

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Health Resources and Services Administration**

Bureau of Health Professions
Division of Nursing

Advanced Education Nursing Traineeship (AENT) Program

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**FUNDING OPPORTUNITY ANNOUNCEMENT
REVISED WITH CORRECTIONS DECEMBER 1, 2010**

Fiscal Year 2011

Phase 1: Application Due Date in Grants.gov: December 22, 2010
Phase 2: Supplemental Information Due Date in EHBs: January 21, 2011
Ensure your Grants.gov registration and passwords are current immediately!!

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Legislative Authority: Title VIII , Section 811 (a)(2) of the Public Health Service Act, (42 U.S.C. 296j(a)(2)), as amended by Section 5308 of the Patient Protection and Affordable Care Act, Public Law 111-148.

EXECUTIVE SUMMARY

The Health Resources and Services Administration's (HRSA's) Bureau of Health Professions (BHP) administers the **Advanced Education Nursing Traineeship (AENT) Program**. The purpose of the AENT Program grant is to provide funding for traineeships that will pay all or part of the costs of the tuition, books, and fees of the program of advanced nurse education, and the reasonable living expenses of the individual during the period for which the traineeship is provided. **The funds appropriated for the AENT Program are distributed among eligible institutions based on a formula.**

In Fiscal Year (FY) 2011, \$16 million is expected to be available to provide funding to an estimated 352 grants.

HRSA will use a two-tier submission process for the AENT applications via Grants.gov and the HRSA's EHBs.

- **Phase 1 - Grants.gov** – Application Form (SF-424 R&R Form) and HHS Checklist Form HHS 5161-1 must be submitted via Grants.gov with a due date of December 22, 2010.
- **Phase 2 -HRSA EHBs** – Biographical Sketch, AENT Attachments and AENT Program Specific Tables must be submitted via the HRSA's EHBs with a due date of January 21, 2011.

PROGRAM UPDATE:

1. The Stipend Level was increased from a maximum of \$8,800 to a maximum of \$21,180 per year. This policy change was implemented when awarding FY 2010 awards.
2. Part-Time students were eligible for traineeship support throughout the program of study. This policy change was implemented when awarding FY 2010 awards.
3. The Patient Protection and Affordable Care Act of 2010 deleted the 10% limitation on doctoral programs entirely. This change supports the need for more nurse faculty prepared at the doctoral levels. This change was implemented when awarding FY 2010 awards.

MAJOR FISCAL YEAR 2011 FUNDING OPPORTUNITY ANNOUNCEMENT CHANGES:

1. The page limit was increased from 20 pages to 35 pages.
2. Updated Approval Information on Attachment 2.
3. Revised the AENT Tables to capture comprehensive data for the Students Enrolled, Trainees Supported, Graduates and Graduates Supported by the AENT Program at both the Master's and Doctoral levels.
4. Revised Table 5 - AENT: Ethnicity Data and Table 6 – AENT: Race / Disadvantaged.
5. New Tables: Table 7 – AENT: Age and Gender Data and Tables 8A and 8B – AENT: Projected Student Enrollment and Traineeship Support (Master's and

Doctoral).

6. Program Definitions – added definition for Stipends and Primary Care.

FUNDING FACTORS

Under the AENT Program, funding factors are a “**statutory funding preference**” and “**special consideration**.”

Funding factors may be applied in determining the funding of approved applications. A funding factor is defined as a favorable adjustment of the formula that determines the amount of the grant award. Applicants that qualify for one or both of the funding factors may receive an increase to their grant award amount.

Statutory Funding Preference

A funding preference is defined as the funding of a specific category or group of approved applications ahead of other categories or groups of applications. The authorizing legislation provides a funding preference for some applicants. Applicants receiving the preference will be placed in a more competitive position among applications that can be funded. Applications that do not receive a Funding Preference will be given full and equitable consideration during the review process.

Title VIII, Section 805 of the PHS Act provides a funding preference that will be applied to approved applications that will substantially benefit rural **OR** underserved populations, **OR** help meet public health nursing needs in State or local health departments.

Special Consideration

A special consideration is defined as the enhancement of priority scores by peer reviewers based on the extent to which the application addresses areas of concern in a discretionary program

Title VIII, Section 811(g)(2) of the PHS Act, as amended by the Affordable Care Act, provides for a special consideration to eligible entities that agree to expend the award to train advanced education nurses who will practice in Health Professional Shortage Areas (HPSAs) designated under section 332 of the PHS Act.

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I. FUNDING OPPORTUNITY DESCRIPTION

1. Purpose

Title VIII of the Public Health Service (PHS) Act as amended by the Affordable Care Act of 2010 authorizes grants to provide funding for traineeships that will pay all or part of the costs of the tuition, books, and fees of the program of advanced nurse education, and the reasonable living expenses of the individual during the period for which the traineeship is provided. This announcement solicits applications for the Advanced Education Nursing Traineeship (AENT) program.

AENT PROGRAM REQUIREMENTS

The institution must adhere to the following **AENT Program Requirements** (Use of Funds, Student Eligibility, Appointment of Student Trainees, Length of Support and Termination of Student Trainees):

Use of Funds and AENT Program Terms

The grantee is responsible for the disbursement of grant funds to eligible students.

Use of Grant Funds

- 1) Stipends for student cannot exceed \$21,180 per year and are to be prorated for training periods involving less than 12 months.
- 2) Full tuition and fees are allowable costs.
- 3) Required textbooks are an allowable cost up to \$500 per trainee. However, books for library or personal use may **NOT** be charged to the grant.
- 4) Trainee travel is **NOT** an allowable expense.
- 5) Indirect Costs (Facilities and Administrative - F&A Costs) are not applicable to the AENT Program.
- 6) Nurse Anesthetist discipline, only full-time, first-year nurse anesthesia students may be supported under the AENT program. Data regarding nurse anesthesia students should be reported on Table 2 only. **NOTE:** Institutions should submit a separate Nurse Anesthesia Traineeship Program grant application (**HRSA-11-044**) to support nurse anesthesia students enrolled beyond the first 12 months of study.

AENT Program Terms

- 1) Grant funds may not be used for non-trainee expenses (except up to \$500 per trainee for required books), indirect costs, for trainee travel or to defray costs of attending professional society meetings.
- 2) Grant funds may only be used to support all or part of the costs of the tuition, books (up to \$500 for required books), and fees of the program of nursing with respect to which the traineeship is provided and reasonable living expenses of the individual during the period for which the traineeship is provided.
- 3) Nurse Anesthetist students may only be supported during the first year of a master's or doctoral program.

- 4) The stipend level shall not exceed \$21,180 per trainee per annum. Periods involving less than a year are to be prorated.
- 5) Students in the combined RN to Master's degree program must have completed basic nursing preparation, eligible for the NCLEX and be in the Master's component of the program in order to be eligible for the traineeship.
- 6) The grantee must complete a Statement of Appointment form, signed by the project director and trainee, and maintain the Statement of Appointment form for a period of 3 years (at the grantee institution and not mailed to HRSA), primarily for auditing and data collection purposes. The trainee must receive a copy.
- 7) **All nursing programs and consortium partners, if applicable, associated with the project must be accredited for the purpose of nursing education. The grantee must provide evidence of continued/ongoing accreditation by the appropriate national nurse education accrediting agency recognized by the Secretary of the U.S. Department of Education within 30 days of its decisions. Failure to do so could result in a disallowance of expenditures.**

Eligible Students – To be eligible for AENT support, the student must be enrolled at the institution in a Master's nursing program, a nurse-midwifery certificate program, a combined RN to Master's degree program, a post-nursing Master's certificate program, or a nursing doctoral program and be:

- 1) Enrolled full-time or part-time in an advanced education nursing program for preparation as a nurse practitioner, nurse-midwife, clinical nurse specialist, public health nurse, nurse administrator, nurse educator, or "other" nurse specialty determined by the Secretary to require advanced education.
- 2) Enrolled full-time in the first-year of a nurse anesthesia program.
- 3) Pursuing a Master's or doctoral degree in nursing, a combined RN to Master's degree, a nurse-midwifery certificate, or a post-nursing Master's certificate;
- 4) A citizen of the United States, a non-citizen national, or foreign national who possesses a visa permitting permanent residence in the United States (Individuals on temporary or student visas are NOT eligible to receive AENT support.); and
- 5) Eligible to sit for national nursing certification in the nursing specialty or field of study (as applicable) following graduation. Include a statement in the Program Narrative the national nursing certification exam graduates will be eligible to sit for upon completion of the program.

Appointment of Trainees – The grantee is responsible for the appointment of eligible students as trainees following the receipt of the Notice of Award (NoA).

- 1) A trainee may be appointed at the beginning of any academic period, including a summer session, which falls within the budget period specified by the current NoA.
- 2) The training period supported by a traineeship may extend beyond the budget period only if the training is continuous.
- 3) Each new appointment or reappointment must be made for a period of not less than 9 months, except to complete the required program of study.
- 4) No appointment or reappointment may exceed 12 months.
- 5) Only students in the graduate component of a RN to Master's degree program are eligible for appointment.

- 6) Trainees must agree to provide the institution with the necessary information to complete the required **Statement of Appointment form**. **The most recent Statement of Appointment form may be accessed via the following link (<http://grants.nih.gov/grants/forms.htm>)**. The form indicates to “*Return this form to the PHS awarding component*”, however, for this program, the form should be **maintained at the institution and not submitted to HRSA**. Trainees must agree to submit data regarding professional activity following graduation to the School of Nursing.
- 7) Under the Nurse Anesthesia discipline, only full-time, first-year nurse anesthesia students are eligible for appointment under the AENT Program. **NOTE:** Institutions should submit a separate Nurse Anesthesia Traineeship Program grant application (**HRSA-11-044**) to support nurse anesthesia students enrolled beyond the first 12 months of study.

Length of Support – Under the AENT Program, support per full-time student is limited to a maximum period of 36 months. Students progressing through the program part-time may receive traineeship support for 48 months. The grantee must assure that the requirements for length of support are met.

AENT Program support for each individual recipient:

- 1) is awarded on a yearly basis;
- 2) is not transferable from the grantee institution which provided the support; and
- 3) may be provided by more than one institution if the student who has a traineeship at one institution receives an appointment in another institution, but only if the cumulative traineeship support received does not exceed 36 months for full-time study and 48 months for part-time study.

Termination of Trainees – The grantee is responsible for monitoring the academic success or failure of each trainee and for the termination of an AENT if the trainee:

- 1) is unable to complete the program of study for which the traineeship was awarded;
- 2) withdraws from the institution prior to the scheduled completion of the program;
- 3) fails to meet the predetermined academic standards of the institution; or
- 4) requests to terminate AENT support.

2. Background

The mission of the Health Resources and Services Administration’s (HRSA’s) Bureau of Health Professions (BHP) is to increase the population’s access to health care by providing national leadership in the development, distribution and retention of a diverse, culturally competent health workforce that can adapt to the population’s changing health care needs and provide the highest quality of care for all. BHP serves as a focal point for those interested in health professions and workforce issues. Additional information about the BHP and its programs is available at <http://bhpr.hrsa.gov/>.

Advanced nursing education makes a critical difference in today’s increasingly complex health care environment. The United States health care system’s increasing demand for front-line primary health care, the accelerating drive toward prevention, and cost-efficiency are driving the nation’s need for nurse practitioners, clinical nurse specialists, certified nurse-midwives, and

other RNs with advanced education. The Advanced Education Nursing Traineeship Program provides traineeship funding to schools of nursing for student support of the tuition, books, fees and the reasonable living expenses needed by registered nurses to become nurse practitioners, clinical nurse specialists, nurse anesthetists, nurse-midwives, nurse educators, nurse researchers/scientists, public health nurses, nurse administrators and other advanced nurse specialties. Students progressing through these programs, receiving funding from the AENT program, may also be prepared as nurse faculty to teach in Schools of Nursing for all levels of nursing students.

The term “advanced education nurses” means individuals trained in advanced degree program to serve as nurse practitioners, clinical nurse specialists, nurse-midwives, nurse anesthetists, nurse educators, nurse administrators, public health nurses or other nurse specialists determined by the Secretary to require advanced nurse education. Advanced degree programs include master’s and doctoral degree programs, combined RN/master’s degree programs, post-nursing master’s certificate programs, or in the case of certificate nurse-midwifery programs, those in existence on November 12, 1998.

II. AWARD INFORMATION

1. Type of Award

Funding will be provided in the form of a grant. The funds appropriated for the AENT Program are distributed among eligible institutions based on a formula.

2. Summary of Funding

The AENT Program will provide funding during Federal fiscal year 2011. For fiscal year 2011, approximately \$16 million is expected to be available to fund approximately 352 grants.

The appropriation for the program is distributed among the eligible applicants using a formula with the following steps:

- **Step 1:** Determine the number of schools that meet the funding factors (Statutory Funding Preference and Special Consideration). The total amount for the funding factors is subtracted from the appropriation.
- **Step 2:** From the remaining balance of the appropriation, the cost (dollar) per eligible trainee is calculated by dividing the remaining balance by the Total Full Time-Equivalents (Total FTE = Full Time Students plus Converted Part-Time Students) plus the total graduates.

The award to each applicant is calculated by multiplying the cost (dollar) per eligible trainee by the Total FTE plus the amount for each funding factor (Statutory Funding Preference and Special Consideration) that is met.

Because of the formula, awards to new schools/programs with few or no enrollees or graduates may be limited and a minimum award of \$1000 will be granted.

Please ensure that all data reported on AENT Tables 1-8, specifically AENT Tables 1-4 are accurate and verifiable – if your school is audited you must be able to document and support the data reported on the AENT Tables.

III. ELIGIBILITY INFORMATION

1. Eligible Applicants

Applicants must submit a **single application per campus** to support the eligible advanced education nursing programs among the departments, divisions, or administrative units in the college or university.

Eligible applicants are collegiate schools of nursing, academic health centers, and other private or public entities accredited by a national nurse education accrediting agency recognized by the Secretary of the U.S. Department of Education. For FY 2011, these agencies include the Commission on Collegiate Nursing Education (CCNE), the National League for Nursing Accrediting Commission (NLNAC), the Accreditation Commission on Midwifery Education of the American College of Nurse-Midwives, and the Council on Accreditation of Nurse Anesthesia Programs of the American Association of Nurse Anesthetists (AANA). All nursing programs and consortium partners, if applicable, associated with the project must be accredited for the purpose of nursing education. Applicants must submit documentation providing proof of accreditation (e.g., an accreditation letter from the accrediting agency or a copy of the certificate of accreditation) with the application.

Failure to provide proof of accreditation with the HRSA program application, as specified above, will render the application non-responsive, and the application will not be reviewed or considered for funding under this announcement.

Accreditation for Newly Established Graduate Program of Nursing: A new graduate program of nursing that, by reason of an insufficient period of operation, is not, at the time of the submission of an application for a grant or contract under this title, eligible for accreditation by such a recognized nursing accrediting agency, shall be deemed accredited for the purposes of this title if the Secretary of Education finds, after consultation with the appropriate recognized accrediting agency, that there is reasonable assurance that the program will be able to meet the appropriate accreditation standards and achieve accreditation by the beginning of the academic year following the graduation date of students of the first entering class in the program. Applicants requesting support for doctoral programs should include documentation of accreditation of their graduate programs, if applicable, and describe where they are in the process of obtaining accreditation for the practice doctorate program. Nurse Anesthetist program applicants must include accreditation from COA for both master's and doctoral level programs. Applicants that are requesting a "substantive change" to an existing accredited graduate nursing education program should include documentation of their communication with the appropriate

accrediting agency.

Applicants must provide documentation of all approvals (as defined in the Definitions section of this funding opportunity announcement) needed to enroll students into a new master's or doctoral program. The documentation **must be included in the application** when it is submitted in order to be considered for funding. This includes approval from the school, the college/university and the State Board of Nursing, as appropriate. The documentation should be, for example, in the form of meeting minutes, a letter from the State Board of Nursing, letter from the Faculty Senate or State Finance Board as appropriate for the school.

2. Cost Sharing/Matching

Cost sharing/matching is not required for the AENT Program.

Maintenance of Effort

Grant funds shall not be used to take the place of current funding for activities described in the application. The grantee must agree to maintain non-Federal funding for grant activities at a level which is not less than expenditures for such activities during the fiscal year prior to receiving the grant.

3. Other Eligibility Information

Guidelines for Advanced Nursing Education Programs

The *National Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education* (LACE), finalized in 2008, defines advanced practice registered nurses (APRNs) and standardized requirements for each of the four APRN regulatory components included in LACE. Under this regulatory model, now endorsed by 45 national nursing organizations, the certified nurse practitioner and clinical nurse specialist (CNS), two of the four defined APRN roles, must be prepared with the core APRN and role competencies in addition to national consensus-based competencies for one of six population foci: family/individual across the lifespan, adult-gerontology, pediatrics, neonatal, women's health/gender-related or psychiatric/mental health.

The target date for full implementation of the Consensus Model is 2015. Therefore, in order to meet this goal, changes in educational programs will need to occur by 2012-2013 to ensure that graduates are prepared to meet the certification and licensure criteria being implemented. Certification entities have indicated they will have the new or expanded exams to meet the Model requirements ready by 2012-2013.

