

ANCC SCHOOL CODE LISTING

Add/Change of School Name Request Form

School/College/University Name		ANCC School Code #	
School Address	City	State	Zip Code
Requested Change - Updated Name of School/University To			
Name of Primary Contact		Title/Position	
Phone Number		Email Address	

School Accreditation Information

Accreditor: ACEN AACN/CCNE NLN CNEA Other: _____

Accreditation Expiration Date: _____

Program Offered

Check all that apply: MSN DNP Post-Graduate

List Specific NP Programs offered (CNS, Nurse Executive, Nurse Executive-Advanced, Nursing Professional Development, and Informatics Nursing).

Signature (Acknowledgement that the information entered above is true and correct)

School Representative Signature

Name Title

For Official ANCC Staff Use Only:

New School Code #: _____

Date Updated: _____