

Online Renewal Process

Locate “Renew” (see green checkmark) then click “Read More”.

The screenshot shows the website header with the phone number 785-296-4929, social media icons, and a navigation menu including HOME, LICENSE, EDUCATION, LEGAL, FORMS, RESOURCES, NPA, DISCIPLINE, and BOARD. Below the header is a large image of a smiling woman with the text "Welcome to the Kansas State Board of Nursing Est. 1913". The main content area features four columns: "Apply" (with a "GET STARTED" button), "Renew" (with a green checkmark above it and a "READ MORE" button being clicked by a hand cursor), "Application Status" (with a "VIEW NOW" button), and "Discipline" (with a "CASE LIST" button).

When the Renew License page opens, read the information provided to assure you have met the renewal requirements. Once done reading click “Online Licnese Renewals” (see below). This will take you to the online application system.

The screenshot shows the top navigation bar with the phone number 785-296-4929, social media icons for Facebook and Twitter, and a 'Staff Directory' link. The main navigation menu includes: HOME, LICENSE (with a dropdown arrow), EDUCATION (with a dropdown arrow), LEGAL (with a dropdown arrow), FORMS, RESOURCES (with a dropdown arrow), NPA, DISCIPLINE, and BOARD (with a dropdown arrow). The page title is 'Renew License'. Below the title, under the heading 'To renew online:', there is a list of requirements:

- You must have access to the Internet, a checking account or credit card, and register an account online.
- Log onto [Online License Renewals](#) and follow the directions on the screen.
- If you have not already created your own unique User ID and Password you will need to Register a Person before you can begin the Renewal process.

There are some cases where individuals are not eligible to use the online license renewal process at this time. Do not proceed online if:

- Initiating or Renewing Inactive license status
- Initiating or Renewing an Exempt license
- **You do not have the required and preapproved 30 hours of continuing nursing education (CNE).**
- **If you have college courses that have not been approved through the Individual Offering of Approval (IOA) process.**

You should get a page similar to the one below. Enter your User ID and Password (if you are unsure of your User ID or don't remember your Password, click on “Register a Person”, there is a help tool to assist you if needed.) then click the “Login” button at bottom of window.

The screenshot shows a 'Menu' on the left with a link to 'Register a Person'. The main heading is 'Welcome to the Kansas Board of Nursing'. Below the heading, the text reads: 'This site was created to give Nursing licensees the opportunity to manage their licenses online.' It then says: 'If you haven't already registered and wish to submit an application, renew an existing practitioners license or address changes, or if you are unsure of your User ID or Password, click [here](#) to register (or click the **register a person** link on the left).' There are two input fields: 'User Id:' and 'Password:'. Below these is a 'Login' button. At the bottom, there is a link: 'Click [here](#) here if you have forgotten your password.'

When you are logged in you should have a screen similar to the one below. Select and click “Renew License” from the menu. (If you don’t have a license listed to renew and it is within your renewal period, call the board office.)

Menu

- Initial Application
- Renew License**
- Address Change
- Reinstate License
- Cart
- Logout

Licensing Home Page

The list below displays all licenses currently held by you and all licenses currently being applied for. To renew a license, click the **renew license** link on the left.

Personal Information

bob doe
200 8th Street
Wichita, KS 67212
United States

Phone: 7858175936
Cell:
Email: tony.blubaugh@ksbn.state.ks.us

Licenses

Clinical Nurse Specialist	View Checklist
License Number:	License Status: Pending
Issue Date:	Expiration Date: 12/31/2015

You should get the below option behind the license type available to renew. Click on the word “continue”.

Menu

- License Home Page
- Logout

Application for License Renewal

Select the license you would like to renew from the list below otherwise all licenses will be renewed. If you have multiple renewable license, you can only submit one renewal application at a time. Complete the process for each license you would like to renew

There are some cases where individuals are not eligible to use the online license renewal process. If you have questions, please contact the board.

Renewable Licenses

Registered Nurse	Continue		
License Number:	14-1234567-021	License Status:	Active
Issued:	6/29/2015	Expiration Date:	2/28/2017

Be sure to **read all the information provided** by the board regarding your license renewal. Once you've read everything, click the "next" button located at the bottom of the window.