Information about the consensus model can be found at several websites:

https://www.ncsbn.org/7_23_08_Consensus_APRN_Final.pdf OR
<http://www.nursingworld.org/consensusmodeltoolkit>

Recognized areas of advanced nursing practice that are not one of the four APRN roles, such as nursing administration and nursing education, are eligible for this funding opportunity. In

addition, recognized areas of advanced nursing practice for which certification is not or may not be currently available, such as public health nursing and informatics, are also eligible.

Proposed programs should meet all applicable Federal guidelines and/or other national organizational guidelines for licensure, accreditation, certification, specialty and role education, and use national organizational competencies as appropriate and available in the field of study. Programs should prepare graduates to be eligible for national certification in an area of advanced nursing practice. Applicants should indicate the guidelines and competencies used by the programs for which support is requested. Projects that enhance nurse practitioner and nurse-midwifery programs must meet the Federal guidelines as published in the Federal Register, February 23, 2005, Volume 70, Number 35, for the Final Nurse Practitioner and Nurse-Midwifery Education Program Guidelines. Applicants should also refer to documents available and applicable at national organization websites, for example but not limited to:

- 1) American Association of Colleges of Nursing (AACN) at <http://www.aacn.nche.edu>
- 2) Commission on Collegiate Nursing Education (CCNE) at <http://www.aacn.nche.edu/accreditation>
- 3) National League for Nursing (NLN) at <http://www.nln.org/facultydevelopment/pdf/corecompetencies.pdf>
- 4) National League for Nursing Accrediting Commission (NLNAC) at <http://www.nlnac.org>
- 5) National Organization of Nurse Practitioner Faculties (NONPF) at <http://www.nonpf.com>, for documents such as the *Criteria for Evaluation of Nurse Practitioner Programs, A Report of the National Task Force on Quality Nurse Practitioner Education*.
- 6) Division of Accreditation (DOA) of the American College of Nurse-Midwives (ACNM) <http://www.acnm.org>.
- 7) American Association of Nurse Anesthetists' (AANA) Council on Accreditation (COA) at <http://www.aana.com/Credentialing.aspx?id=513>
- 8) National Association of Clinical Nurse Specialists (NACNS) at <http://www.nacns.org>
- 9) American Organization of Nurse Executives (AONE) at <http://www.aone.org/>

IV. APPLICATION AND SUBMISSION INFORMATION

1. Address to Request Application Package

Application Materials and Required Electronic Submission Information

HRSA requires applicants for this funding opportunity announcement to apply electronically through Grants.gov. All applicants **must** submit in this manner unless they obtain a written exemption from this requirement in advance by the Director of HRSA's Division of Grants Policy. Applicants must request an exemption in writing from DGPWaivers@hrsa.gov, and provide details as to why they are technologically unable to submit electronically through the Grants.gov portal. Your email must include the HRSA announcement number for which you are seeking relief, the name, address, and telephone number of the organization and the name and telephone number of the Project Director as well as the Grants.gov Tracking Number (GRANTXXXX) assigned to your submission along with a copy of the "Rejected with Errors" notification you received from Grants.gov. **HRSA and its Grants Application Center (GAC)**

will only accept paper applications from applicants that received prior written approval. However, the application must still be submitted under the due date(s).

Refer to HRSA's *Electronic Submission User Guide*, available online at <http://www.hrsa.gov/grants/userguide.htm>, for detailed application and submission instructions. Pay particular attention to Sections 2 and 5 that provide detailed information on the competitive application and submission process.

Applicants must submit proposals according to the instructions in the Guide and in this funding opportunity announcement in conjunction with Application Form 424 Research and Related (SF-424 R&R) Form. The forms contain additional general information and instructions for applications, proposal narratives, and budgets. The forms and instructions may be obtained from the following site by:

- (1) Downloading from <http://www.grants.gov>, or
- (2) Contacting the HRSA Grants Application Center at:
ATTN: Advanced Education Nursing Traineeship HRSA-11-043
910 Clopper Road
Suite 155 South
Gaithersburg, MD 20878
Telephone: 877-477-2123
HRSAGAC@hrsa.gov

Specific instructions for preparing portions of the application that must accompany Application Form 424 Research and Related (SF-424 R&R) Form appear in the "Application Format" section below.

2. Content and Form of Application Submission

Application Form

Data for AENT Tables 1-8 and the AENT Special Consideration Assurance Statement must be entered electronically via the HRSA's EHBs. Incomplete or missing data on AENT Tables 1-8 may deem the application as non-compliant in which the applicant may not receive funding under this announcement.

Copies of AENT Tables 1-8 are included in the funding opportunity announcement for your reference. **Do not include these tables as part of the Grants.gov application submission** since you will be entering the data online in the HRSA EHBs (Phase 2).

IMPORTANT NOTE: HRSA will use a two-tier submission process for the AENT applications via Grants.gov and the HRSA's EHBs.

- **Phase 1 - Grants.gov** - Standard Form (SF-424 R&R Form), HHS Checklist Form HHS-5161-1, SF-424B, Project/Performance Site Location(s) Form, and the SF-LLL Disclosure of Lobbying Activities form, if applicable submitted via Grants.gov

with a due date of December 22, 2010.

- **Phase 2 - HRSA EHBs** – Biographical Sketch, Project Abstract, Program Narrative, AENT Attachments, AENT Program Forms and Information, AENT Program Specific Tables and the Special Consideration Assurance Statement submitted via HRSA's EHBs with a due date of January 21, 2010.

Only grant applicants who have successfully submitted a grant application through Grants.gov (Phase 1) by the due date may submit the Biographical Sketch, Project Abstract, Program Narrative, AENT Attachments, AENT Program Specific Tables and the Special Consideration Assurance Statement in HRSA's EHBs (Phase 2).






The total size of all uploaded files **may not exceed the equivalent of 35 pages when printed by HRSA, or a total file size of approximately 10MB.** This 35-page limit includes the project abstract, program narrative, attachments and tables. Standard OMB-approved forms (e.g., Application for Federal Assistance SF-424 R&R Form Cover Page and HHS Checklist Form HHS-5161-1) are NOT included in the page limit.

Applications that exceed the specified limits (35 pages when printed by HRSA, or approximately 10MB) will be deemed non-responsive. All non-responsive applications will not be considered under this funding announcement.

Application Format




Applications for funding must consist of the following documents in the following order:

SF-424 R&R Short Application Kit/AENT PROGRAM – Table of Contents for Grants.gov:

-  It is mandatory to follow the instructions provided in this section to ensure that your application can be printed efficiently and consistently for review.
-  Failure to follow the instructions may make your application non-responsive. Non-responsive applications will not be considered under this funding opportunity announcement.
-  For electronic submissions, applicants only have to number the electronic attachment pages sequentially, resetting the numbering for each attachment, i.e., start at page 1 for each attachment. Do not attempt to number standard OMB approved form pages.
-  For electronic submissions, no Table of Contents is required for the entire application. HRSA will construct an electronic table of contents in the order specified.
-  When providing any electronic attachment with several pages, add a Table of Contents page specific to the attachment. Such pages will not be counted towards the page limit.

Application Section	Form Type	Instruction	HRSA/Program Guidelines
Application for Federal Assistance (SF-424 R&R Form Cover Page)	Form	Pages 1 and 2 of the SF-424 R&R Face Page.	Not counted in the page limit.
Additional Congressional District	Attachment	Can be uploaded on page 3 of SF-424 - Box 16.	As applicable to HRSA; not counted in the page limit.
Application Checklist Form HHS-5161-1	Form	Pages 1 and 2 of the HHS checklist.	Not counted in the page limit.
SF-424B Assurances for Non-Construction Programs	Form	Assurances for the SF-424 R&R package	Not counted in the page limit.
Project/Performance Site Locations(s)	Form	Supports primary and 29 additional sites in structured form.	Not counted in the page limit.
Additional Performance Site Location(s)	Attachment	Can be uploaded in the Project/Performance Site Location(s) form. Single document with all additional site locations.	Not counted in the page limit.
Disclosure of Lobbying Activities (SF-LLL)	Form	Supports structured data for lobbying activities.	Not counted in the page limit.

All attachments are submitted through the HRSA EHBs.

-  To ensure that attachments are organized and printed in a consistent manner, follow the order provided below. Note that these instructions may vary across programs.
-  Additional supporting documents, if applicable, can be provided using the available rows. Do not use the rows assigned to a specific purpose in the program funding opportunity announcement.
-  Merge similar documents into a single document. Where several pages are expected in the attachment, ensure that you place a table of contents cover page specific to the attachment. The Table of Contents page will not be counted in the page limit.

Attachment Number	Attachment Description (Program Guidelines)
Attachment 1	Full-Time and Part-Time Status/Tuition, Fees and Stipends. Counted in the page limit.
Attachment 2	Accreditation Documentation (CCNE, NLNAC, COA, ACME) letter or certificate; letter from the United States Department of Education providing reasonable assurance of accreditation) and Approval Documentation. Counted in the page limit.
Attachment 3	Biographical Sketch - Required attachment. Counted in the page limit.
Attachment 4	Special Consideration Assurance Statement. Counted in the page limit.
Attachments 5-15	Other AENT Attachments not required elsewhere. Counted in the page limit.

Application Section (EHBs)	Form Type	Instruction	HRSA/Program Guidelines
AENT Program Tables	Form	<p>Table 1 - AENT: Master's and Post-Nursing Master's Certificate Data (Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master's Certificate Program)</p> <p>A. Student Enrollment Data (all students) B. Students Supported by Traineeship Data C. Graduate Data (all graduates) D. Graduates Supported by Traineeship Data</p>	<p>To be entered into the HRSA EHBs as Phase 2 of the application process.</p> <p>Counted in the page limit.</p>
	Form	<p>Table 2 - AENT: Nurse-Midwifery and Nurse Anesthesia Data (Nurse-Midwifery Certificate, Nurse-Midwifery Master's, Nurse-Midwifery Post-BSN to Doctoral, Nurse Anesthesia Master's, Nurse Anesthesia Post-BSN to Doctoral)</p> <p>Enrollment, Traineeship Support, Graduate and Graduate Support Data</p> <p>Table 3 - AENT: Doctoral Program Data (Post-BSN to PhD, Post-MSN to PhD, DNSc/DNS, Post-BSN to DNP/DrNP, Post-MSN to DNP/DrNP, Post-MSN to DNAP, Other)</p> <p>A. Doctoral Enrollment Data (all doctoral students enrolled) B. Doctoral Students Supported by Traineeship Data C. Doctoral Graduates (all doctoral graduates) Data D. Doctoral Graduates Supported By Traineeship Data</p> <p>Table 4 - AENT: Rural, Underserved, or Public Health Practice Settings Data</p> <p>A. Graduate Data B. Graduates Supported by Traineeship Data</p> <p>Table 5 – AENT: Ethnicity Data</p> <p>Table 6 – AENT: Race / Disadvantaged Data</p> <p>A. Hispanic / Latino Ethnicity by Race B. Non Hispanic / Latino Ethnicity by Race C. Unreported / Unavailable Ethnicity by Race</p>	<p>To be entered into HRSA EHBs as Phase 2 of the application process.</p> <p>Counted in the page limit.</p>

		<p>Table 7 – AENT: Age and Gender Data</p> <p>Table 8A - AENT: Projected Master’s Data A. Total # of Projected Master Degree and Post Nursing Master’s Certificate Student Enrollment and Master Degree and Post Nursing Master’s Certificate Students Projected to Receive Traineeship Support by Role by 10/15/2011 (Clinical Nurse Specialist, Nurse Administrator, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Anesthetist, Nurse Educator, Public Health Nurse, Nurse-Midwifery)</p> <p>Table 8B – AENT: Projected Doctoral Data B. Total # of Projected Doctoral Degree Student Enrollment and Doctoral Degree Students Projected to Receive Traineeship Support by Education Level by 10/15/2011 (Post-BSN to PhD, Post-MSN to PhD, DNSc/DNS, Post-BSN to DNP/DrNP, Post-MSN to DNP/DrNP, Post-BSN to DNAP, Post-MSN to DNAP, Other)</p> <p>.....</p>	
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Project Abstract	Attachment	Attach the Project Abstract in the Other Information – Other Project Information section in the HRSA EHBs	Required attachment. Counted in the page limit. Refer to Section IV for detailed instructions.
Program Narrative	Attachment	Attach the Project Narrative in the Other Information – Other Project Information section in the HRSA EHBs	Required attachment. Counted in the page limit. Refer to Section IV for detailed instructions.

Application Format

i. Application Face Page – Grants.gov

Complete Application SF-424 R&R Form provided with the application package. Prepare according to instructions provided in the form itself. For information pertaining to the Catalog of Federal Domestic Assistance (CFDA), **the CFDA Number is 93.358.**

DUNS Number

All applicant organizations are required to have a Data Universal Numbering System (DUNS) number in order to apply for a grant or cooperative agreement from the Federal Government. The DUNS number is a unique nine-character identification number provided by the commercial company, Dun and Bradstreet. There is no charge to obtain a DUNS number. Information about obtaining a DUNS number can be found at <http://fedgov.dnb.com/webform> or call 1-866-705-5711. Please include the DUNS number in item 5 on the application face page. Applications **will not** be reviewed without a DUNS number. Note: A missing or incorrect DUNS number is the number one reason for applications being “Rejected for Errors” by Grants.gov. Additionally, the applicant organization is required to register annually with the Federal Government’s Central Contractor Registry (CCR) in order to do electronic business with the Federal Government. It is extremely important to verify that your CCR registration is active. Information about registering with the CCR can be found at <http://www.ccr.gov>.

ii. Table of Contents

The application should be presented in the order of the Table of Contents provided earlier. Again, for electronic applications no Table of Contents is necessary, as it will be generated by the system. (Note: the Table of Contents will not be counted in the page limit.)

iii. Application Checklist – Grants.gov

Complete the HHS Application Checklist Form HHS 5161-1 provided with the application package.

iv. Budget – HRSA EHBs

The AENT Program is a formula-based grant program that does not require the submission of a formal budget. However, enter the dollar amount of the Total Estimated Project Funding in Item 16a based on how much support would be needed for your students. This estimate is for data analysis purposes only. Indirect Costs (Facilities and Administrative - F&A Costs) are not applicable to the AENT Program.

v. Budget Justification

The AENT Program is a formula-based grant program that does not require submission of a formal budget. A Budget Justification is not needed.

vi. Staffing Plan and Personnel Requirements – HRSA EHBs

Applicants must provide a Biographical Sketch for the Project Director who will be assigned to the project. This should be included as Attachment 3 in the HRSA EHBs.

vii. Assurances – Grants.gov

Complete Application Form SF-424B Assurances – Non-Construction Programs provided with the application package.

viii. Certifications – Grants.gov

Use the Certifications and Disclosure of Lobbying Activities Application Form provided with the application package. Any organization that is indebted to the United States, and has a judgment lien filed against it for a debt to the United States, is ineligible to receive a Federal grant. By signing the SF-424 R&R, the applicant is certifying that they are not delinquent on Federal debt in accordance with OMB Circular A-129. (Examples of relevant debt include delinquent payroll or other taxes, audit disallowances, guaranteed and direct student loans, benefits that were overpaid, etc.). If an applicant is delinquent on Federal debt, they should attach an explanation that includes proof that satisfactory arrangements have been made with the Agency to which the debt is owed. This explanation should be uploaded as Attachment 5 in the HRSA EHBs.

ix. Project Abstract – HRSA EHBs

Provide a one page summary of the application. Because the abstract is often distributed to provide information to the public and Congress, please prepare this abstract so that it is clear, accurate, concise, and without reference to other parts of the application. It must include the following:

- A four or five sentence project summary;
- Specific, measurable objectives which the project will accomplish;
- How the proposed project for which funding is requested will be accomplished, *i.e.*, the “who, what, when, where, why and how” of a project.

The Project Abstract must be single-spaced and limited to one page in length.

Attach the Project Abstract in the Other Information – Other Project Information section in the HRSA EHBs.

Please place the following information at the top of the project abstract:

- Project Director Name and Credentials
- Project Title
- Applicant Name
- Address
- Project Director Contact Phone and Fax Numbers
- Project Director E-Mail Address
- Web Site Address, if applicable

x. Program Narrative – HRSA EHBs

This section provides a comprehensive framework and description of all aspects of the proposed program. It should be **succinct**, self-explanatory and well organized.

Attach the Program Narrative in the Other Information – Other Project Information section in the HRSA EHBs.

Use the following section headers for the Narrative:

- **INTRODUCTION**

This section should briefly describe the purpose of the proposed project. Include a brief description of all graduate level offerings in advanced education nursing programs, including the Master's in nursing program, combined RN to Master's program, post-nursing Master's certificate program, nurse-midwifery certificate program, and the doctoral program. **Include the accreditation information and complete expiration date (i.e. 02/31/2012 or March 20, 2017 for Spring 2017).**

Summarize the relationship of this project to *Healthy People 2020 Objectives for the Nation*. *Healthy People 2020* is a national initiative led by the Department of Health and Human Services that sets priorities for all HRSA programs. The initiative has two major goals: (1) to increase the quality and years of a healthy life; and (2) eliminate our country's health disparities. More information regarding *Healthy People 2020* is located in the Public Policy Issuance section of this application guidance.

