



Nurse Aide Registry
 Oklahoma State
 Department of Health



**Oklahoma State Department of Health
 Nurse Aide Registry**

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**NOTICE OF CHANGE
 OAC 310:677-3-5(C)**

TRAINING PROGRAM:

TRAINING CODE:

COMPLETED BY:

DATE:

ADDRESS:

OAC 310:677-3-5(c) An approved program shall notify the Department in writing before making substantive changes to the program. Substantive changes shall include but not be limited to:

Check all applicable boxes and complete the 'Previous' and 'New' sections for the change(s) being reported. Attach all required documents.

Change in Location of Administrative Offices – OAC 310:677-3-5(c)(1)

Previous Location: _____

New Location: _____

**Change in requirements or procedure for selection of instructors (Submit documentation)
 OAC 310:677-3-5(c)(2)**

Change in Curriculum (Submit documentation) – OAC 310:677-3-5(c)(3)

Different Legal Entity sponsoring the Program – OAC 310:677-3-5(c)(4)

Previous Entity: _____

New Entity: _____

Change in Location of Classroom – OAC 310:677-3-5(c)(5)

Previous Location: _____

New Location: _____

Change in Location of Laboratory – OAC 310:677-3-5(c)(5)

Previous Location: _____

New Location: _____

**Please note that the Notice of Change is to be sent in advance of the change requested and will need to be reviewed before approval is given.*

Type or Print Name

Signature

Date