## MONTANA BOARD OF REGENTS

## **LEVEL II REQUEST FORM**

Item No.:	130-2852-R0306	Date of Meeting:	March 1–3, 2006	
Institution:	Montana State Universit	Montana State University – Great Falls		
Program Title:	Practical Nursing Certifi	Practical Nursing Certificate		
Level II proposal	s require approval by the Board of R	Regents.		
in, or termination (a) addition, reas budgets, cost ce	equested (check all that apply): In of programs, structures, or administing signment, or elimination of personnenters, funding sources; and (c) change university System and communiticategory:	trative or academic enti- el, facilities, or courses of ges which by implication	ties typically characterized by the of instruction; (b) rearrangement of n could impact other campuses	
	<ul><li>Establish new degrees and a</li><li>Expand/extend approved mi</li><li>Any other changes in govern</li></ul>	ertificate where there is add majors to existing d ssion; and nance and organization	no major or no option in a major; egrees;	

## **Specify Request:**

similar unit.

Montana State University - Great Falls College of Technology seeks permission to convert its existing Associate of Applied Science degree in Practical Nursing to a Certificate of Practical Nursing in accordance with the common curricula for two-year nursing programs adopted by the Office of the Commissioner of Higher Education.

division, school, department, institute, bureau, center, station, laboratory, or