

RANCHO SANTIAGO COMMUNITY COLLEGE DISTRICT

Request for Specific Equivalencies to Minimum Qualification for a Discipline/Program

FORM I

Each time a department wants to alter its agreed upon equivalencies for all discipline hirings, it must file a new "Request for Equivalencies to Minimum Qualifications" form.

Name of the Discipline: Nursing

- 1) List the current Minimum Qualifications for the discipline:

Master's in nursing

OR bachelor's in nursing **AND** master's in health education or health science

OR the equivalent

OR The minimum qualifications as set by the Board of Registered Nursing, whichever is higher.

- 2) List the equivalencies that the Department accepts as valid:

Successful completion or progression of all coursework required for the Master's or Doctorate degree in Nursing with successful progression of the thesis/dissertation/project/comprehensive examinations, if required, of a Master's or Doctorate degree in Nursing prior to the beginning of the term.

- 3) Rationale:

A candidate that meets the above equivalence has the necessary coursework to teach Nursing classes.

Submitted by: Rosemarie Hirsch

Department: Health Sciences/Nursing

REQUIRED SIGNATURES

SAC Department Chair or designee: Rosemarie Hirsch

A signature indicates support for the equivalency and agreement that the proposed qualifications are equivalent to the minimum qualifications of the discipline.

Signature: Rosemarie Hirsch Date: 2/23/17

SCC Department Chair or designee: N/A

A signature indicates support for the equivalency and agreement that the proposed qualifications are equivalent to the minimum qualifications of the discipline.

Signature: _____ Date: _____

Three faculty from the Department, FSA, Discipline or Division:

A signature indicates support for the equivalency and agreement that the proposed qualifications are equivalent to the minimum qualifications of the discipline.

1) Faculty's Name: Rosemarie Hirsch

Signature: Rosemarie Hirsch Date: 2/23/17

2) Faculty's Name: Becky Haglund

Signature: Becky Haglund Date: 2/23/17

3) Faculty's Name: JoAnn Nick

Signature: JoAnn Nick Date: 3-1-17

Academic Senate/Representative: Gina Grant

A signature indicates support for the equivalency and agreement that the proposed qualifications are equivalent to the minimum qualifications of the discipline.

Signature: Gina Grant Date: 3-1-17

Academic Dean/Supervisor: Nichelle Priest

Signature indicates receipt of equivalency request.

Signature: Nichelle Priest Date: 2.27.17

SAC Academic Senate President: Eliaht Jones

Signature: _____

Approved ☒

Denied ☐

Date: 3/23/17

SCC Academic Senate President: _____

Signature: _____

Approved ☐

Denied ☐

Date: _____

Reason for Denial:

College President or Designee: Linda D. Rose, Ed. D.

Signature: Linda Rose

Date: 3/28/17

If not approved at any level, the form will be returned to the appropriate Department Equivalency Committee.