



# ARKANSAS STATE BOARD OF NURSING

1123 SOUTH UNIVERSITY AVENUE, SUITE 800  
LITTLE ROCK, ARKANSAS 72204  
(501) 686-2700

## PUBLICATIONS ORDER FORM

ITEMS DESCRIPTION	QUANTITY	COST	TOTAL
Nurse Practice Act & Rules	_____	\$8.00 ea.	_____
8 1/2 x 11 Initial License Certificate (Available to Arkansas Licensees only)	_____	\$20.00 ea.	_____
License Type: _____ # _____			
License Type: _____ # _____			
Position Statements	_____	\$5.00	_____
Annual Report	_____	\$20.00 ea.	_____
		TOTAL	_____
		AMOUNT ENCLOSED	_____
		<i>(Money order, cashier's check or in-state check only)</i> <i>(Fees are non-refundable)</i>	

*Please allow 4-6 weeks for delivery*

Please complete the following: **(PLEASE PRINT)**

\_\_\_\_\_

Last Name	First Name	Middle Name
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License Number or Social Security Number
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Address	Apt. No.
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City	State	Zip	Daytime Phone Number
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Send with payment to: Arkansas State Board of Nursing  
1123 S. University Ave., Suite 800  
Little Rock, AR 72204