- **NEEDS ASSESSMENT**

Briefly describe the institution's need for traineeship support and the benefit that the traineeship program has on the institution and for the students. Briefly describe the educational level (Masters, Doctoral), programs (i.e., PhD, DNSc/DNS, DNP, Post-Master's Nursing Certificate) and number of students expected to receive traineeship support under the AENT program for this current fiscal year. Provide information on the advanced nursing education program offerings for student enrollees, trainees supported, graduates, and projected enrollees, as appropriate for their program(s)/track(s). **This information must be consistent with the data provided in AENT Tables 1-8.** Project the total number of students to be enrolled in the program during the following academic year by program.

Schools must also provide information on how full-time and part-time enrollment status is defined by the institution. Schools must also provide the total costs of tuition, fees, and stipend support that will be required to support students for the budget period (see Attachment 1).

- **ACCOMPLISHMENT SUMMARY (if required)**

Responses to questions in this section will be used to analyze and support the importance of the AENT Program for budget justifications and health care reform discussions.

All currently funded grantees, and applicants that have received funding in the last four years, must include a brief (3 pages maximum) accomplishment summary if the application is for the same program area and discipline as currently or previously funded. For applicants that received AENT Funding in Fiscal year 2010, briefly describe the impact that the AENT Program has on your students and programs. A well-presented accomplishment summary provides a description of the degree to which the applicant met previous project objectives. It should present the quantitative and qualitative measures used to evaluate the project in the context of each funded objective and the results obtained for each, including the number of trainees. It should address how performance and evaluation information was used to develop the project for which funding is being requested. It should include a list of articles published in peer-reviewed journals presenting the outcomes of activities supported by grant funds.

In addition, please respond to the following questions (Note: Under the Nurse Anesthetist discipline, only full-time, first-year nurse anesthesia students may be supported under the AENT program.):

- What is the dollar amount awarded per student? What is the amount per Stipend? What is the amount per Tuition? Is the student Full-Time or Part-Time?
- What are the criteria used by your institution for selecting recipients and determining the amount of the award per student?
- How many additional students could you fund if you received more traineeship funding?
- Has the increase in the Stipend Level from \$8,800 to \$21,180 impacted the AENT award for the institution's students?
- How would your institution use additional traineeship funds such as increase the award to current students, increasing the number of students who would be awarded funds or providing full educational costs and tuition to a few students?
- What other sources of funding supplement the AENT funds? What is the unmet need in terms of traineeship funding for students?
- How does your institution track where students are working after graduations? (Referencing AENT Table 4A and 4B)
- AENT Funding By Role and AENT Funding By Degree

Provide in a table format (see example below) how much AENT funding was allocated for each of your programs by role (AENT Tables 1B, 1D and 2B and 2D) and also by degree (AENT Table 3) from 07/1/2010 – 06/30/2011.

AENT Funding By Role

Role (example varies from Program to Program)	Amount Allocated	Number of Full-Time Students Supported by Traineeship	Number of Part-Time Students Supported by Traineeship
Clinical Nurse Specialist			
Acute Care Nurse Practitioner			
Primary Care Nurse Practitioner			
Nurse Educator			

AENT Funding By Degree

Degree (example varies from Program to Program)	Amount Allocated	Number of Full-Time Students Supported by Traineeship	Number of Part-Time Students Supported by Traineeship
Post-BSN to PhD			
Post MSN to PhD			
DNSC / DNS			
Post-BSN to DNP / DrNP			

- EVALUATION PLAN**

Program evaluation will demonstrate if the program is functioning according to program purpose and objectives. Applicants must present an evaluation plan that addresses the following elements:

- A. Evaluation technical capacity: current evaluation experience, skills, and knowledge of individual(s) responsible for conducting and reporting evaluation efforts;
- B. Logic Model: relationship among resources, activities, outputs, target population, short- and long-term outcomes;
- C. Performance Measures: how the required BHP performance measures for this program will be collected;
- D. Evaluation Methods: evaluation questions; instruments/tools used; primary/secondary data sources, milestones, timeline, etc.
- E. Quality assurance plan: process to validate data collection and results
- F. Evaluation Report: written description of evaluation activities, results, challenges, and recommendations.

- ORGANIZATIONAL INFORMATION**

Provide information on the School of Nursing or sponsoring institution's current mission and structure, scope of current activities, and describe how these all contribute to the ability of the organization to conduct the program requirements and meet program expectations.

Please provide the accreditation information, the accrediting agency and the complete expiration date (i.e. 02/31/2012 or March 20, 2017 for Spring 2017).

xi. Attachments and AENT Program Specific Forms – HRSA EHBs

The following forms, information, tables and instructions (see Appendix A) are specific for the AENT Program. All attachments count against the 35-page limit.

- AENT Program Information/Attachments (HRSA EHBs - Phase 2)

Attachment 1: AENT Full-Time and Part-Time Status/Tuition, Fees and Stipends

Attachment 2: Accreditation Documentation of the Program (CCNE, NLNAC, COA, ACME letter or certificate; letter from the United States Department of Education providing reasonable assurance of accreditation) and Approval Documentation

Accreditation for Newly Established Graduate Program of Nursing:

A new graduate program of nursing that, by reason of an insufficient period of operation, is not, at the time of the submission of an application for a grant or contract under this title, eligible for accreditation by such a recognized nursing accrediting agency, shall be deemed accredited for the purposes of this title if the Secretary of Education finds, after consultation with the appropriate recognized accrediting agency, that there is reasonable assurance that the program will be able to meet the appropriate accreditation standards and achieve accreditation by the beginning of the academic year following the graduation date of students of the first entering class in the program. Applicants requesting support for doctoral programs should include documentation of accreditation of their graduate programs, if applicable, and describe where they are in the process of obtaining accreditation for the practice doctorate program. Nurse Anesthetist program applicants must include accreditation from COA for both master's and doctoral level programs. Applicants that are requesting a "substantive change" to an existing accredited graduate nursing education program should include documentation of their communication with the appropriate accrediting agency.

The following process must be followed for new graduate program applicants just beginning the accreditation process who wish to establish eligibility based on the provisions above:

- The applicant must contact a national nursing accrediting agency recognized by the Secretary of the Department of Education to obtain the information requested in the questions below. These agencies are listed above. The applicant should mail the request of reasonable

assurance to the Department of Education point of contact. The Department of Education will reply to the letter and will note if the new program succeeded in provided reasonable assurance that accreditation standards will be met and the program will receive accreditation by the beginning of the academic year following the graduation date of students of the first entering class in the program. The letter from the recognized accrediting body must answer/report the following questions/information related to the new program:

- 1) Is this program actively pursuing accreditation with your agency?
 - 2) Provide the dates on which the on-site evaluation is scheduled for the program and the dates on which the agency is expected to make an accreditation decision about the program.
 - 3) Are any other nursing education programs at this institution currently accredited by your agency, and are those programs in good standing with your agency?
 - 4) At this point in the application process, what stages of the accreditation process has this program completed, and what stages remain to be completed? Please summarize the kinds of materials already submitted in support of the program's application and reviewed by your agency, as well as any on-site evaluations that have occurred.
 - 5) Based on your records, does the program have the ability to meet the accreditation standards and achieve accreditation by the beginning of the academic year following the graduation date of students of the first entering class in the program.
 - 6) Based on your agency's review of the program to date, do you have any reason to believe that the program will be unable to demonstrate compliance with your standards and requirements and gain accreditation by the beginning of the academic year following the graduation date of students of the first entering class in the program? If so, why?
- The applicant will submit the request for a letter of assurance, along with attached copies of the letter from the recognized body and any supporting documentation regarding the accreditation or approval of the nursing program, to:

U. S. Department of Education

Office of Postsecondary Education

Department of Education Organizational Structure and Offices

[Accreditation and State Liaison \(ASL\)](#)

1990 K Street NW, Room 7008

Washington, District of Columbia 20006-8509

Telephone: (202) 219-7011 or (202) 219-7018

Fax: (202) 219-7005

Attn: Dr. Nancy C. Regan

Or by email to: Nancy.Regan@ed.gov

- To allow for processing time, at least 45 days prior to the HRSA application due date of December 20, 2010, applicants should submit to the Department of Education the above information, with their request for a letter documenting the Secretary's determination that there is "reasonable assurance" the new graduate program will meet the appropriate accreditation standards and achieve accreditation prior to the beginning of the academic year following the graduation date of students of the first entering class in the program? The program will need to include a contact name(s), address(es), phone number(s), and email addresses with all correspondence sent to the Department of Education.
- The Department of Education staff will review the documents submitted by the applicant, make a "reasonable assurance" determination, and send the applicant a letter documenting the Secretary's determination.
- The applicant must include this letter from the Department of Education with the HRSA program application. Failure to provide the Department of Education's letter with the HRSA program application will render the application non-responsive, and the application will not be sent forward for review or be considered for funding under this announcement.

Attachment 3: Biographical Sketch

Attachment 4: Special Consideration Assurance Statement

Table 1 - AENT: Master's and Post-Nursing Master's Certificate Data (Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master's Certificate Program)

- A. Student Enrollment Data (all students)
- B. Students Supported by Traineeship Data
- C. Graduate Data (all graduates)
- D. Graduates Supported by Traineeship Data

Table 2 - AENT: Nurse-Midwifery and Nurse Anesthesia Data (Nurse-Midwifery Certificate, Nurse-Midwifery Master's, Nurse-Midwifery Post-BSN to Doctoral, Nurse Anesthesia Master's, Nurse Anesthesia Post-BSN to Doctoral) (First Year Only)

Enrollment, Traineeship Support, Graduate and Graduate Support Data

Table 3 - AENT: Doctoral Program Data (Post-BSN to PhD, Post-MSN to PhD, DNSc/DNS, Post-BSN to DNP/DrNP, Post-MSN to DNP/DrNP, Post-MSN to DNAP, Other)

- A. Doctoral Enrollment Data (all doctoral students enrolled)
- B. Doctoral Students Supported by Traineeship Data
- C. Doctoral Graduates (all doctoral graduates) Data
- D. Doctoral Graduates Supported By Traineeship Data

Table 4 - AENT: Rural, Underserved, or Public Health Practice Settings Data

- A. Graduate Data
- B. Graduates Supported by Traineeship Data

Table 5 – AENT: Ethnicity Data

Table 6 – AENT: Race / Disadvantaged Data

- A. Hispanic / Latino Ethnicity by Race
- B. Non Hispanic / Latino Ethnicity by Race
- C. Unreported / Unavailable Ethnicity by Race

Table 7 – AENT: Age and Gender Data

Table 8A - AENT: Projected Master's Data

- A. Total # of Projected Master Degree and Post Nursing Master's Certificate Student Enrollment and Master Degree and Post Nursing Master's Certificate Students Projected to Receive Traineeship Support by Role by 10/15/2011**

(Clinical Nurse Specialist, Nurse Administrator, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Anesthetist, Nurse Educator, Public Health Nurse, Nurse-Midwifery)

Table 8B – AENT: Projected Doctoral Data

- B. Total # of Projected Doctoral Degree Student Enrollment and Doctoral Degree Students Projected to Receive Traineeship Support by Education Level by 10/15/2011**

(Post-BSN to PhD, Post-MSN to PhD, DNSc/DNS, Post-BSN to DNP/DrNP, Post-MSN to DNP/DrNP, Post-BSN to DNAP, Post-MSN to DNAP, Other)

AENT Special Consideration Assurance Statement (Electronic Version)

3. Submission s and Times

Application Due Date

The due date in Grants.gov (Phase 1) for applications under this funding opportunity

announcement is December 22, 2010 at 8:00P.M. E.T. The due date to complete all other required information in HRSA's EHBs (Phase 2) is January 21, 2010 at 5:00pm E.T.

Applications will be considered as formally submitted when the application has been successfully transmitted electronically by your organization's Authorized Organization Representative (AOR) through Grants.Gov and the HRSA EHBs and has been validated by Grants.gov and the HRSA EHBs on or before the due date(s) and submission time(s).

Notifications from HRSA EHBs are expected to go out within 7 business days from the date of submission. If you do not receive notification that your application has been successfully received, please contact the HRSA Call Center at 877-GO4-HRSA (877-464-4772) between 9:00 am to 5:30 p.m. ET or email callcenter@hrsa.gov. Please have your Grants.gov tracking number available.

The Chief Grants Management Officer (CGMO) or designee may authorize an extension of published due dates when justified by circumstances such as natural disasters (e.g., floods or hurricanes), or other disruptions of services, such as a prolonged blackout. The CGMO or designee will determine the affected geographical area(s).

Late applications:

Applications which do not meet the criteria above are considered late applications and will not be considered in the current competition.

4. Intergovernmental Review

The AENT Program is not subject to the provisions of Executive Order 12372 as implemented by 45 CFR 100.

5. Funding Restrictions

The AENT Program supports Nurse Anesthesia students in their first 12 months of study (take core nursing courses).

Nurse Anesthetist students beyond the first 12 months of study must be supported under the Nurse Anesthetist Traineeship (NAT) Program.

Indirect (F&A) Costs are not applicable to the AENT and NAT Programs.

Because of the formula, awards to new schools/programs with few or no enrollees or graduates may be limited and a minimum award of \$1000 will be granted

6. Other Submission Requirements

As stated in Section IV.1, except in rare cases HRSA will no longer accept applications in paper form. Applicants submitting for this funding opportunity are **required** to submit **electronically** through Grants.gov and the HRSA EHBS. To submit an application electronically, please use the <http://www.Grants.gov> apply site. When using Grants.gov you will be able to download a copy of the application package, complete it off-line, and then upload and submit the application

via the Grants.gov site.

It is essential that your organization ***immediately register*** in Grants.gov and become familiar with the Grants.gov site application process. If you do not complete the registration process, you will be unable to submit an application. The registration process can take up to one month.

To be able to register successfully register in Grants.gov; it is necessary that you complete all of the following required actions:

- Obtain an organizational Data Universal Number System (DUNS) number
- Register the organization with Central Contractor Registry (CCR)
- Identify the organization's E-Business Point of Contact (E-Biz POC)
- Confirm the organization's CCR "Marketing Partner ID Number (M-PIN)" password
- Register an Authorized Organization Representative (AOR)
- Obtain a username and password from the Grants.gov Credential Provider

Instructions on how to register, tutorials and FAQs are available on the Grants.gov web site at <http://www.grants.gov>. Assistance is also available 24 hours a day, 7 days a week (excluding Federal holidays) from the Grants.gov help desk at support@grants.gov or by phone at 1-800-518-4726.

Formal submission of the electronic application: Applications completed online are considered formally submitted when the application has been successfully transmitted electronically by your organization's AOR through Grants.gov and has been validated by Grants.gov on or before the due dates and times, and the supplemental information successfully transmitted by your organization's AOR through the EHBs prior to the subsequent due date and time.

It is incumbent on applicants to ensure that the AOR is available to submit the application to HRSA by the published due dates. HRSA will not accept submission or re-submission of incomplete, rejected, or otherwise delayed applications after the due dates. Therefore, you are urged to submit your application in advance of the due dates. If your application is rejected by Grants.gov and/or HRSA EHBs due to errors, you must correct the application and resubmit it to Grants.gov and/or HRSA EHBs before the due dates and times.

If, for any reason, an application is submitted more than once prior to the application due date(s), HRSA will only accept the applicant's last electronic submission prior to the application due date as the final and only acceptable submission of any competing application submitted to Grants.gov and/or HRSA EHBs.

Tracking your application: It is incumbent on the applicant to track application status by using the Grants.gov tracking number (GRANTXXXXXXXX) provided in the confirmation email from Grants.gov. More information about tracking your application can be found at <http://www07.grants.gov/applicants/resources.jsp>.

V. Application Review Information

1. Review Criteria

This is a formula-based grant program. The Division of Nursing is responsible for the review of each AENT application for eligibility including accreditation status, program approval, qualifications of the Project Director, completeness, accuracy (including the data reported on AENT Tables 1-8), and compliance with the requirements outlined in this funding opportunity announcement.

2. Review and Selection Process

The funds appropriated for the AENT Program are distributed among eligible institutions based on a formula. Applicants are requested to provide program data on student enrollment, traineeship support and graduates. **Program data reported on AENT Tables 1-4 are used to determine funding.** All tables must be submitted electronically in the HRSA EHBs (Phase 2) by the due date. **Applications received without the appropriate tables, with incomplete data or without data reported on the tables will be deemed non-responsive to the Program Guidance and the application will not be considered for funding.**

FUNDING FACTORS

Under the AENT Program, funding factors are a “**statutory funding preference**” and “**special consideration**” (see below).

Funding factors may be applied in determining the funding of approved applications. A funding factor is defined as a favorable adjustment of the formula that determines the amount of the grant award. Applicants that qualify for one or both of the funding factors may receive an increase to their grant award amount.

Statutory Funding Preference

A funding preference is defined as the funding of a specific category or group of approved applications ahead of other categories or groups of applications. The authorizing legislation provides a funding preference for some applicants. Applicants receiving the preference will be placed in a more competitive position among applications that can be funded. Applications that do not receive a Funding Preference will be given full and equitable consideration during the review process.

For purposes of the statutory funding preference, projects that “substantially benefit rural or underserved populations or help meet public health nursing needs in State or local health departments” are ones that will result in a “high rate” of graduates excepting positions in practice settings that will substantially benefit rural or underserved populations, or help meet public health nursing needs in State or local health departments.”