Menu
<input checked="" type="checkbox"/> Demographics*
<input checked="" type="checkbox"/> Questions
<input checked="" type="checkbox"/> Finish
License Home Page
Logout

License Renewal Application

Getting Started

The accepted payment method is electronic check or credit/debit card (VISA, MasterCard, Discover or American Express.) There is a processing fee assessed for each online transaction.

There are some cases where individuals are not eligible to use the online license renewal process at this time. **DO NOT** proceed online if:

- Initiating or Renewing Inactive license status
- Initiating or Renewing an Exempt license
- **You do not have the required and preapproved 30 hours of continuing nursing education (CNE). This includes college courses and Individual Offering of Approval (IOA).**

Subject to reporting:

- All felonies.

And the following categories of misdemeanors:

- Alcohol;
- any drugs;
- deceit;
- dishonesty;
- endangerment of a child or vulnerable adult;
- falsification;
- fraud;
- misrepresentation;
- physical, emotional, financial, or sexual exploitation of a child or vulnerable adult;
- physical or verbal abuse;
- theft;
- violation of a protection from abuse order or protection from stalking order; or any action arising out of a violation of any state or federal regulation.

Upon completion of the online renewal process, you will receive a confirmation screen. Without the confirmation number, it is possible the online renewal did not complete. You may contact Kansas.gov at 1-800-452-6727 or email KSBN at renewals@ksbn.state.ks.us for assistance.



Update your personal information (address, phone and email) as well as any changes to licenses held in other states. If you change your address, you may need to select the city from the “Get City from Zip” list. Then click the “next” button located at bottom of window.

Menu

- Demographics
- Questions
- Finish
- License Home Page
- Logout

Update Person Address

Update the information in the form below and press the update button to save the changes.
NOTE: Required fields are marked with an asterisk (*).

Name

Full Name: DOB DOE
 Birth Date: XXXXXXXXXX
 SSN: XXXXXXXXXX

List other state, territories, or countries in which you have been licensed

Out of State Licenses				
License Number	License Type	Licensed By	License Status	Delete
				<input type="checkbox"/>

Address

Country: United States Phone: 7856178936
ex. 3015551212
 Line 1: 200 8th Street Fax: 7852965935
 Line 2: Email: tony.blubaug
 City: Wichita
Foreign Addresses:
 Enter city, region, postal code
 County: Sedgwick
 State: KS
 ZipCode: 67212 Get City from Zip
ex. 02705 or 027051234

Next

Be sure to answer all question, if any are not answered the system will not let you move on. (ex. Even if you answer “no” to the one of the misdemeanor/felony questions, you still must answer the question is this a new conviction.) Once you have answered ALL questions you click the “submit” button. If the system does not move on, then you’ll need to check your questions to see which one you did not answer “yes or no” too.

Menu	
<input checked="" type="checkbox"/>	Demographics*
<input type="checkbox"/>	Questions
<input type="checkbox"/>	Finish
License Home Page	
Logout	

Application Questions

Please answer the following question(s) by choosing the respective answer(s) from the drop-down menu(s). Click the **submit** button when you have answered the question(s).

Question	Answer
Have you ever been convicted of a misdemeanor? Convictions of speeding or parking violations need not be reported.	Please Choose ▾
Is this a new misdemeanor conviction not previously reported? (If answer is yes mail a certified copy of court documents and an explanatory letter for each conviction. Do not send a copy.)	Please Choose ▾
Have you ever been convicted of a felony?	Please Choose ▾
Is this a new felony conviction not previously reported? (If answer is yes mail a certified copy of court documents and an explanatory letter for each conviction. Do not send a copy.)	Please Choose ▾
Are criminal proceedings pending in any federal or state court? (If yes, mail an accompanying explanatory letter.)	Please Choose ▾
Is an investigation and/or disciplinary action pending against any license, certification or registration (nursing or other)? (If yes mail an accompanying explanatory letter.)	Please Choose ▾
Has any license, certification or registration (nursing or other) ever been denied, revoked, suspended, limited or disciplinary action taken by a licensing authority of any state, agency of the US government, territory of the US or country?	Please Choose ▾
Is this a new action not previously reported? (If yes mail a certified copy of board order and or governmental agency disciplinary action and an explanatory letter for each action. Do not send a copy.)	Please Choose ▾
Please read carefully and answer the following Continuing Education question. If you do not have the 30 hours of CNE as required in K.S.A. 65-1117 do not renew until you have the required hours.	
Have you obtained 30 hours of CNE for relicensure as required in KSA 65-1117?	Please Choose ▾

If you have been convicted of a felony submit a certified copy of the court order outlining the charge(s), conviction(s) and sentencing order(s). A license will not be issued until the Kansas Board of Nursing has fully reviewed the required documentation.



