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# KENTUCKY BOARD OF NURSING

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Louisville, Kentucky 40222-5172  
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Matt Bevin  
Governor

## Probation/Parole/Drug Court Report

Participant Name: \_\_\_\_\_

License Number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

- KARE for Nurses Program
- Probation

Evaluation for the month(s) of \_\_\_\_\_

Nurse has appeared at all required report times:

- Yes
- No

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nurse is complying with all requirements of Probation/Parole.

- Yes
- No

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

All drug screens have all been negative.

- Yes
- No

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Officer

\_\_\_\_\_  
Date

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No: \_\_\_\_\_

10/27/2011; 2/10/2015; 12/9/2015  
jmc