“High rate” is defined as a minimum of 45 percent of graduates in academic year 7/01/2009-6/30/2010 who spent at least 50 percent of their work-time in clinical practice sites substantially benefiting rural or underserved populations, or in State or local health

departments.

For the purpose of this **Statutory Funding Preference**, data collected on practice setting locations of graduates reported in *Table 4A: Graduate Data - Rural, Underserved, or Public Health (7/01/2009 - 6/30/2010)* will be used to determine if the applicant has met the criteria for the preference. Credit for the Statutory Funding Preference will be automatically computed.

Special Consideration

A special consideration is defined as the enhancement of priority scores by peer reviewers based on the extent to which the application addresses areas of concern in a discretionary program

Section 811(f)(3) of the PHS Act, as amended, provides for a special consideration to eligible entities that agree to expend the award to train advanced education nurses who will practice in Health Professional Shortage Areas (HPSAs) designated under Section 332 of the PHS Act.

Special consideration will be given to those applicants who provide a statement that a **minimum of ten (10) percent** of the students have signed commitments to practice in HPSAs after graduation, contingent to receiving some type of student assistance. Students who have signed such agreements are subject to the terms and conditions as identified by the student assistance programs in the school. Signed commitments must be retained by the school of nursing for three years.

Applicants requesting Special Consideration must assure compliance by submitting a “Special Consideration Assurance Statement” (electronic version) in the HRSA EHBs.

3. Anticipated Announcement and Award Dates

The anticipated announcement award date is July 1, 2011.

VI. Award Administration Information

1. Award Notices

The Notice of Award sets forth the amount of funds granted, the terms and conditions of the grant, the effective date of the grant, the budget period for which initial support will be given, and the total project period for which support is contemplated. Signed by the Grants Management Officer, it is sent to the applicant agency’s Authorized Organization Representative and reflects the only authorizing document. The award start date is July 1, 2011.

2. Administrative and National Policy Requirements

Successful applicants must comply with the administrative requirements outlined in 45 CFR Part 74 [Uniform Administrative Requirements for Awards and Subawards to Institutions of Higher Education, Hospitals, Other Nonprofit Organizations, and Commercial Organizations](#) or 45 CFR Part 92 [Uniform Administrative Requirements For Grants And Cooperative Agreements to State,](#)

[Local, and Tribal Governments](#), as appropriate.

HRSA grant awards are subject to the requirements of the HHS Grants Policy Statement (HHS GPS) that are applicable to the grant based on recipient type and purpose of award. This includes, as applicable, any requirements in Parts I and II of the HHS GPS that apply to the award. The HHS GPS is available at <http://www.hrsa.gov/grants/>. The general terms and conditions in the HHS GPS will apply as indicated unless there are statutory, regulatory, or award-specific requirements to the contrary (as specified in the Notice of Award).

Cultural and Linguistic Competence

HRSA is committed to ensuring access to quality health care for all. Quality care means access to services, information, materials delivered by competent providers in a manner that factors in the language needs, cultural richness, and diversity of populations served. Quality also means that, where appropriate, data collection instruments used should adhere to culturally competent and linguistically appropriate norms. For additional information and guidance, refer to the National Standards for Culturally and Linguistically Appropriate Services in Health Care published by HHS. This document is available online at <http://www.omhrc.gov/CLAS>.

Trafficking in Persons

Awards issued under this funding opportunity announcement are subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to <http://www.hrsa.gov/grants/trafficking.htm>. If you are unable to access this link, please contact the Grants Management Specialist identified in this guidance to obtain a copy of the Term.

PUBLIC POLICY ISSUANCE -

Healthy People 2020 is a national initiative led by HHS that sets priorities for all HRSA programs. The initiative has two major goals: (1) to increase the quality and years of a healthy life; and (2) eliminate our country's health disparities. The program consists of 28 focus areas and 467 objectives. HRSA has actively participated in the work groups of all the focus areas, and is committed to the achievement of the Healthy People 2020 goals. Healthy People 2020 and the conceptual framework for the forthcoming Healthy People 2020 process can be found online at <http://www.healthypeople.gov/>.

Smoke-Free Workplace

The Public Health Service strongly encourages all award recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products. Further, Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of a facility) in which regular or routine education, library, day care, health care or early childhood development services are provided to children.

3. Reporting

The successful applicant under this funding opportunity announcement must comply with the following reporting and review activities:

a. **Audit Requirements**

Comply with audit requirements of Office of Management and Budget (OMB) Circular A-133. Information on the scope, frequency, and other aspects of the audits can be found on the Internet at <http://www.whitehouse.gov/omb/circulars>;

b. **Payment Management Requirements**

Submit a quarterly electronic Federal Financial Report (FFR) Cash Transaction Report via the Payment Management System. The report identifies cash expenditures against the authorized funds for the grant or cooperative agreement. The FFR Cash Transaction Reports must be filed within 30 days of the end of each calendar quarter. Failure to submit the report may result in the inability to access award funds. Go to <http://www.dpm.psc.gov> for additional information.

c. **Status Reports**

1) **Federal Financial Report.**

The Federal Financial Report (SF-425) is required within 90 days of the end of the budget period. The report is an accounting of expenditures under the project that year. Financial reports must be submitted electronically through EHB. More specific information will be included in the Notice of Award.

2) **Progress and Final Reports**

Grantees in this program are not required to submit traditional progress and final reports. For grantees who submit applications for funding in the following year, the application itself serves as the progress/final report for the preceding grant. For grantees who do not submit applications, HRSA requires that they submit a brief final report that includes the information that would have been included in the accomplishments summary of the application as well as the data in Tables 1 through 7 within 90 days of the end of the grant. Grantees are also required to submit to BHP a copy of their final evaluation report.

VII. AGENCY CONTACTS

Applicants may obtain additional information regarding business, administrative, or fiscal issues related to this funding opportunity announcement by contacting:

Pamela Bell

Grants Management Specialist
ATTN: AENT (A10)
Office of Financial Assistance Management
Division of Grants Management Operations
Parklawn Building, Room 11A-02
5600 Fishers Lane Room
Rockville, MD 20857
Telephone: 301-443-3504

Fax: 301-443-6343
Email: PBell@HRSA.gov

Additional information related to the overall program issues and technical assistance regarding this funding announcement may be obtained by contacting:

Karen Delia Breeden, MPA
Program Analyst, Division of Nursing
AENT: A10
Bureau of Health Professions, HRSA
5600 Fishers Lane Room 9 B-45
Rockville, MD 20857
Telephone: 301-443-5787
Fax: 301-443-0791
Email: KBreeden@HRSA.gov

Applicants may need assistance when working online to submit their application forms electronically. For assistance with submitting the application in Grants.gov, contact Grants.gov 24 hours a day, 7 days a week, excluding Federal holidays at:

Grants.gov Contact Center
Phone: 1-800-518-4726
E-mail: support@grants.gov

Applicants may need assistance when working online to submit the remainder of their information electronically through HRSA's Electronic Handbooks (EHBs). For assistance with submitting the remaining information in HRSA's EHBs, contact the HRSA Call Center, Monday-Friday, 9:00 a.m. to 5:30 p.m. ET:

HRSA Call Center
Phone: (877) 464-4772
TTY: (877) 897-9910
Fax: (301) 998-7377
E-mail: CallCenter@HRSA.GOV

VIII. OTHER INFORMATION - PROGRAM DEFINITIONS

“Academic Health Center” means an institution that includes a school of medicine, a teaching hospital, and at least one additional health education school (e.g. nursing) and which is owned and/or affiliated with clinical agencies providing for the delivery of patient services. Each entity generally maintains a separate identity and autonomy. While the organization and structure may vary, it must include an accredited school of nursing.

“Accredited” means a program accredited by a recognized body or bodies, or by a State agency, approved for such purpose by the Secretary of Education and when applied to a hospital, school, college, or university (or a unit thereof) means a hospital, school, college, or university (or a unit

thereof) which is accredited by a recognized body or bodies, or by a State agency, approved for such purpose by the Secretary of Education. The Secretary of Education publishes a list of recognized accrediting bodies, and of State agencies, which the Secretary of Education determines to be a reliable authority as to the quality of education offered at <http://www.ed.gov/offices/OPE/accreditation/natl agencies.html>.

A new program of nursing that, by reason of an insufficient period of operation, is not, at the time of the submission of an application for a grant or contract under this title, eligible for accreditation by such a recognized body or bodies or State agency, shall be deemed accredited for purposes of this title if the Secretary of Education finds, after consultation with the appropriate accreditation body or bodies, that there is reasonable assurance that the program will meet the accreditation standards of such body or bodies prior to the beginning of the academic year following the normal graduation date of students of the first entering class in such a program. (See Section 801(6)(B) of the PHS Act.)

Applicants to Division of Nursing programs that are just beginning the accreditation process who want to establish eligibility based on the provisions above should refer to Section III of this Guidance for information on securing the required determination from the Secretary of Education. An official letter from the United States Department of Education providing “reasonable assurance” of accreditation must be submitted with the grant application.

There are two forms of accreditation: (1) professional or specialized accreditation and (2) institutional accreditation. Professional or specialized accreditation is focused on programs of study in professional or occupational fields. Institutional accreditation is focused on the quality and integrity of the total institution, assessing the achievement of the institution in meeting its own stated mission, goals, and expected outcomes. Professional accrediting agencies assess the extent to which programs achieve their stated mission, goals, and expected outcomes. Professional accrediting agencies also consider the program’s mission, goals, and expected outcomes in determining the quality of the program and the educational preparation of members of the profession or occupation.

“Acute Care Nurse Practitioner” provides advanced nursing care across the continuum of health care services to meet the specialized physiologic and psychological needs of patients with complex acute, critical, and chronic health conditions. This care is continuous and comprehensive. The population in acute care practice includes acutely and critically ill patients experiencing episodic illness, exacerbation of chronic illness, or terminal illness. Based on educational preparation, ACNPs practice with a focus on a variety of specialty based populations including neonatal, pediatric, and adult. The ACNP practices in any setting in which patient care requirements include complex monitoring and therapies, high-intensity nursing intervention, or continuous nursing vigilance within the range of high-acuity care. While most ACNPs practice in acute care and hospital based settings including sub-acute care, emergency care, and intensive care settings, the continuum of acute care services spans the geographic settings of home, ambulatory care, urgent care, and rehabilitative care.

"Advanced Education Nursing Program" means a program of study in a collegiate school of nursing or other eligible entity which leads to a master's and/or doctoral degree and which

prepares individuals trained in advanced degree program to serve as nurse practitioners, clinical nurse specialists, nurse-midwives, nurse anesthetists, nurse educators, nurse administrators, public health nurses or other nurse specialists determined by the Secretary to require advanced nurse education. Advanced degree programs include master's and doctoral degree programs, combined RN/master's degree programs, post-nursing master's certificate programs, or in the case of certificate nurse-midwifery programs, those in existence on November 12, 1998.

“Advanced Education Nurse Trainee” means a student enrolled in a graduate program receiving traineeship support from an Advanced Education Nursing Traineeship grant.

“Approvals” means that a specific body, committee, Board, or Commission at the faculty, department, school, university, or state levels has formally voted in agreement for the initiation of or a substantive change in the program. This must be documented by evidence such as copies of meeting minutes, letter from the Faculty Senate, letter from the Board of Regents, letter from the State Finance Board, letter from State Board of Nursing. Each university/college has a unique process for gaining approval to start new programs, especially new master's and doctoral programs. Examples of steps in the approval process are the following: nursing faculty curriculum committee, Faculty Senate, Board of Regents of the University, State Finance Board for Higher Education, State Board of Nursing. Applicants must list the entities whose agreement is necessary to initiate the program and enroll students in the program of study.

“Authorized Official / Authorized Organizational Representative” means the individual authorized by the applicant organization to act for the applicant and to assume the obligations imposed by the Federal laws, regulations, requirements, and conditions that apply to grant applications or grant awards. Responsibilities include: submitting the grant on behalf of the company, organization, institution, or Government and signing grant applications and the required certifications and/or assurances necessary to fulfill the requirements of the application process.

“Certification” means a process by which an agency or organization validates, based upon predetermined standards, an individual nurse's qualifications and knowledge for practice in a defined functional or clinical area of nursing.

“Clinical Nurse Specialist” means a nurse prepared in specific area of advanced clinical nursing theory and practice addressed through formal instruction to prepare advanced education nurses. Clinical nursing specialist programs prepare the nurse to provide direct patient/client nursing care to individuals or to population groups. **A nurse completing a course of study in a clinical nurse specialist program is expected to be eligible for a national certification by examination or other process such as portfolio following graduation or required experience.**

“Collegiate School of Nursing” means a department, division, or other administrative unit in a college or university which provides primarily or exclusively a program of education in professional nursing and related subjects leading to the degree of bachelor of arts, bachelor of science, bachelor of nursing, or to an equivalent degree, or to a graduate degree in nursing, and including advanced training related to such program of education provided by such school, but

only if such program, or such unit, college or university is accredited as defined in section 801(3) of the PHS Act.

“Combined RN/Master’s Degree Program,” means a program of instruction when completed results in a Master’s degree in nursing and licensure as a RN at or prior to the time of graduation.

“Direct Costs” means costs that can be specifically identified with a particular project or activity. Direct costs include, but are not limited to, salaries, travel, equipment, and supplies directly benefiting the project or activity.

“Doctoral Program in Nursing” means a program of instruction beyond the baccalaureate and master’s degrees in nursing leading to a doctoral degree. (e.g. PhD, DNS, DSN, DNSc, DNP). Doctoral programs in nursing fall into two principal types: research focus and practice focus.

“Economically Disadvantaged” means an individual who comes from a family with an annual income below a level based on low-income thresholds according to family size published by the U.S. Bureau of Census, adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary for use in all health professions programs. The Secretary will annually publish these income levels in the Federal Register. The Secretary defines a “low income family” for programs included in Titles III, VII and VIII of the PHS Act as having an annual income that does not exceed 200 percent of the Department’s poverty guidelines. A family is a group of two or more individuals related by birth, marriage, or adoption who live together or an individual who is not living with any relatives.

**2010 Low Income Levels
for the 48 Contiguous States and the District of Columbia**
<http://aspe.hhs.gov/poverty/10poverty.shtml>
to determine levels for Alaska and Hawaii)

Persons in family *	Income level **
1.....	\$21,660
2.....	29,140
3.....	36,620
4.....	44,100
5.....	51,580
6.....	59,060
7.....	66,540
8.....	74,020

For families with more than 8 persons, add \$7,480 for each additional person.

* Includes only dependents listed on Federal income tax forms.

** Adjusted gross income for calendar year 2008.

“Educationally Disadvantaged” means an individual who comes from an environment that has

hindered the individual in obtaining the knowledge, skills and abilities required to enroll in and graduate from a health professions school. The following are provided as examples of “Educationally Disadvantaged” for guidance only and are not intended to be all-inclusive. Applicants should seek guidance from their educational institution as to how “Educationally Disadvantaged” is defined by their institution.

Examples:

1. Person from a high school with low average SAT scores or below the average state test results.
2. Person from a school district where 50% or less of graduates go to college.
3. Person who has a diagnosed physical or mental impairment that substantially limits participation in educational experiences.
4. Person for who English is not their primary language and for whom language is still a barrier to their academic performance.
5. Person who is first generation to attend college and who is from a rural or urban area or receiving public assistance.
6. Person from a high school where at least 30% of enrolled students are eligible for free or reduced price lunches.

“Full-Time Student” means a student who is enrolled on a full-time basis as defined by the institution.

“Graduate” means an individual who has successfully completed all institutional requirements necessary to be granted a degree/certificate.

“Graduate Education Program or Training” means a program administered by an institution of higher learning, leading to a master's or higher degree.

“Health Literacy” means the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.

“Indirect Costs (Facilities and Administrative - F&A Costs)” means costs incurred by an organization for common or joint objectives and cannot be identified specifically with a particular project or program. Facilities operation and maintenance costs, depreciation, and administrative expenses are examples of costs that are usually treated as Indirect Costs (also known as Facilities and Administrative - F&A Costs).

“Medically Underserved Community” as defined in section 799B(6) of the PHS Act, means an urban or rural area or population that:

- (1) is eligible for designations under section 332 of the PHS Act as a health professional shortage area;
- (2) is eligible to be served by a migrant health center (MHC), under section 329 of the PHS Act, a community health center (CHC) under section 330 of the PHS Act, a grantee under section 330(h) of the PHS Act (relating to homeless

- individuals), or a grantee under section 340A of the PHS Act (relating to residents of public housing);
- (3) has a shortage of personal health services, as determined under criteria issued by the Secretary under section 1861(aa)(2) of the Social Security Act (relating to rural health clinics); or
 - (4) is designated by a State governor (in consultation with the medical community) as a shortage area or medically underserved community.

In keeping with the Congressional intent that eligible entities should not be limited to formally designated Health Professional Shortage Areas (HPSAs) and populations served by CHCs, MHCs, or homeless health centers, the list of types of practice sites that can be claimed under this provision includes the following:

- Community Health Centers (CHC)
- Migrant Health Centers (MHC)
- Health Care for the Homeless Grantees
- Public Housing Primary Care Grantees
- Rural Health Clinics (federally designated)
- National Health Service Corps (NHSC) Sites
- Indian Health Services (IHS) Sites
- Federally Qualified Health Centers
- Primary Medical Care Health Professional Shortage Areas (HPSAs)
- State or Local Health Departments (regardless of sponsor - for example, local health departments that are funded by the State would qualify)
- Ambulatory practice sites designated by State Governors as serving medically underserved communities

Information on HPSAs is available on HRSA's web site at: <http://bhpr.hrsa.gov/shortage> or you may call 1-800-400-2742.

