master's degree in nursing education program or graduate nursing course appropriate to subject area of teaching responsibility;
   4. Copy of the faculty member’s most recent performance evaluation; and
   5. Copy of the official Board letter granting approval of the original faculty waiver.
TEXAS BOARD OF NURSING
NOTIFICATION FORM: FACULTY WAIVER

1. Name of Program/Type of Program: ______________________________________________________

2. Name of Dean/Director/Coordinator or Interim Dean/Interim Director/Interim Coordinator:

MINIMUM PROGRAM CRITERIA
1. Program’s NCLEX PN/RN pass rate for preceding year: ___________________________ *Must be 80% or above.

2. Current number of waivered faculty employed by the program, including this prospective faculty, divided by
   the total number of full-time and part-time faculty, equal = Percent: ____________________ *Cannot exceed 10%.

MINIMUM CRITERIA FOR PROSPECTIVE FACULTY MEMBER
1. Name of Prospective Faculty Member and Credentials: ________________________________

2. Did verification of current licensure substantiate that the prospective faculty has a current license or privilege to
   practice as a vocational nurse (VN programs only) or as a registered nurse in the State of Texas? ______ Yes ______ No
   LVN License # __________________________ State _______ Expiration Date __________________________
   (For VN Programs only.)
   RN License # __________________________ State _______ Expiration Date __________________________

For Vocational Nursing Education Programs Only
1. Was documentation reviewed substantiating that the prospective faculty has been actively employed in nursing for at
   least two years in last three years? ______ Yes ______ No

2. If the prospective faculty has not been actively employed in nursing for at least two years in the last three years, was
   documentation reviewed substantiating that the prospective faculty has advanced preparation in:
   (check all of the following that apply) ______ nursing; ______ nursing education; and/or ______ nursing administration,
   and that the prospective faculty has prior relevant nursing employment? ______ Yes ______ No

For Professional Nursing Education Programs Only
1. Anticipated subject area of teaching responsibility: _________________________________

2. Was documentation reviewed substantiating that the prospective faculty has at least two years in last four
   years of nursing practice experience in anticipated subject area of teaching responsibility? ______ Yes ______ No

3. Was documentation reviewed substantiating that the prospective faculty has a BSN? ______ Yes ______ No

4. If the prospective faculty does not have a BSN, was documentation reviewed substantiating the prospective faculty has
   completed course work equivalent to BSN? ______ Yes ______ No

5. If the prospective faculty does not hold a master’s or doctorate in nursing, was documentation reviewed
   substantiating that the prospective faculty is currently enrolled in a master’s or doctorate nursing education program
   and do transcripts document that the prospective faculty has earned a minimum of 50% of the required credits toward
   the master’s degree in nursing excluding thesis or professional paper? ______ Yes ______ No

6. If the prospective faculty does not hold a master’s or doctorate in nursing and is not currently enrolled in a master’s or
   doctorate nursing education program with a minimum of 50% of the required credits earned toward the degree, do
   transcripts document that the prospective faculty holds a master’s or doctorate degree in another field?
   ______ Yes ______ No
Degree(s) and field(s): ________________________________

7. If the prospective faculty does not hold a master's or doctorate in nursing, but holds a master's or doctorate degree in another field, do transcripts document that the prospective faculty has the required number of graduate level nursing credits completed appropriate to the anticipated subject area of teaching responsibility? _____ Yes _____ No

*Six (6) graduate level nursing credits are required to teach in a diploma or associate degree nursing education program or twelve (12) graduate level nursing credits are required to teach in a baccalaureate degree or entry-level master's degree in nursing education program.

8. If the prospective faculty member does not have the required number of graduate level nursing credits, does documentation substantiate current enrollment in graduate level nursing courses appropriate to the anticipated subject area of teaching responsibility and a documented plan to complete, within a designated time frame, the required number of graduate level nursing credits appropriate to the anticipated subject area of teaching responsibility? _____ Yes _____ No

9. Dates of Waiver: From ___________________________ to ___________________________

*Cannot exceed one year. Cannot be extended without Board Staff approval.

