

NFLP PROGRAM SPECIFIC DATA FORM (New)
Instructions

CURRENT FISCAL YEAR? Enter the fiscal year date that is provided in the current NFLP Funding Opportunity Announcement cover page.

PREVIOUS NFLP APPLICANT? Instruction: Select 'YES' if your school has ever received past NFLP funding. Enter 'NO' if your school has never received NFLP funding.

PART 1 – PROGRAM INFORMATION

A. Applicant and Program Information

Type of Institution

Public and private institutions are eligible to apply. The selection will enable the applicable data fields to be completed under Sections E.1-E.3 (Enrollee Information) and F. (Tuition Information).

Eligible Entity

An eligible entity is an accredited collegiate school of nursing that offer advanced graduate (master's and doctoral) nursing degree programs that prepare nurse faculty/educators.

Educator Component/Course Offered?

For each course entered, details such as the number of credits, whether it is a required or elective course, if it includes distance learning, and the competencies it addresses should be provided.

Of the six educator competencies listed (below), at least two of the first four Nurse Educator Competencies must be selected for all courses added in this section.

- Use of educational theory and evidence-based teaching practices.
- Identification of individual learning styles and unique learning needs of traditional and non-traditional students.
- Assessment, measurement, and evaluation strategies.
- Curriculum design and evaluation of program outcomes.
- Design and implementation of scholarly activities in an established area of expertise.
- Balancing teaching, scholarship, and service demands inherent in the role of nurse educator.

B. Accreditation and Approvals

Accreditation documentation for your program should be provided either in the form of a letter or certificate from CCNE, NLNAC, COA, or ACME. A letter from the United States Department of Education providing reasonable assurance of accreditation for your Program(s) is also accepted. Failure to provide documentation of each applicable accreditation with the application will render the application non-responsive and the application will not be considered for funding under this announcement.

Each letter(s) or certificate of accreditation must be uploaded as Attachment 1. The filename attachment should specify the accreditation name (i.e., *Attachment1_CCNE.doc*, *Attachment1_COA.doc*).

Other Attachments

All 'other' attachments must not be uploaded in this form. Please upload attachments 1-8 below under the Other Project Information section of the HRSA EHBs application.

- Letter from Department of Education – *If applicable, upload as Attachment 2*
- Documentation of Collaborative Arrangement – *If applicable, upload as Attachment 3*
- Biographical Sketch – *Required, upload as Attachment 4*
- Nursing Program Change or Addition, – *If applicable, upload as Attachment 5*
- Institution Diversity Statement – *Required, upload as Attachment 6*
- Maintenance of Effort Documentation – *Required, upload as Attachment 7*
- Other Relevant Documentation , *If applicable, upload as Attachment 8*

PART 2 – FUND INFORMATION

C. Federal Funds Requested

Applicants may determine the FCC amount requested by calculating the tuition and other educational fees for the academic year multiplied by the number of continuing NFLP students and prospective new students expected to receive NFLP loan support. The Federal funds requested in this section should consider the enrollee data that will be provided under Sections E.1-E.2.

Example:

$$\begin{aligned}\text{FCC Amount Requested} &= (\text{Tuition costs plus other educational fees/expenses for an academic year multiplied} \\ &\text{by the number of continuing NFLP students plus the number of prospective new} \\ &\text{NFLP students expected to request NFLP}) \\ &= \$(25,000 + 2000) * (15 + 5) \\ &= \$540,000\end{aligned}$$

IMPORTANT NOTE: Applicant should consider the required 1/9 institutional capital contribution when providing the information.

D. NFLP Loan Fund Balance/Unused Accumulation

Verify the NFLP loan fund balance with the appropriate officials at your institution. New applicants must enter "\$0".

PART 3 – NFLP ENROLLEE AND GRADUATE INFORMATION

This section will enable data fields based on the selection for "Type of Institution" (Public or Private) under Section A.

- E.1 NFLP Enrollees (Continuing) by Degree Level** – Provide the number of continuing NFLP enrollees expected to receive NFLP support during the current academic year (Fall/Spring/Summer). All data fields must be completed. Enter "0" if not reporting data in the fields.
- E.2 NFLP Enrollee (New) by Degree Level** – Provide the number of projected new enrollees expected to receive NFLP support during the current academic year (Fall/Spring/Summer). All data fields must be completed. Enter "0" if not reporting data in the fields.
- E.3 Enrollees That Applied for NFLP But Not Supported** – Provide the number of enrollees that applied but did not receive NFLP support during the previous academic year. All data fields must be completed. Enter "0" if not reporting data in the fields.
- E.4 NFLP Graduates and Graduates Employed as Nurse Faculty** – Provide the number of NFLP students that graduated during the previous academic year. Provide the number of NFLP graduates that reported employment as full-time faculty during the previous academic year. All data fields must be completed. Enter "0" if not reporting data in the fields.
- E.5 NFLP Enrollees by Practice Role** – Provide the total number of continuing and projected new NFLP enrollees by practice. All data fields must be completed. Enter "0" if not reporting data in the fields.
- ✓ The total Master's enrollees for all Nurse Practice Roles listed should reconcile with the sum of total Master's (FT and PT) under Sections E.1 and E.2.
 - ✓ The total Doctoral enrollees for all Nurse Practice Roles listed should reconcile with the sum of total Post-BSN – PhD/DNSc, Post-BSN – DNP, Post-Master's – PhD/DNSc, Post-Master's – DNP (FT and PT) under Sections E.1 and E.2.

PART 4 – TUITION INFORMATION

F. Tuition, Required Terms and Credit Hours

Provide the required tuition information for each distinct graduate nursing degree program for which enrollee information is provided under Sections E.1-E.2.

- Program Degree – Select each program degree level and provide the number of terms, the number of credits and the tuition data.
- Tuition Costs Per Term – For “Full-time” tuition costs per TERM, enter total amount for one term with fees and expenses based on the required full-time credit hours (or average full-time credit hours). For “Part-time” tuition costs per TERM, enter total amount for one single credit hour with fees and expenses (*Example*, \$2,500 full-time tuition per term divided by 9 credit hours equals \$277 for a single credit hour). NOTE: If you are a PRIVATE institution, enter tuition data under in-state only.