Information on CHCs, MHCs, and/or homeless health centers is available on HRSA's web site under the Bureau of Primary Health Care (BPHC) at: <http://bphc.hrsa.gov/about/specialpopulations.htm> or you may call 1-800-400-2742.

“Minority” means an individual whose race/ethnicity is classified as American Indian or Alaska Native, Asian, Black or African American, Hispanic or Latino, Native Hawaiian or Pacific Islander.

American Indian or Alaska Native means a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian means a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American means a person having origins in any of the black racial groups of Africa.

Hispanic or Latino means a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race. The term “Spanish origin,” can be used in addition to “Hispanic or Latino.”

Native Hawaiian or Other Pacific Islander means a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White means a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

“National of the United States” means an individual who owes his sole allegiance to the United States, including all U.S. citizens, and including some individuals who are not U.S. citizens. A non-citizen national is a person who, although not a citizen of the United States, owes permanent allegiance to the United States. They generally are individuals born in U.S. outlying possessions (American Samoa and Swains Island) on or after the date of formal acquisition of the possession, or to parents who are non-citizen nationals and have had a residence in the United States or one of its outlying possessions before the birth of that individual.

“Nonprofit” means any school, agency, organization, or institution which is a corporation or association, or is owned and operated by one or more corporations or associations, no part of the net earnings of which inures, or may lawfully inure to the benefit of any private shareholder or individual as defined in Section 801(7) of the PHS Act.

“Nurse Administrator” means a registered nurse that has successfully completed a Master’s and/or doctoral degree program of study designed to prepare nurses for leadership positions in administration in a variety of health care systems.

“Nurse Anesthetist” means a registered nurse that has successfully completed a nurse anesthetist education program.

“Nurse Anesthetist Trainee” means a student enrolled in a graduate program and who is receiving traineeship support from a nurse anesthetist traineeship grant.

“Nurse Educator” means a registered nurse who is prepared through Master’s and/or doctoral education in nursing to transfer knowledge about the science and art of nursing from the expert to the novice in a variety of academic, clinical and lay educational settings with attention to lifelong learning needs of professional nursing students and advanced practice nurses and students.

“Nurse-Midwife” is an individual educated in the two disciplines of nursing and midwifery that has successfully completed a nurse-midwifery education program approved by the American College of Nurse-Midwives. The nurse-midwife delivers primary health care, including nurse-

midwifery services, using abilities to:

- (1) assess the health status of women and children, with a family-centered approach to care;
- (2) institute and provide continuity of health care to clients (patients), with a focus on health education and promotion and management of selected acute and chronic health problems;
- (3) provide instruction and counseling to individuals, families, and groups in health promotion and maintenance, including involving such persons in planning for their health care;
- (4) work in collaboration with other health care providers and agencies to provide, and where appropriate, coordinate services to individuals and families; and
- (5) provide independent management of primary health care for women, focusing particularly on pregnancy, childbirth, the postpartum period, care of the newborn, and the family planning and gynecological needs of women within a health care system that provides for consultation, collaborative management or referral as indicated by the health status of the client.

“Nurse Practitioner” means a registered nurse that has successfully completed a formal program of study designed to prepare registered nurses to perform in an expanded role in the delivery of primary health care including the ability to:

- (1) assess the health status of individuals and families through health and medical history taking, physical examination, and defining of health and developmental problems;
- (2) institute and provide continuity of health care to clients, work with the client to ensure understanding of and compliance with the therapeutic regimen within the established protocols, and recognize when to refer the client to a physician or other health care provider;
- (3) provide instruction and counseling to individuals, families, and groups in the areas of health promotion and maintenance, including involving such persons in planning for their health care; and
- (4) work in collaboration with other health care providers and agencies to provide, and where appropriate, coordinate services to individuals and families.

“Part-time Student” means an individual enrolled in an advanced education nursing program, carrying less than the full-time credit load in a term, as defined by the institution.

“Post-Nursing Master’s Certificate Program” means a formal, post-graduate program that admits RNs with Master’s degrees in nursing and, at completion, awards a certificate and academic credit.

“Primary Care” means the provision of integrated, accessible health care services by clinicians, including nurse practitioners and nurse-midwives, who are accountable for addressing a large majority of personal health care needs within their scopes of practice, developing a sustained partnership with clients, and practicing in the context of family and communities. Critical

elements also include accountability of clinicians and systems for quality of care, consumer satisfaction, efficient use of resources, and ethical behavior. Clients have direct access to an appropriate source of care, which continues over time for a variety of problems and includes needs for preventive services. The Guidelines use “Primary Care” and “Primary Health Care” interchangeably. (Definition adapted from Barbara Starfield, Primary Care Concept, Evaluation, and Policy, Oxford University Press, New York, 1992 p. 4 and Institute of Medicine: Moila S. Donaldson, Karl D. Yordy, Kathleen N., and Neal A. Vanselow, Editors, Committee on the Future of Primary Care, Division of Health Care Services, Primary Care: America's Health in a New Era, Summary, National Academy Press, Washington, DC, 1996, p. 23.)

“Program” means a combination of identified courses and other educational or training experiences at a specified academic level, the sum of which provides the required competence(s) to practice.

“Project” means all proposed activities, including educational programs, specified or described in a grant application as approved for funding.

“Project Director” means an individual designated by the grantee to direct the project or activity being supported by the grant. He or she is responsible and accountable to the grantee and HRSA for the proper conduct of the project or activity.

“Public Health Nurse” means a registered nurse who has successfully completed a Master’s and/or doctoral degree program of study designed to prepare nurses for the practice of promoting and protecting the health of populations using knowledge from nursing, social, and public health sciences.

“Rural Area” means an area other than a Metropolitan Statistical Area (MSA) as designated by the Office of Management and Budget (OMB) based on current census data. Census tracts in certain metropolitan areas may also be eligible if they are located at a significant distance from the major city in the Standard Metropolitan Area (SMA).

“School of Nursing” means a collegiate, associate degree, or diploma school of nursing in a State where graduates are – (A) authorized to sit for the National Council Licensure Examination-Registered Nurse (NCLEX-RN); or (B) licensed registered nurses who will receive a graduate or equivalent degree or training to become an advanced education nurse as defined by section 811(b), as defined in Section 801(2) of the PHS Act, as amended.

“Stipend” means a subsistence allowance for trainees/fellows to help defray living expenses during the training experience. It is not provided as a condition of employment with either the Federal government or the sponsoring organization. Stipends must be paid in accordance with stipend levels established by the OPDIV, which are based on a 12-month full-time training appointment. In the event of early termination, the stipend will be prorated according to the amount of time spent in training, and the OPDIV will issue a revised Notice of Grant Award. No departure from the standard stipend provided by the OPDIV under the traineeship/fellowship may be negotiated by the sponsoring institution with the fellow.

Stipend levels are updated nearly every year. When increases are approved, they are published and posted on the OPDIV Web site. The awarding office will adjust traineeship/fellowship awards on their anniversary dates to include the currently applicable stipend amount.

IX. TIPS FOR WRITING A STRONG APPLICATION

A concise resource offering tips for writing proposals for HHS grants and cooperative agreements can be accessed online at: <http://www.hhs.gov/asrt/org/grantinformation/apptips.html>.

APPENDIX A

LIST OF AENT PROGRAM ATTACHMENTS AND TABLES INCLUDED IN FUNDING OPPORTUNITY ANNOUNCEMENT

Phase 1 - Grants.gov Submission due December 22, 2010

SF-424 R&R Form, Project/Performance Site Location Form, SF-424B – Assurances for Non-Construction Programs, HHS Checklist Form HHS-5161, and the SF-LLL Lobbying Disclosure Form, if applicable.

Phase 2 - HRSA EHBs Submission due date January 21, 2011. Refer to Section IV of this guidance for detailed instructions. See the Attachments and AENT Program Tables and Instructions and Special Consideration Assurance Statement information below.

Attachments

Attachment 1 – AENT Full-Time and Part-Time Status / Tuition, Fees and Stipends

Attachment 2 – Accreditation and Approval Documentation

Attachment 3 – Biographical Sketch

Attachment 4 – Special Consideration Assurance Statement

AENT Program Tables and Instructions and Special Consideration Assurance Statement

Table 1 - AENT: **Master's and Post-Nursing Master's Certificate Data** (Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master's Certificate Program)

- A. Student Enrollment Data (all students)
- B. Students Supported by Traineeship Data
- C. Graduate Data (all graduates)
- D. Graduates Supported by Traineeship Data

Table 2 - AENT: **Nurse-Midwifery and Nurse Anesthesia Data** (Nurse-Midwifery Certificate, Nurse-Midwifery Master's, Nurse-Midwifery Post-BSN to Doctoral, Nurse Anesthesia Master's, Nurse Anesthesia Post-BSN to Doctoral) (First Year Only)
Enrollment, Traineeship Support, Graduate and Graduate Support Data

Table 3 - AENT: **Doctoral Program Data** (Post-BSN to PhD, Post-MSN to PhD, DNSc/DNS, Post-BSN to DNP/DrNP, Post-MSN to DNP/DrNP, Post-MSN to DNAP, Other)

- A. Doctoral Enrollment Data (all doctoral students enrolled)
- B. Doctoral Students Supported by Traineeship Data
- C. Doctoral Graduates Data (all doctoral graduates)
- D. Doctoral Graduates Supported By Traineeship Data

Table 4 - AENT:	Rural, Underserved, or Public Health Practice Settings Data A. Graduate Data B. Graduates Supported by Traineeship Data
Table 5 – AENT:	Ethnicity Data
Table 6 – AENT:	Race / Disadvantaged Data A. Hispanic / Latino Ethnicity by Race B. Non-Hispanic / Latino Ethnicity by Race C. Unreported / Unavailable Ethnicity by Race
Table 7 – AENT:	Age and Gender Data
Table 8A - AENT:	Projected Master’s Data A. Total # of Projected Master Degree and Post Nursing Master’s Certificate Student Enrollment and Master Degree and Post Nursing Master’s Certificate Students Projected to Receive Traineeship Support by Role by 10/15/2011 (Clinical Nurse Specialist, Nurse Administrator, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Anesthetist, Nurse Educator, Public Health Nurse, Nurse-Midwifery)
Table 8B – AENT:	Projected Doctoral Data B. Total # of Projected Doctoral Degree Student Enrollment and Doctoral Degree Students Projected to Receive Traineeship Support by Education Level by 10/15/2011 (Post-BSN to PhD, Post-MSN to PhD, DNSc/DNS, Post-BSN to DNP/DrNP, Post-MSN to DNP/DrNP, Post-BSN to DNAP, Post-MSN to DNAP, Other)

ATTACHMENT 1 - AENT FULL-TIME AND PART-TIME STATUS / TUITION, FEES AND STIPENDS

FULL-TIME AND PART-TIME STATUS

Provide information on how the applicant institution defines the following:

- (1) Full-time graduate study: ____ (Indicate the number of credit hours or units required per term)
- (2) Part-time graduate study: ____ (Indicate the number of credit hours or units required per term)

IMPORTANT NOTE: Institutions are no longer required to provide full-time equivalent (FTE) calculations for part-time enrollees.

TUITION, FEES AND STIPENDS

- (1) Provide the in-state and out-of-state tuition costs for a full-time and part-time student.

TUITION	Full-Time Students PER YEAR	Part-Time Students PER CREDIT HOUR
Tuition: In-State		
Tuition: Out-of-State		

- (2) Indicate the **total cost of stipend support** that would be required to support all the graduates eligible for support from July 1, 2010 - June 30, 2011 based on \$21,180 for a 12-month period, if funds were available: \$_____
- (3) Based on the “Projected Student Enrollees” (full-time and part-time) reported on Tables 1-3, indicate the **total cost of tuition and fees** that would be required to support all the graduate students eligible for support from July 1, 2010 - June 30, 2011, if funds were available: \$_____.

ATTACHMENT 2 – ACCREDITATION AND APPROVAL DOCUMENTATION

Accreditation Documentation of the Program (CCNE, NLNAC, COA, ACME letter or certificate; letter from the United States Department of Education providing reasonable assurance of accreditation) for your Program(s) and also include a statement regarding accreditation with the complete expiration date (i.e. 02/31/2012 or March 20, 2017 for Spring 2017).

Also attach Approval Documentation if applicable.

Approval Documentation: Applicants must provide documentation of all approvals needed to enroll students into a new master's or doctoral program. This can be documented by evidence such as copies of meeting minutes, letter from the Faculty Senate, letter from the Board of Regents, letter from the State Finance Board, and/or letter from the State Board of Nursing. Each University/College has a unique process for gaining approval to start new programs, especially new master's and doctoral programs.

Failure to provide documentation of accreditation with the HRSA program application will render the application non-responsive and the application will not be considered for funding under this announcement.

Attachment 4

AENT PROGRAM

SPECIAL CONSIDERATION ASSURANCE STATEMENT

Applicants requesting “Special Consideration” must assure compliance with the following statement to be signed and dated by the Project Director, uploaded in HRSA EHBs and submitted electronically with the electronic application in the Other Project Information Section as Attachment 4.

I certify that _____ of the _____ total number of students enrolled (total student enrollees

from AENT tables 1 through 3) as of October 15, 2010 have signed commitments to practice in

HPSAs after graduation. The percent of students who have signed commitments is _____.

The school of nursing at the applicant organization will retain the signed commitments for three years. The signed commitments will not be mailed to the HRSA Division of Nursing.

AENT Program Tables and Instructions

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0305. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-33, Rockville, Maryland, 20857.

Data for AENT Tables 1-8 and the AENT Special Consideration Assurance Statement (electronic version) must be entered electronically via the HRSA EHBs or the applicant will not be given an award.

Complete the following table(s) electronically, as appropriate, summarizing enrollment and projected students, student support, and graduate data:

Table 1 - AENT: **Master's and Post-Nursing Master's Certificate Data** (Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master's Certificate Program)

- A. Student Enrollment Data (all students)
- B. Students Supported by Traineeship Data
- C. Graduate Data (all graduates)

D. Graduates Supported by Traineeship Data

Table 2 - AENT: **Nurse-Midwifery and Nurse Anesthesia** (Nurse-Midwifery Certificate, Nurse-Midwifery Master's, Nurse-Midwifery Post-BSN to Doctoral, Nurse Anesthesia Master's, Nurse Anesthesia Post-BSN to Doctoral)

Data:

- A. Enrollment; Students Supported by Traineeships; Graduates; and Graduates Supported by Traineeships

Table 3 - AENT: **Doctoral Program Data** (Post-BSN to PhD, Post-MSN to PhD, DNSc/DNS, Post-BSN to DNP/DrNP, Post-MSN to DNP/DrNP, Post-MSN to DNAP, Other)

- A. Doctoral Enrollment Data (all doctoral students enrolled)
- B. Doctoral Students Supported by Traineeship Data
- C. Doctoral Graduates (all doctoral graduates) Data
- D. Doctoral Graduates Supported By Traineeship Data

Table 4 - AENT:	Rural, Underserved, or Public Health Practice Settings Data A. Graduate Data B. Graduates Supported by Traineeship Data
Table 5 – AENT:	Ethnicity Data
Table 6 – AENT:	Race / Disadvantaged Data A. Hispanic / Latino Ethnicity by Race B. Non Hispanic / Latino Ethnicity by Race C. Unreported / Unavailable Ethnicity by Race
Table 7 – AENT:	Age and Gender Data
Table 8A - AENT:	Projected Master’s Data A. Total # of Projected Master Degree and Post Nursing Master’s Certificate Student Enrollment and Master Degree and Post Nursing Master’s Certificate Students Projected to Receive Traineeship Support by Role by 10/15/2011 (Clinical Nurse Specialist, Nurse Administrator, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Anesthetist, Nurse Educator, Public Health Nurse, Nurse Midwifery)
Table 8B – AENT:	Projected Doctoral Data B. Total # of Projected Doctoral Degree Student Enrollment and Doctoral Degree Students Projected to Receive Traineeship Support by Education Level by 10/15/2011 (Post-BSN to PhD, Post-MSN to PhD, DNSc/DNS, Post-BSN to DNP/DrNP, Post-MSN to DNP/DrNP, Post-BSN to DNAP, Post-MSN to DNAP, Other)

Table 1 – AENT: Master’s and Post-Nursing Master’s Certificate Data (Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master’s Certificate)

A. STUDENT ENROLLMENT

IDENTIFY SPECIALTY FOCUS AREAS PLEASE TYPE (See Table 1 Instructions)	Total Student Enrollment (Headcount as of 10/15/10)													
	Clinical Nurse Specialist (CNS)		Primary Care Nurse Practitioner (PC-NP)		Acute Care Nurse Practitioner (AC-NP)		Nurse Administrator (NA)		Nurse Educator (NE)		Public Health Nurse (PHN)		Post-Nursing Master’s Certificate (PNMC)	
	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT
GRAND TOTALS														

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Table 1 – AENT: Master’s and Post-Nursing Master’s Certificate Data (Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master’s Certificate)