****************************************************************************************************************************************

AFFIDAVIT

I, ____________________________, being duly sworn, (Print or type name of Dean/Director/Coordinator or Interim Dean/Interim Director/Interim Coordinator)

depose and say that I am the Dean - Director - Coordinator - Interim Dean - Interim Director - Interim Coordinator (circle appropriate title)

of the ____________________________________________

(nursing education program)

nursing education program and that I have completed the above “Texas Board of Nursing Notification Form - Faculty Waiver”, that the factual statements that the form contains are within my personal knowledge, are true and correct, and all the requirements for a faculty waiver as required in 22 Texas Administrative Code §214.7, Vocational Nursing Education, or as required in 22 Texas Administrative Code §215.7, Professional Nursing Education, have been met.

AFFIX NOTARY SEAL BELOW

Signature of Affiant ______________________________________________________

(Signature of Dean/Director/Coordinator/Interim Dean/Interim Director/Interim/Interim Coordinator)

Sworn to before me this ________________ day of ____________________________, _________

Notary Public Signature ______________________________________________________

State of ____________________________

My Commission Expires ____________________________________________________
Name of Program/Type of Program:

Rationale for Petition:

Statement Regarding Recruitment Efforts:

LVN / RN License Number: _______________ State: _____ Expiration Date: _______________
(Circle type)

Name of Prospective Faculty Member ____________________________________________

Requested Dates for Waiver: From ___________________ To ___________________

Projected Date of Employment: ____________________________________________

Experience (Summarize):

Expected Teaching Responsibilities:

Plan for Supervising and Mentoring Individual:

Education (Summarize): Include copies of transcripts, if applicable, for obtaining the waiver.

******************************************************************************

Dean, Director, or Coordinator Signature ___________________________ Date ____________
TEXAS BOARD OF NURSING  
Nursing Education Program Demographic Data Form

Name of Nursing Program/Type of Nursing Program:

(1) Number of faculty waivers approved for current (20___) academic year: _____ FT _____ PT

(2) Number of *faculty with waivers employed during the current (20___) academic year:

_____ # of faculty with waivers ________ % of faculty with non-emergency waivers (divide #2 by #3)

(3) Total number of faculty employed for current (20___) academic year: _____ FT _____ PT

(4) Total number of faculty and number of faculty with waivers employed each year during the previous three years:

<table>
<thead>
<tr>
<th>Year</th>
<th># Employed</th>
<th># Waivers</th>
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</table>

(5) Faculty turnover for **previous (20___) academic year:

_____ FT _____ PT _____ % of faculty turnover.

(6) NCLEX-PN® or NCLEX-RN® Examination pass rate for the past two examination years:

<table>
<thead>
<tr>
<th>Year</th>
<th># of Candidates</th>
<th># Passing</th>
<th>% Passing Rate</th>
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</table>

Comments:

Note:
* Fully qualified faculty and faculty with waivers are reported based on the current academic year.
**Turnover of faculty reflects academic year immediately preceding the date of the petition.

******************************************************************************

Dean, Director, or Coordinator Signature ___________________________ Date _______________
Name of Program/Type of Program:

Name of Waivered Faculty Member:

LVN / RN    License Number: _____________________ State: ______ Expiration Date: ________________
(Circle type)

Requested Dates for Extension of Waiver: From _____________________ To _____________________

Rationale for Extension of Waiver:

Projected Completion Date of Requirements/Degree, if applicable: ________________________________

______ # of credit hours earned to date _______ # of credit hours remaining to meet educational requirements

Expected Teaching Responsibilities:

Plan for Supervising and Mentoring Individual:

Plan for Assisting Waivered Faculty to Meet Board's Requirements:

*****************************************************************************************************************************************
PROGRAM DATA

Current composition of faculty: ____________ FT ____________ PT

Faculty turnover for current year: ____________ FT ____________ PT

Current number of faculty with waivers:

NCLEX-PN® / NCLEX-RN® Examination pass rate for current (20 ___ ) Academic Year ______________ %
(Circle type)

*****************************************************************************************************************************************

Dean, Director, or Coordinator Signature ___________________________ Date ___________________________