SOUTH DAKOTA BOARD OF REGENTS
ACADEMIC AFFAIRS FORMS

Substantive Program Modification Form

UNIVERSITY:	**SDSU**
CURRENT PROGRAM DEGREE:	**DNP**
CURRENT PROGRAM MAJOR/MINOR:	**Nursing**
CURRENT SPECIALIZATION:	**Family Nurse Practitioner Specialization**
CIP CODE:	**51.3801 ï Major CIP** **51.3805 ï Specialization CIP**
UNIVERSITY DEPARTMENT:	**Nursing**
BANNER DEPARTMENT CODE:	**SNUR**
UNIVERSITY COLLEGE:	**College of Nursing**
BANNER COLLEGE CODE:	**3N**

University Approval

Dennis D. Hedge	12/17/2024
Vice President of Academic Affairs or President of the University	Date

1.

4.

institution following the approve of the program change? Please explain:

7. **Primary Aspects of the Modification:**

Pref.	Num.	Title	Cr. Hrs.	Pref.	Num.	Title	Cr. Hrs.