B. TRAINEESHIP SUPPORT

IDENTIFY SPECIALTY FOCUS AREAS PLEASE TYPE (See Table 1 Instructions)	Total # of Students Supported by Traineeship 7/01/09 – 6/30/10 (Budget Period)															
	Clinical Nurse Specialist (CNS)		Primary Care Nurse Practitioner (PC-NP)		Acute Care Nurse Practitioner (AC-NP)		Nurse Administrator (NA)		Nurse Educator (NE)		Public Health Nurse (PHN)		Post-Nursing Master’s Certificate (PNMC)		Clinical Nurse Specialist (CNS)	
	FT	PT	FT	PT	FT	PT	FT	FT	PT	FT	PT	FT	PT	FT	FT	PT
GRAND TOTALS																

OMB NO. 0915-0305

EXP. DATE: 03/31/2013

Table 1 – AENT: Master’s and Post-Nursing Master’s Certificate Data (Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master’s Certificate)

C. GRADUATE ACTIVITY

IDENTIFY SPECIALTY FOCUS AREAS PLEASE TYPE (See Table 1 Instructions)	Total # of Graduates 7/01/09 – 6/30/10 (Budget Period)															
	Clinical Nurse Specialist (CNS)		Primary Care Nurse Practitioner (PC-NP)		Acute Care Nurse Practitioner (AC-NP)		Nurse Administrator (NA)		Nurse Educator (NE)		Public Health Nurse (PHN)		Post-Nursing Master’s Certificate (PNMC)		Clinical Nurse Specialist (CNS)	
	FT	PT	FT	PT	FT	PT	FT	FT	PT	FT	PT	FT	PT	FT	FT	PT
GRAND TOTALS																

OMB NO. 0915-0305

EXP. DATE: 03/31/2013

Table 1 – AENT: Master’s and Post-Nursing Master’s Certificate Data (Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master’s Certificate)

D. GRADUATES SUPPORTED BY TRAINEESHIP

IDENTIFY SPECIALTY FOCUS AREAS PLEASE TYPE (See Table 1 Instructions)	Total # of Graduates Supported by Traineeship 7/01/09 – 6/30/10 (Budget Period)															
	Clinical Nurse Specialist (CNS)		Primary Care Nurse Practitioner (PC-NP)		Acute Care Nurse Practitioner (AC-NP)		Nurse Administrator (NA)		Nurse Educator (NE)		Public Health Nurse (PHN)		Post-Nursing Master’s Certificate (PNMC)		Clinical Nurse Specialist (CNS)	
	FT	PT	FT	PT	FT	PT	FT	FT	PT	FT	PT	FT	PT	FT	FT	PT
GRAND TOTALS																

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EXP. DATE: 03/31/2013

Instructions for Completing Table 1A, 1B, 1C and 1D – AENT (Master’s and Post-Nursing Master Certificate Level Only):

IMPORTANT NOTES:

- < Count each student **only once** under the “**Specialty Focus**” areas; for students with more than one specialty please indicate the **PRIMARY** specialty **only**. For example, a Medical/Surgical Clinical Nurse Specialist (CNS) would be documented as an Adult CNS.
- < **Enrollees** – Students that are enrolled in an Advanced Education Nursing Program and have not graduated or completed the program by 10/15/10.
- < **Graduates** – Students who have successfully completed all educational requirements for a specified Advanced Education Nursing Program of study or have met the eligibility requirements for an Advanced Education Nursing Master’s or Doctoral degree or Post-Nursing Master’s Certificate between 07/01/09-06/30/10.
- < **Students supported** is a subset of enrollees and **graduates supported** is a subset of the total number of graduates. Do **not** double count a student as both an Enrollee and a Graduate.
- < For students who received traineeship support from 07/01/09-06/30/10 and graduated in that time period, the students should be reported under the “*Total # of Graduates Supported by Traineeship*” column. These students should **not** be reported under both “*Students Supported by Traineeship*” and “*Graduates Supported by Traineeship*”.
- < For students who received traineeship support from 07/01/09-06/30/10 and **did not** graduate in that time period, the students should be reported under the “*Students Supported by Traineeship*” column **only**.

Complete **Table 1A** for Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master’s Certificate Program **Enrollment Data only**. Report Master’s and Post-Nursing Master’s Certificate Level data only.

For “**Total Enrollment (Headcount)**”, enter total number of full-time and part-time students enrolled as of 10/15/10 by role, specialty focus area then emphasis concentration if applicable.

GRAND TOTAL: The grand total row must reflect the total of the numbers reported in each column(s). Numbers omitted in the column(s) of the Table will **not** be counted in the grand total.

Complete **Table 1B** for Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master’s Certificate Program **Traineeship Support data only**. Report Master’s and Post-Nursing Master’s Certificate Level data only.

For “**Total # of Students Supported by Traineeship**”, enter the total number of full-time and part-time students who received traineeship support between 7/01/09 and 6/30/10 by role, specialty focus area then emphasis concentration if applicable.

GRAND TOTAL: The grand total row must reflect the total numbers reported in each column. Numbers omitted in the column(s) of the Table will **not** be counted in the grand total.

Complete **Table 1C** for Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse

Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master's Certificate Program **Graduate data only**. Report Master's and Post-Nursing Master's Certificate Level data only.

For **“Total # of Graduates”**, enter the total number of full-time and part-time graduates who completed degree requirements between 7/01/09 and 6/30/10 by role, specialty focus area. **Students that complete the Post-Nursing Master's Certificate Program should be included in this column.**

GRAND TOTAL: The grand total row must reflect the total of the numbers reported in each column(s). Numbers omitted in the column(s) of the Table will **not** be counted in the grand total.

Complete Table 1D for Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master's Certificate Program **Graduates Supported by Traineeship only**. Report Master's and Post-Nursing Master's Certificate Level data only.

For **“Total # of Graduates Supported by Traineeship”**, enter the total number of full-time and part-time graduates who received traineeship support and completed degree requirements between 7/01/09 and 6/30/10 by role, specialty focus area then emphasis concentration if applicable. **Students that complete the Post-Nursing Master's Certificate Program and received traineeship support should be included in this column.**

IMPORTANT NOTE:

- < For each role identify the specialty focus area then if applicable the emphasis concentration, please provide the data in the appropriate columns.
- < Use the list provided below to indicate the role, specialty focus areas then emphasis concentration if applicable for Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse and Post-Nursing Master's Certificate Program enrollment, supported students, graduates, and supported graduates at your institution. **Please select only the role then the specialty focus area then if applicable, the Emphasis Concentration list applicable to your program.**

EXAMPLES:

- Select **Clinical Nurse Specialist (CNS)**, then select the specialty from the list provided then if applicable, select from the Emphasis Concentration list. For example, Clinical Nurse Specialist can have a specialty of Adult CNS with an emphasis in Critical Care.
- Select **Primary Care Nurse Practitioner (PC-NP)**, then select the specialty from the list provided then if applicable, select from the Emphasis Concentration list. For example, a Primary Care Nurse Practitioner can have a specialty of Woman's Health with an emphasis in Rural Health.

1.

- Select **Acute Care Nurse Practitioner (AC -NP)**, then select the specialty from the list provided then select if applicable, select from the Emphasis Concentration list. For example, an Acute Care Nurse Practitioner can have a specialty in Pediatrics with an emphasis in Critical Care.
- Select **Nurse Administrator (NA)**, then select the specialty from the list provided then if applicable, select from the Emphasis Concentration list. For example, Nurse Administrator (NA) can be a Nurse Administrator with an emphasis in Public Policy.
- Select **Nurse Educator (NE)**, then select the specialty from the list provided then if applicable, select from the Emphasis Concentration list. For example, Nurse Educator (NE) can be a Nurse Educator with an emphasis in Adult Health.
- Select **Public Health Nurse**, then select the specialty from the list provided then if applicable, select from the Emphasis Concentration list.

If there is an entry for a **Post-Nursing Master's Certificate** Program, please select the role, specialty focus area (Other: i.e. Pediatric Nurse Practitioner) with the number of enrollees under the Post-Nursing Master's Certificate column.

Full-time first year nurse anesthesia students should not be included on this table; they should be included on Table 2: **Nurse-Midwifery Certificate, Nurse-Midwifery Master's, Nurse-Midwifery Post-BSN to Doctoral, Nurse Anesthesia Enrollment, Traineeship Support and Graduate Data** only.

For each role noted below if a specialty focus area is **not listed** on the appropriate Table select "**Other**".

AENT TABLE 1 SPECIALITY LISTS

CLINICAL NURSE SPECIALIST

Adult	Adult - Gerontology	Public Health
Adult Psychiatric/Mental Health	Home Health	Women's Health
Child/Adolescent Psychiatric and Mental Health	Maternal Child/Maternal-Infant	Other
Family	Neonatal	
Forensics	Pediatric	

PRIMARY CARE NURSE PRACTITIONER

Adult Psychiatric/Mental Health	Geriatric
Adult	Neonatal
Adult/Gerontology	Pediatric
Child/Adolescent Psychiatric and Mental Health	Women's Health
Family	Other

ACUTE CARE NURSE PRACTITIONER

Adult	Neonatal
Adult/Gerontology	Pediatric
Adult Psychiatric/Mental Health	Other
Child/Adolescent Psychiatric and Mental Health	

NURSE ADMINISTRATOR

Nursing Administration

NURSE EDUCATOR

Nurse Educator

PUBLIC HEALTH NURSE

Public Health

POST-NURSING MASTER'S CERTIFICATE

Adult CNS	Adult NP - Primary Care	Genetics
Adult Psychiatric and Mental Health CNS	Adult/Gerontology NP - Primary Care	Immunosuppressive Nursing
Child/Adolescent Psychiatric and Mental Health CNS	Family NP - Primary Care	Informatics
Family CNS	Geriatric NP - Primary Care	Nursing Administration
Forensic CNS	Pediatric NP - Primary Care	Nurse Education
Geriatric/Gerontology CNS	Women's Health NP - Primary Care	Occupational Health

Home Health CNS	Ambulatory Care	Oncology
Maternal Child/Maternal-Infant CNS	Cardiac Rehab	Pain Management
Neonatal CNS	Cardiovascular	Palliative Care
Pediatric CNS	Case Management	Perinatal
Public Health Nursing CNS	Chronic/Long Term Care	Public Health
Women's Health CNS	College Health	Public Policy
Adult Acute Care NP	Community Health	Rehabilitation
Adult/Gerontology Acute Care NP	Critical Care	Research
Pediatric Acute Care NP	Emergency	Rural
Neonatal NP	Environmental	Other
Adult Psychiatric/Mental Health NP	Child/Adolescent Psychiatric and Mental Health NP	

EMPHASIS CONCENTRATION

Ambulatory Care	Environmental	Palliative Care
Cardiac Rehab	Genetics	Perinatal
Cardiovascular	Immunosuppressive Nursing	Public Health
Case Management	Informatics	Public Policy
Chronic/Long Term Care	Nursing Administration	Rehabilitation
College Health	Nurse Education	Research
Community Health	Occupational Health	Rural
Critical Care	Oncology	School Health
Emergency	Pain Management	Other Major Specialties (Specify):

Table 2 – AENT: Nurse-Midwifery and Nurse Anesthesia Data (Nurse Midwifery Certificate, Nurse-Midwifery Master's, Nurse-Midwifery Post-BSN to Doctoral, Nurse Anesthesia Master's, Nurse Anesthesia Post-BSN to Doctoral)

Enrollment, Traineeship Support, Graduate and Graduate Support Data

Nurse-Midwifery Degree Programs and Nurse Anesthesia Degree Programs	Total Enrollment (As of 10/15/10)		Total # of Students Supported by Traineeship 7/01/09-6/30/10 (Budget Period)		GRADUATES 7/01/09-6/30/10			
					Total # of Graduates		Total # of Graduates Supported by Traineeship	
	FT	PT	FT	PT	FT	PT	FT	PT
Nurse- Midwifery Certificate								
Nurse-Midwifery Master's								
Nurse-Midwifery Post-BSN to Doctoral								
Nurse Anesthesia – Master's (First Year Only)								
Nurse Anesthesia – Post-BSN to Doctoral (First Year Only)								
GRAND TOTALS:								

NOTE: Part-time Nurse Anesthesia students cannot be supported under AENT.

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Instructions for Completing Table 2 - AENT:

- < Part-time Nurse Anesthesia students cannot be supported under AENT.
- < Complete this Table for Nurse-Midwifery and Nurse Anesthesia Data (Nurse-Midwifery Certificate, Nurse-Midwifery Master's, Nurse-Midwifery Post-BSN to Doctoral, Nurse Anesthesia Master's, Nurse Anesthesia Post-BSN to Doctoral) (**Full-time, First-year Only**), Enrollment, Traineeship Support, Graduates and Graduates Supported data.

IMPORTANT NOTES:

- < Only first-year nurse anesthesia students may be supported under the *Advanced Education Nursing Traineeship Program*.

"The AANA supports doctoral education for entry into nurse anesthesia practice by 2025. The American Association of Colleges of Nursing (AACN) has adopted a position that all advanced practice nurses, including nurse anesthetists, be educated at the practice doctorate degree level and earn a Doctor of Nursing Practice (DNP). As part of its initiative, the AACN developed a document containing "essential" elements of a DNP curriculum and influenced programs offering a Nursing Doctor (ND) degree to change the degree to the DNP. Note: The nurse anesthesia doctorate degree is DNP or DNAP.

Since its founding in 1931, the AANA has advanced quality education as the means to ensure that Certified Registered Nurse Anesthetists (CRNAs) are the best-prepared, safest anesthesia providers possible. Over the years, the educational standards for nurse anesthesia programs have grown to meet the required knowledge and skills for entry into practice. During the 1980s nurse anesthesia educational programs moved from hospital-based certificate programs to university-based graduate programs, and in 1998 the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) finalized the requirement that all programs award a master's or higher level degree. To best position CRNAs to meet the extraordinary changes in today's healthcare environment, the AANA believes it is essential to support doctoral education for future nurse anesthetists." (This website, its administration, staff and users are in no way associated with the AANA (American Association of Nurse Anesthetists) or speak for the AANA. The DNAP.com Resource Site Staff)

- < **Enrollees** – Students that are enrolled in an Advanced Education Nursing Program and have not graduated or completed the program by 10/15/09.
- < **Graduates** – Students who have successfully completed all educational requirements for a specified Advanced Education Nursing Program of study or have met the eligibility requirements for an Advanced Education Nursing Master's or Doctoral degree, or Nurse-Midwifery Certificate between 07/01/09-06/30/10.
- < **Students supported** are a subset of enrollees and **graduates supported** is a subset of the total number of graduates. Do not double count a student as both an Enrollee and a Graduate.
- < For students who received traineeship support from 07/01/09-06/30/10 and graduated in that time period, the students should be reported under the "*Total # of Graduates Supported by Traineeship*" column. These students should not be reported under both "*Students Supported by Traineeship*" and "*Graduates Supported by Traineeship*".
- < For students who received traineeship support from 07/01/09-06/30/10 and **did not** graduate in that time period, the students should be reported under the "*Students Supported by Traineeship*" column **only**.

- < For **“Total Enrollment (Headcount)”**, enter total number of full-time and part-time students enrolled as of 10/15/10.
- < For **“Total # of Students Supported by Traineeship”**, enter the total number of full-time and part-time students who received traineeship support between 7/01/09 and 6/30/10.
- < For **“Total # of Graduates”**, enter the total number of full-time and part-time graduates who completed degree requirements between 7/01/09 and 6/30/10.
- < For **“Total # of Graduates Supported by Traineeship”**, enter the total number of full-time and part-time graduates who received traineeship support and completed degree requirements between 7/01/09 and 6/30/10.
- < **GRAND TOTAL:** The grand total row must reflect the total of the numbers reported in each column. Numbers omitted in the column(s) of the Table will **not** be counted in the grand total.

Table 3 - AENT: Doctoral Program Data (Post-BSN to PhD; Post-MSN to PhD; DNSc/DNS; Post-BSN to DNP/DrNP; Post MSN to DNP/DrNP; Post-MSN to DNAP, Other)

A. DOCTORAL ENROLLMENT

IDENTIFY SPECIALTY FOCUS AREAS PLEASE TYPE (See Table 3 Instructions)	Post-BSN to PhD		Post-MSN to PhD		DNSc / DNS		Post-BSN to DNP / DrNP		Post-MSN to DNP / DrNP		Post-MSN to DNAP		Other (specify – i.e. ND)	
	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT
GRAND TOTALS														

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Table 3 - AENT: Doctoral Program Data (Post-BSN to PhD; Post-MSN to PhD; DNSc/DNS; Post-BSN to DNP/DrNP; Post MSN to DNP/DrNP; Post-MSN to DNAP, Other)

B. DOCTORAL TRAINEESHIP SUPPORT

IDENTIFY SPECIALTY FOCUS AREAS PLEASE TYPE (See Table 3 Instructions)	Post-BSN to PhD		Post-MSN to PhD		DNSc / DNS		Post-BSN to DNP / DrNP		Post-MSN to DNP / DrNP		Post-MSN to DNAP		Other (specify – i.e. ND)	
	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT
GRAND TOTALS														

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Table 3 - AENT: Doctoral Program Data (Post-BSN to PhD; Post-MSN to PhD; DNSc/DNS; Post-BSN to DNP/DrNP; Post MSN to DNP/DrNP; Post-MSN to DNAP, Other)

C. DOCTORAL GRADUATES DATA

IDENTIFY SPECIALTY FOCUS AREAS PLEASE TYPE (See Table 3 Instructions)	Post-BSN to PhD		Post-MSN to PhD		DNSc / DNS		Post-BSN to DNP / DrNP		Post-MSN to DNP / DrNP		Post-MSN to DNAP		Other (specify – i.e. ND)	
	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT
GRAND TOTALS														

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Table 3 - AENT: Doctoral Program Data (Post-BSN to PhD; Post-MSN to PhD; DNSc/DNS; Post-BSN to DNP/DrNP; Post MSN to DNP/DrNP; Post-MSN to DNAP, Other)

D. DOCTORAL GRADUATES SUPPORTED BY TRAINEESHIP DATA

IDENTIFY SPECIALTY FOCUS AREAS PLEASE TYPE (See Table 3 Instructions)	Post-BSN to PhD		Post-MSN to PhD		DNSc / DNS		Post-BSN to DNP, DrNP		Post-MSN to DNP / DrNP		Post-MSN to DNAP		Other (specify – i.e. ND)	
	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT
GRAND TOTALS														

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Instructions for Completing Table 3 - AENT: Doctoral Program Data

< Complete this Table for Doctoral students and Doctoral graduates only.

