

## Oklahoma State Department of Health

Nurse Aide Registry P.O. Box 268816 Oklahoma City, OK 73126-8816 Telephone: (405) 426-8150

FAX: (405) 900-7572

## 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 – O	AC 310:677-3-5(c)(5)
Change in Location of Classifoon	
Previous Location:	
New Location:	
☐ Change in Location of Laboratory– C	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