**Application for Membership to the Nursing Education Xchange Program (NEXus)**

**Date:**

**Application for:**  
- Academic Collaborator Member  
- Academic Affiliate Member

**Courses offered for:**  
- PhD students  
- DNP students  
- Both

**Institution:**

**Address:**

**Contact name:**

**Contact title:**

**Contact email:**

**Contact tel/fax:**

**Academic unit (semester or quarter):**

**Area(s) of interest (check all that apply):**  
- Ethics and Interprofessional Collaboration  
- Systems, Leadership, Informatics and Policy  
- Diverse and Vulnerable Populations  
- Chronic and Disabling Conditions and Palliative Care  
- Scholarship and Writing  
- Research Methodology  
- Nursing Education  
- Advance Nursing Practice  
- Gerontology  
- Nursing Knowledge Development: Theory, Philosophy, and Science  
- Scientific Underpinnings for Advanced Nursing Practice  
- Other __________________________

<table>
<thead>
<tr>
<th>Total number of enrolled PhD students:</th>
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<tbody>
<tr>
<td>Number of PhD students admitted this academic year:</td>
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<tr>
<td>Total number of enrolled DNP students:</td>
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<tr>
<td>Number of DNP students admitted this academic year:</td>
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<td>Major emphasis:</td>
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<td>Method of instruction/platform (example: Blackboard, Sakai, WebCT, etc.):</td>
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Does your CON/SON serve Medically Underserved Areas/Populations (MUA/P)?  
- YES  
- NO

Does it serve Health Professional Shortage Areas (HPSAs) and/or frontier areas?  
- YES  
- NO

If yes, please explain/identify the HPSAs, MUA/Ps and/or frontier areas served?  (Please specify)

Submit a letter of interest identifying the following:

1. What your institution could bring to NEXus (online course exchange) to enhance its mission.
2. What resources, including faculty, you have available at your institution to participate in NEXus.

Other Expectations:

1. Agree to common price and annual membership fees.
2. Follow the New Member Checklist and complete each item as requested.

**Return to:**
Paula McNeil, RN, MS  
Project Director-Western Institute of Nursing/NEXus  
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Email: mcneilp@ohsu.edu