Complete Table 1A for all Doctoral students enrolled in your organization.

Complete Table 1B for Doctoral students supported by the Traineeship in 7/1/09-6/30/10 Budget Period

Complete Table 1C for the total number of Doctoral Graduates between 7/1/09-6/30/10 in organization

Complete Table 1D for Doctoral Graduates Supported By Traineeship in 7/1/09-6/30/10 Budget Period

Note: Trainees may only receive support when in the Master's / Doctoral program.

Use the list provided below to indicate the specialty focus areas.

For each educational level noted below if a specialty focus area is **not listed** on the appropriate Table select **"Other"**.

Post BSN to PhD

Adult Acute Care NP	Forensic CNS	Pediatric CNS
Adult NP - Primary Care	Gerontological CNS	Pediatric Acute Care NP
Adult/Gerontology NP - Primary Care	Gerontological NP - Primary Care	Pediatric NP - Primary Care
Adult Health CNS	Maternal Child/Maternal-Infant CNS	Public/Community Health CNS
Adult Psychiatric and Mental Health CNS	Neonatal NP	WHNP/OB-GYN NP - Primary Care
Child/Adolescent Psychiatric and Mental Health CNS	Nursing Administration	Other
Family NP - Primary Care	Nurse Anesthetist	

Post MSN to PhD

Research

DNSc/DNS (RESEARCH)

Acute Care	Home Health	Palliative Care
Adult	Immunosuppressive Nursing	Pediatric
Adolescent	Informatics	Perinatal
Case Management	Maternal-Child/Parent-Child Health	Primary Care
Chronic/Long Term Care	Medical Surgical	Psychiatric/Mental Health
Community Health	Neonatal	Public Health
Critical Care	Nursing Administration	Public Policy
Environmental	Nurse Anesthetist	Rehabilitation
Family	Nurse Education	School Health
Forensics	OB/GYN/Women's Health	Other
Geriatric/Gerontology	Occupational Health	
Genetics	Oncology	

Post-BSN to DNP / DrNP (PRACTICE DOCTORATE)

Adult Acute Care NP	Forensic CNS	Pediatric CNS
Adult NP - Primary Care	Gerontological CNS	Pediatric Acute Care NP
Adult/Gerontology NP - Primary Care	Gerontological NP - Primary Care	Pediatric NP - Primary Care
Adult Health CNS	Maternal Child/Maternal-Infant CNS	Public/Community Health CNS
Adult Psychiatric and Mental Health CNS	Neonatal NP	WHNP/OB-GYN NP - Primary Care
Child/Adolescent Psychiatric and Mental Health CNS	Nursing Administration	Other
Family NP - Primary Care	Nurse Anesthetist	

Post-MSN to DNP / DrNP (PRACTICE DOCTORATE)

Adult Acute Care NP	Forensic CNS	Pediatric CNS
Primary Care	Gerontological CNS	Pediatric Acute Care NP
Adult/Gerontology NP - Primary Care	Gerontological NP - Primary Care	Pediatric NP - Primary Care
Adult Health CNS	Maternal Child/Maternal-Infant CNS	Public/Community Health CNS
Adult Psychiatric and Mental Health CNS	Neonatal NP	WHNP/OB-GYN NP - Primary Care
Child/Adolescent Psychiatric and Mental Health CNS	Nursing Administration	Other
Family NP - Primary Care	Nurse Anesthetist	

Post MSN to DNAP

Nurse Anesthetist

OTHER SPECIALITY

Other

For all PhD, DNP, DrNP, and DNAP students, please select from the Emphasis Concentration list below if applicable. For example, select Post BSN to DNP (as the educational level), then select Pediatric Acute Care NP (as the specialty focus area), then select Oncology (as the emphasis concentration).

EMPHASIS CONCENTRATION

Ambulatory Care	Immunosuppressive Nursing	Rehabilitation
Cardiac Rehab	Informatics	Research
Cardiovascular	Nurse Administration	Rural
Case Management	Nurse Education	School Health
Chronic/Long Term Care	Occupational Health	Other Major Specialties (Specify):
College Health	Oncology	
Community Health	Pain Management	
Critical Care	Palliative Care	
Emergency	Perinatal	
Environmental	Public Health	
Genetics	Public Policy	

IMPORTANT NOTES:

- < **Enrollees** – Students that are enrolled in an Advanced Education Nursing Program and have not graduated or completed the program by 10/15/10.
- < **Graduates** – Students who have successfully completed all educational requirements for a specified Advanced Education Nursing Program of study or have met the eligibility requirements for an Advanced Education Nursing Doctoral degree between 07/01/09-06/30/10.
- < **Students supported** is a subset of enrollees and **graduates supported** is a subset of the total number of graduates. Do not double count a student as both an Enrollee and a Graduate.
- < For students who received traineeship support from 07/01/09-06/30/10 and graduated in that time period, the students should be reported under the “*Total # of Graduates Supported by Traineeship*” column. These students should not be reported under both “*Students Supported by Traineeship*” and “*Graduates Supported by Traineeship*”.
- < For students who received traineeship support from 07/01/09-06/30/10 and **did not** graduate in that time period, the students should be reported under the “*Students Supported by Traineeship*” column **only**.

IMPORTANT NOTE:

- < For each Educational level, count each student **only once** under the “**Specialty Focus**” areas; for students with more than one specialty please indicate the primary specialty **only**.
- < For “**Total Enrollment (Headcount)**”, enter the total number of full-time and part-time students enrolled as of 10/15/10 by Doctoral focus.

For “**Total # of Doctoral Students Supported by Traineeship**”, enter the total number of full-time and part-time students who received traineeship support between 7/01/09 and 6/30/10.
- < For “**Total # of Doctoral Graduates**”, enter the total number of full-time and part-time graduates who completed degree requirements between 7/01/09 and 6/30/10.
- < For “**Total # of Doctoral Graduates Receiving Traineeship Support**”, enter the total number of full-time and part-time doctoral graduates who received traineeship support and completed degree requirements between 7/01/09 and 6/30/10.

GRAND TOTAL: The grand total row must reflect the total of the numbers reported in each column(s).Numbers omitted in the column(s) of the Table will **not** be counted in the grand total.

Table 4 - AENT: Rural, Underserved, or Public Health Practice Settings Data

A. Graduates from 7/1/09- 6/30/10

PRACTICE SETTINGS	TABLE 1						TABLE 2			TABLE 3	GRAND TOTAL
	CNS	PC-NP	AC-NP	NA	NE	PHN	NMW Certificate	NMW Master's	NMW Post-BSN to Doctoral	Doctoral PhD; DNSc/DNS; DNP/DrNP; DNAP; Other	
Community Health Centers											
Migrant Health Centers											
Health Care for the Homeless Grantees											
Public Housing Primary Care											
Rural Health Clinics											
National Health Service Corps Sites											
Indian Health Service / Tribal Health Sites											
Federally Qualified Health Centers											
Health Professional Shortage Areas (HPSAs)											
State or Local Health Departments											
Ambulatory Practice Sites Designated by State Governors											
Other Rural or Underserved Population											
1. Total Number of Graduates in these Settings (from 07/01/09 – 06/30/10)											
2. Total Number of Graduates (from 07/01/09 – 06/30/10)											
3. Percentage of Graduates in these Settings (Item 1 divided by Item 2)											

NOTE: Do not include Nurse Anesthetist graduates on this Table. The AENT Program also supports first year Nurse Anesthesia students.

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Table 4 - AENT: Rural, Underserved, or Public Health Practice Settings Data

B. Graduates Supported by Traineeship from 7/01/09 to 6/30/10

PRACTICE SETTINGS	TABLE 1						TABLE 2			TABLE 3	GRAND TOTAL
	CNS	PC-NP	AC-NP	NA	NE	PHN	NMW Certificate	NMW Master's	NMW Post-BSN to Doctoral	Doctoral PhD; DNSc/DNS; DNP/DrNP; DNAP; Other	
Community Health Centers											
Migrant Health Centers											
Health Care for the Homeless Grantees											
Public Housing Primary Care											
Rural Health Clinics											
National Health Service Corps Sites											
Indian Health Service / Tribal Health Sites											
Federally Qualified Health Centers											
Health Professional Shortage Areas (HPSAs)											
State or Local Health Departments											
Ambulatory Practice Sites Designated by State Governors											
Other Rural or Underserved Population											
1. Total Number of Graduates Supported by Traineeship working these Setting (from 07/01/09 – 06/30/10)											
2. Total Number of Graduates (from 07/01/09 – 06/30/10)											
3. Percentage of Graduates Supported by Traineeship in these Settings (Item 1 divided by Item 2)											

NOTE: Do not include Nurse Anesthetist graduates on this Table. The AENT Program also supports first year Nurse Anesthesia students.

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Instructions for completing Tables 4A (Statutory Funding Preference) and 4B (data analysis and reporting only) - AENT:

- < **All applicant institutions requesting the Statutory Funding Preference must complete Table 4A (please see the Statutory Funding Preference information in this application).**
- < **All applicant institutions must complete Table 4B; if there is no data to report then enter “0” in the Grand Total column.**
- < Do not make changes to Table 4A or Table 4B.
- < **Do not include Nurse Anesthetist graduates on Table 4A or Table 4B. The AENT Program also supports 1st year nurse anesthetist students only.**
- < Although a graduate’s practice site may qualify under more than one category, each individual graduate / graduate supported should be reported only once. For example: a rural health clinic may be located in a primary care health professional shortage area.
- < Enter the number of graduates / graduates supported employed in each of the settings listed in the appropriate columns. For each setting, enter the grand total in the “**Grand Total**” column. The grand total column must reflect the total of the numbers reported in each row. Numbers omitted in the row(s) of Table 4A or Table 4B **will not** be counted.

TABLE 4A - AENT: GRADUATE DATA - RURAL, UNDERSERVED, OR PUBLIC HEALTH

Data on Table 4A should reflect **graduate totals** for the Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse, Nurse-Midwifery Certificate, Nurse-Midwifery Master’s, Nurse-Midwifery Post-BSN to Doctoral, and Doctoral students who completed program/degree requirements between 07/01/09 and 6/30/10.

Complete **Table 4A**, as appropriate, providing data on the number of graduates in academic year **7/1/09-6/30/10** who spend at least 50 percent of their work-time in clinical practice sites substantially benefiting rural or underserved populations, or in State or local health departments. **Each graduate is to be counted only once**. Table 4A is also used to determine if the institution meets the Statutory Funding Preference.

In the “**Total Number of Graduates Supported by Traineeship Working in These Settings**” row, enter the total number of graduates in each appropriate identified column. Enter the grand total: The grand total column must reflect the total of the numbers reported in each row. Numbers omitted in this row of Table 4A will **not** be counted. This is a subset of “**Total Number of Graduates**”.

In the “**Total Number of Graduates**” row, enter the total number of graduates, which are reported on Tables 1-3, who completed degree requirements between 7/01/09 and 6/30/10 in the appropriate column. Enter the grand total: The grand total column must reflect the total of the numbers reported in each row. Numbers omitted in this row of Table 4A will **not** be counted.

IMPORTANT NOTE:

The total number of graduates reported in the “**Grand Total**” column MUST be consistent with the combined “Total Number of Graduates” reported on Tables 1-3.

This table reflects the combined totals of the Doctoral degree levels.

In the “**Percentage of Graduates in these Settings**” row, enter the percentage of graduates working in the identified settings in the “**Grand Total**” column. Percentage of Graduates in these Settings = Total Number of Graduates in these Settings (from 07/01/09 – 06/30/10) divided by Total Number of Graduates (from 07/01/09 – 06/30/10).

To reiterate, **all applicant institutions requesting the Statutory Funding Preference must complete Table 4A (please see the Statutory Funding Preference information in this application).**

TABLE 4B - AENT: GRADUATES SUPPORTED BY TRAINEESHIP DATA - RURAL, UNDERSERVED, OR PUBLIC HEALTH

Data on Table 4B should reflect graduates supported by traineeship totals for the Clinical Nurse Specialist, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Administrator, Nurse Educator, Public Health Nurse, Nurse-Midwifery Certificate, Nurse-Midwifery Master’s, Nurse-Midwifery Post-BSN to Doctoral, and Doctoral students who completed program/degree requirements and were supported by the AENT Program between 07/01/09 and 6/30/10.

Complete Table 4B, as appropriate, providing data on the number of graduates supported by traineeships in academic year **7/1/09-6/30/10** who spend at least 50 percent of their work-time in clinical practice sites substantially benefiting rural or underserved populations, or in State or local health departments. **Each graduate is to be counted only once.** Table 4B is for data analysis and reporting; thus, **all applicant institutions must complete Table 4B; if there is no data to report then enter “0” in the Grand Total column.**

In the “**Total Number of Graduates Supported by Traineeship Working in these Settings (from 07/01/09 to 06/30/10)**” row, enter the total number of graduates who received traineeship support and completed degree requirements between 7/01/09 and 6/30/10 and worked in the identified setting. **This table is for data analysis and data collection; it is imperative that all applicant institutions complete Table 4B.** This is a subset of “**Total Number of Graduates**”.

IMPORTANT NOTE:

The total number of graduates supported by traineeship reported in the “**Grand Total**” column MUST be consistent with the combined “Total Number of Graduates Supported” figures reported on Tables 1-3.

This table reflects the combined totals of the Doctoral degree levels.

TABLE 5 - AENT: ETHNICITY DATA

Did your program have **enrollees, students supported, graduates, or graduates supported** of “Hispanic/Latino” **and/or** “Non Hispanic/Latino” ethnicity between July 1, 2009 and June 30, 2010?

- ☐ Yes, I do have data for **all** enrollees, students supported, graduates, or graduates supported who are Hispanic/Latino.
- ☐ Yes, I do have data for **all** enrollees, students supported, graduates, or graduates supported who are Non Hispanic/Latino.
- ☐ No, I **do not** have data for **all**, but only have data for **few**.
- ☐ No, I do not have data at **all**, the entire data is **unreported/unavailable**.

	Hispanic/Latino	Non Hispanic/Latino	Unreported/ Unavailable	TOTAL
ENROLLEES (As of 10/15/10)				
STUDENTS SUPPORTED (7/1/09- 6/30/10)				
GRADUATES (7/1/09- 6/30/10)				
GRADUATES SUPPORTED (7/1/09- 6/30/10)				

NOTE: The AENT Program supports first year NAT students only; therefore, do not report NAT graduates on this table.

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Instructions for completing Table 5: Ethnicity Data

☐ Yes, I do have data for **all** enrollees, students supported, graduates, or graduates supported who are Hispanic/Latino

☐ Yes, I do have data for **all** enrollees, students supported, graduates, or graduates supported who are Non Hispanic/Latino.

If the above options are checked, enter data for the first two columns and fill in the corresponding Race data in tables 6A and 6B.

☐ No, I **do not** have data for **all**, but only have data for **few**.

If this option is checked, enter data for all the three columns and fill in the corresponding Race data in tables 6A, 6B and 6C.

☐ No, I do not have data at **all**, the entire data is **unreported/unavailable**

If this option is checked, enter data under the third column only and fill in the corresponding Race data in Table 6C.

Provide the **total number of enrollees, students supported, graduates and graduates supported**, that were reported on Tables 1-3, by ethnicity category. Instructions for completing Table 5 are below.

Using the data reported on Tables 1, 2, and 3, enter the total number of **“Enrollees”, Students Supported, Graduates and Graduates Supported**” by ethnicity on Table 5. All data should be captured in one of three ethnicity categories: “Hispanic / Latino”, “Non Hispanic / Latino” or “Unreported / Unavailable”. The Total column on this Table 5 must reconcile with the Total numbers reported on Tables 1, 2 and 3.

- < Hispanic/Latino is considered an ethnicity. On the following rows **“Enrollees, Students Supported, Graduates and Graduates Supported”** please enter the number of Hispanics / Latinos in the first column and the number of Non Hispanics / Latinos in the second Column.
- < If your institution does not capture data on ethnicity, or the data requested is voluntary and therefore incomplete, please report the unavailable and/or unreported data in the third column of Table 5.
- < “Hispanic/Latino” racial categories (White, Black, Asian, Native American or More Than One Race) will be requested on Table 6A.
- < “Non Hispanic/Latino” racial categories (White, Black, Asian, Native American or More Than One Race) will be requested on Table 6B.
- < Enter the total number of **“Enrollees”** by ethnicity as of 10/15/10. Also include only full-time, first-year nurse anesthetist enrollees in the total number of **“Enrollees”**.
- < Enter the total number of **“Students Supported”** by ethnicity as of 7/1/09-6/30/10.
- < Enter the total number of **“Graduates”** who completed degree requirements between 7/01/09 and 6/30/10. Post Nursing Master’s Certificate students who complete all program requirements are recognized as graduates and must be counted on Table 5.
- < Enter the total number of **“Graduates Supported”** by ethnicity as of 7/1/09-6/30/10.

The **TOTAL** for each row is Hispanic/Latino + Non Hispanic/Latino + Unreported/Unavailable columns.

IMPORTANT NOTES: Enrollees, Students Supported, Graduates and Graduates Supported are the total numbers from Tables 1, 2, 3 separated and reported as Hispanic/Latino and Non Hispanic/ Latino. If your institution does not track this data or you do not know the ethnicity of the student, include those numbers in the Unreported/Unavailable column.

Table 6 – AENT: RACE / DISADVANTAGED DATA

A. HISPANIC / LATINO ETHNICITY DATA BY RACE

Provide the total number of **Hispanic / Latino** enrollees, students supported, graduates and graduates supported reported on Tables 1-3 and the first column of Table 5 by racial category. Instructions for completing Table 6A are below.

	American Indian or Alaska Native	Underrepresented Asian Subgroup*	Asian (Not Under- Represented)	Black or African American	Native Hawaiian or Other Pacific Islander	White: Disadvantaged	White: Not- Disadvantaged	More than one race	Unreported/Unavailable	TOTAL
ENROLLEES (As of 10/15/10)										
STUDENTS SUPPORTED (7/1/09-6/30/10)										
GRADUATES (7/1/09- 6/30/10)										
GRADUATES SUPPORTED (7/1/09- 6/30/10)										

*Any Asian **other than** Chinese, Filipino, Japanese, Korean, Asian Indian, or Thai.

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Instructions for completing Table 6A: AENT: RACE / DISADVANTAGED DATA

- < Enter the total number of Hispanic / Latino “**Enrollees**” by race and the “total” for students enrolled as of 10/15/10. Also include **only** full-time, first-year nurse anesthetist enrollees in the total number.
- < Enter the total number of Hispanic / Latino “**Students Supported**” by race for students supported as of **7/1/09-6/30/10**.
- < Enter the total number of Hispanic / Latino “**Graduates**” by race and the “total” for graduates who completed degree requirements between **7/01/09 and 6/30/10**. Post Nursing Master’s Certificate students who complete all program requirements are recognized as graduates and must be counted on Table 6.
- < Enter the total number of Hispanic / Latino “**Graduates Supported**” by race for graduates supported as of **7/1/09-6/30/10**.
- < **TOTAL** columns for “**Enrollees, Students Supported, Graduates and Graduates Supported**” should each reconcile with the total applicable specific data reported on Tables 1, 2, and 3.

IMPORTANT NOTES:

Indicate and include the Race of all Hispanics / Latinos reported on Table 5 (first column) in each row on Table 6A as appropriate. A Hispanic / Latino can be White, Black, Asian, Native American or More Than One Race.

Table 6 – AENT: RACE / DISADVANTAGED DATA

B. NON HISPANIC/LATINO ETHNICITY DATA BY RACE

Provide the total number of **Non Hispanic /Latino** enrollees, students supported, graduates and graduates supported reported on Tables 1-3 and the second column of Table 5 by racial category. Instructions for completing Table 6B are below.

	American Indian or Alaska Native	Underrepresented Asian Subgroup*	Asian (Not Under- Represented)	Black or African American	Native Hawaiian or Other Pacific Islander	White: Disadvantaged	White: Not- Disadvantaged	More than one race	Unreported/Unavailable	TOTAL
ENROLLEES (As of 10/15/10)										
STUDENTS SUPPORTED (7/1/09-6/30/10)										
GRADUATES (7/1/09- 6/30/10)										
GRADUATES SUPPORTED (7/1/09- 6/30/10)										

*Any Asian **other than** Chinese, Filipino, Japanese, Korean, Asian Indian, or Thai.

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Instructions for completing Table 6B: AENT: RACE / DISADVANTAGED DATA

- < Enter the total number of “**Non Hispanic / Latino Enrollees**” by race and the “total” for students enrolled as of 10/15/10 Also include only full-time, first-year nurse anesthetist enrollees in the total number.
- < Enter the total number of “**Non Hispanic / Latino Students Supported**” by race for students supported as of 7/1/09-6/30/10.
- < Enter the total number of “**Non Hispanic/ Latino Graduates**” by race and the “total” for graduates who completed degree requirements between 7/01/09 and 6/30/10. Post Nursing Master’s Certificate students who complete all program requirements are recognized as graduates and must be counted on Table 6.
- < Enter the total number of “**Non Hispanic/ Latino Graduates Supported**” by race for graduates supported as of 7/1/09-6/30/10.
- < **TOTAL** columns for “**Non Hispanic / Latino Enrollees, Students Supported, Graduates and Graduates Supported**” should reconcile with the corresponding data reported on Tables 1, 2, and 3.

IMPORTANT NOTES:

Indicate and include the Race of all Non Hispanics/Latinos reported on Table 5 (second column) in each row on Table 6B as appropriate. A Non Hispanic/ Latino can be White, Black, Asian, Native American or More Than One Race.

Table 6 – AENT: RACE / DISADVANTAGED DATA

C. UNREPORTED / UNAVAILABLE ETHNICITY DATA BY RACE

Provide the **total number of Unreported / Unavailable Ethnicity** enrollees, students supported, graduates and graduates supported reported on Tables 1-3 and the third column of Table 5 by racial category. Instructions for completing Table 6C are below.

	American Indian or Alaska Native	Underrepresented Asian Subgroup*	Asian (Not Under- Represented)	Black or African American	Native Hawaiian or Other Pacific Islander	White: Disadvantaged	White: Not- Disadvantaged	More than one race	Unreported/Unavailable	TOTAL
ENROLLEES (As of 10/15/10)										
STUDENTS SUPPORTED (7/1/09- 6/30/10)										
GRADUATES (7/1/09- 6/30/10)										
GRADUATES SUPPORTED (7/1/09- 6/30/10)										

*Any Asian **other than** Chinese, Filipino, Japanese, Korean, Asian Indian, or Thai.

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Instructions for completing Table 6C: AENT: RACE / DISADVANTAGED DATA

- < Enter the total number of “**Unreported / Unavailable Ethnicity**” by race and the “total” for students enrolled as of 10/15/10. Also include only full-time, first-year nurse anesthetist enrollees in the total number.
- < Enter the total number of “**Unreported / Unavailable Ethnicity**” by race for students supported as of 7/1/09-6/30/10.
- < Enter the total number of “**Unreported / Unavailable Ethnicity**” by race and the “total” for graduates who completed degree requirements between 7/01/09 and 6/30/10. Post Nursing Master’s Certificate students who complete all program requirements are recognized as graduates and must be counted on Table 6.
- < Enter the total number of “**Unreported / Unavailable Ethnicity**” by race for graduates supported as of 7/1/09-6/30/10.
- < **TOTAL** columns for “**Unreported / Unavailable Ethnicity Enrollees, Students Supported, Graduates and Graduates Supported**” should reconcile with the corresponding data reported on Tables 1, 2, and 3.

IMPORTANT NOTES:

Indicate and include the Race of all “Unreported / Unavailable Ethnicity” persons reported on Table 5 (third column) in each row on Table 6C as appropriate.

Use the following definitions from the OMB standards for the classification of Federal data on ethnicity and race for the identified ethnicity / racial categories:

- < **American Indian or Alaska Native:** a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- < **Asian:** a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- < **Black or African American:** a person having origins in any of the black racial groups of Africa.
- < **Hispanic/Latino:** a person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin regardless of race. The term “Spanish Origin” can be used in addition to “Hispanic/Latino”.
- < **Native Hawaiian or Other Pacific Islander:** a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- < **White:** a person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- < **More than one race:** a person reporting more than one race.

Use the following definition for low-income populations to determine Disadvantaged status:

The Secretary defines a “low-income family” for programs included in Titles III, VII and VIII of the Public Health Service Act as having an annual income that does not exceed 200 percent of the Department's poverty guidelines. A family is a group of two or more individuals related by birth,

marriage, or adoption who live together or an individual who is not living with any relatives. Most HRSA programs use the income of the student's parents to compute low income status, while a few programs, depending upon the legislative intent of the program, programmatic purpose of the low income level, as well as the age and circumstances of the average participant, will use the student's family as long as he or she is not listed as a dependent upon the parents' tax form. Each program will announce the rationale and choice of methodology for determining low income levels in their program guidance.

The Department's poverty guidelines are based on poverty thresholds published by the U.S. Bureau of the Census, adjusted annually for changes in the Consumer Price Index. The Secretary annually adjusts the low-income levels based on the Department's poverty guidelines and makes them available to persons responsible for administering the applicable programs.

The poverty guidelines for the remainder of 2010 are provided below. The guideline figures shown represent annual income. These guidelines will remain in effect until HHS publishes the 2011 poverty guidelines, which is expected in late January 2011.

2010 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA

Persons in family Poverty guideline	
1	\$10,830
2	14,570
3	18,310
4	22,050
5	25,790
6	29,530
7	33,270
8	37,010

For families with more than 8 persons, add \$3,740 for each additional person.

2010 POVERTY GUIDELINES FOR ALASKA

Persons in family Poverty guideline	
1	\$13,530
2	18,210
3	22,890
4	27,570
5	32,250
6	36,930
7	41,610
8	46,290

For families with more than 8 persons, add \$4,680 for each additional person.

2010 POVERTY GUIDELINES FOR HAWAII

Persons in family Poverty guideline

1	\$12,460
2	16,760
3	21,060
4	25,360
5	29,660
6	33,960
7	38,260
8	42,560

For families with more than 8 persons, add \$4,300 for each additional person.

Dated: July 30, 2010.

AENT: TABLE 7 - Age and Gender Data

Age and Gender			
	Males	Females	Total
Under 20			
Enrollees (As of 10/15/10)			
Students Supported (7/1/09-6/30/10)			
Graduates (7/1/09-6/30/10)			
Graduates Supported (7/1/09-6/30/10)			
20-29			
Enrollees (As of 10/15/10)			
Students Supported (7/1/09-6/30/10)			
Graduates (7/1/09-6/30/10)			
Graduates Supported (7/1/09-6/30/10)			
30-39			
Enrollees (As of 10/15/10)			
Students Supported (7/1/09-6/30/10)			
Graduates (7/1/09-6/30/10)			
Graduates Supported (7/1/09-6/30/10)			
40-49			
Enrollees (As of 10/15/10)			
Students Supported (7/1/09-6/30/10)			
Graduates (7/1/09-6/30/10)			
Graduates Supported (7/1/09-6/30/10)			
50-59			
Enrollees (As of 10/15/10)			
Students Supported (7/1/09-6/30/10)			
Graduates (7/1/09-6/30/10)			
Graduates Supported (7/1/09-6/30/10)			
60 or older			
Enrollees (As of 10/15/10)			
Students Supported (7/1/09-6/30/10)			
Graduates (7/1/09-6/30/10)			
Graduates Supported (7/1/09-6/30/10)			
UNREPORTED/UNAVAILABLE			
Enrollees (As of 10/15/10)			
Students Supported (7/1/09-6/30/10)			
Graduates (7/1/09-6/30/10)			
Graduates Supported (7/1/09-6/30/10)			
TOTAL			

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Instructions for completing Table 7:

Provide data on the age and gender of **all Students in AENT Programs** between July 1, 2009 and June 30, 2010. **Count each student only once. If data is not collected by Age and Gender, include in the appropriate Unreported/Unavailable section.**

IMPORTANT NOTES:

Do not double count a student as both an Enrollee and a Graduate.

- < **Enrollees** – Students that are enrolled in an Advanced Education Nursing Program and have not graduated or completed the program by 10/15/10.
- < **Graduates** – Students who have successfully completed all educational requirements for a specified Advanced Education Nursing Program of study or have met the eligibility requirements for an Advanced Education Nursing Master’s or Doctoral degree or Post-Nursing Master’s Certificate between 07/01/09-06/30/10.
- < **TOTAL** columns for “**Enrollees, Students Supported, Graduates and Graduates Supported**” by age and gender should each reconcile with the total applicable specific data reported on Tables 1, 2, and 3.
 - < Enter the total number of “**Enrollees**” “**Students Supported**”, “**Graduates**” and “**Graduates Supported**” by age and gender for each category.
 - < Enter the total number of “**Enrollees**” by age and gender enrolled **as of 10/15/2010.**
 - < Enter the total number of “**Students Supported**” by age and gender and the “total” for students supported **7/01/2009 and 6/30/2010.**
 - < Enter the total number of “**Graduates**” by age and gender and the “total” for graduates who completed degree requirements between **7/01/2009 and 6/30/2010.**
 - < Enter the total number of “**Graduates Supported**” by age and gender and the “total” for graduates supported that completed degree requirements between **7/01/2009 and 6/30/2010.**

Table 8 – AENT: Projected Master’s and Post Nursing Master’s Certificate Data (Clinical Nurse Specialist, Nurse Administrator, Primary Care Nurse Practitioner, Acute Care Nurse Practitioner, Nurse Anesthetist, Nurse Educator, Public Health Nurse, Nurse Midwifery)

A. Total # of Projected Master Degree and Post Nursing Master’s Certificate Student Enrollment and Master Degree and Post Nursing Master’s Certificate Students Projected to Receive Traineeship Support by Role by 10/15/2011

IDENTIFY ENROLLMENT AND TRAINEESHIP DATA	Clinical Nurse Specialist		Nurse Administrator		Primary Care Nurse Practitioner		Acute Care Nurse Practitioner		Nurse Anesthetist		Nurse Educator		Public Health Nurse		Nurse Midwifery	
	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT
Total # of Projected Master Degree Student Enrollment By 10/15/2011																
Total # of Master Degree Students Projected to Receive Traineeship Support by 10/15/2011																
Total # of Projected Post Nursing Master’s Certificate Student Enrollment by 10/15/2011																
Total # of Post Nursing Master’s Certificate Projected to Receive Traineeship Support by 10/15/2011																

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Instructions for Completing Table 8A – AENT: Total # of Projected Master Degree and Post Nursing Master’s Certificate Student Enrollment and Master Degree and Post Nursing Master’s Certificate Students Projected to Receive Traineeship Support by Role by 10/15/

- < For **“Total # of Projected Master Degree Student Enrollment By 10/15/2011”** enter the total number of full-time and part-time master degree students projected to enroll in one of the advanced education nursing roles by 10/15/2011.
- < For **“Total # of Master Degree Students Projected to Receive Traineeship Support by 10/15/2011”** enter the total number of full-time and part-time students by role who are projected to receive traineeship support by 10/15/2011.
- < For **“Total # of Projected Post Nursing Master’s Certificate Student Enrollment by 10/15/2011”** enter the total number of full-time and part-time Post Nursing Master’s Certificate students projected to enroll in one of the advanced education nursing roles by 10/15/2011.
- < For **“Total # of Post Nursing Master’s Certificate Projected to Receive Traineeship Support by 10/15/2011”** enter the total number of full-time and part-time Post Nursing Master’s Certificate students by role who are projected to receive traineeship support by 10/15/2011.

Table 8 – AENT: Projected Doctoral Data: Projected Doctoral Degree Student Enrollment and Doctoral Degree Students Projected to Receive Traineeship Support (Post-BSN to PhD, Post-MSN to PhD, DNSc/DNS, Post-BSN to DNP/DrNP, Post-MSN to DNP/DrNP, Post-BSN to DNAP, Post-MSN to DNAP, Other)

B. Total # of Projected Doctoral Degree Student Enrollment and Doctoral Degree Students Projected to Receive Traineeship Support by Education Level by 10/15/2011

IDENTIFY ENROLLMENT AND TRAINEESHIP DATA	Post-BSN to PhD		Post-MSN to PhD		DNSc / DNS		Post-BSN to DNP/DrNP		Post-MSN to DNP/DrNP		Post-BSN to DNAP		Post-MSN to DNAP		Other (specify)	
	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT	FT	PT
Total # of Doctoral Degree Student Enrollment by 10/15/2011																
Total # of Doctoral Degree Students Projected to Receive Traineeship Supported by 10/15/2011																

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Instructions for Completing Table 8B – AENT: Total # Projected Doctoral Degree Student Enrollment Data and Doctoral Degree Students Projected to receive Traineeship Support by Education Level by 10/15/2011

- < For “**Total # of Doctoral Degree Student Enrollment by 10/15/2011**”, enter the total number of full-time and part-time doctoral degree students projected to enroll by 10/15/2011.

- < For “**Total # of Doctoral Degree Students Projected to Receive Traineeship Supported by 10/15/2011**”, enter the total number of full-time and part-time doctoral degree students projected to receive traineeship support by 10/15/2011.