The "Application Summary" page is for you to double check your personal information and answers to the questions. **THIS IS THE ONLY PLACE YOU CAN GO BACK AND CHANGE YOUR ANSWERS!** Once you click the "Add to Cart" button, located at the bottom of the window, you cannot change your answers.

Menu	
<input checked="" type="checkbox"/>	Demographics*
<input checked="" type="checkbox"/>	Questions*
<input type="checkbox"/>	Finish
License Home Page	
Logout	

Application Summary

The changes you have made are listed below. Please review this information carefully to ensure it is correct. You may go back to any step in this process by clicking the corresponding link on the left.

When you have verified all information, click the **Submit** button to pay all applicable fees and submit your application.

Personal Information
Name: bob doe

Licensee Address:

900 Jackson St. Suite 1052 Topeka, KS 66612 tony.blubaugh@ksosn.state.ks.us 7888175936
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Licenses

Registered Nurse			
License Number:	14-1234567-021	License Status:	Active
Issued:	6/29/2015	Expiration Date:	12/31/2016

Question Responses

Question	Answer
Have you ever been convicted of a misdemeanor? Convictions of speeding or parking violations need not be reported.	N
Is this a new misdemeanor conviction not previously reported? (If answer is yes mail a certified copy of court documents and an explanatory letter for each conviction. Do not send a copy.)	N
Have you ever been convicted of a felony?	N
Is this a new felony conviction not previously reported? (If answer is yes mail a certified copy of court documents and an explanatory letter for each conviction. Do not send a copy.)	N
Are criminal proceedings pending in any federal or state court? (If yes, mail an accompanying explanatory letter.)	N
Is an investigation and/or disciplinary action pending against any license, certification or registration (nursing or other)? (If yes mail an accompanying explanatory letter.)	N
Has any license, certification or registration (nursing or other) ever been denied, revoked, suspended, limited or disciplinary action taken by a licensing authority of any state, agency of the US government, territory of the US or country?	N
Is this a new action not previously reported? (If yes mail a certified copy of board order and/or governmental agency disciplinary action and an explanatory letter for each action. Do not send a copy.)	N
Please read carefully and answer the following Continuing Education question. If you do not have the 20 hours of CNE as required in K.S.A. 65-1117 do not renew until you have the required hours.	
Have you obtained 20 hours of CNE for relicensure as required in KSA 65-1117?	Y

Attestation

I realize that this application is a legal document and by pressing the **Add to Cart** button I am declaring under penalty of perjury under the laws of the State of Kansas that the information I have provided is true and correct to the best of my knowledge.

False or Inaccurate Information may be grounds for discipline of a license or application for a license.

If all the above information is correct please press the **Add to Cart** button. Otherwise please go back and correct any information that is necessary.

STOP! PLEASE READ:

If you are **REINSTATING** an exempt, inactive or expired LPN, RN or RNA license, you'll need to click "Add to Cart" button, review the fee(s), and then select the "Back to Home Page" button at the bottom of the Cart page. At the home page select the "Initial Application" on the menu. Select the profession type and method for your temporary permit.

If you are applying for an **ADVANCED PRACTICE LICENSE** for the first time and want a temporary permit, you'll need to click "Add to Cart" button, review the fee(s), and then select the "Back to Home Page" button at the Cart. At the home page select the "Initial Application" on the menu. Select the profession type and method for your temporary permit.

Once you've completed your application(s) and you are at the "cart" page you'll want to select the "checkout" button to pay the application(s) fee(s).

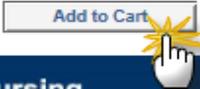
Add to Cart 

This is a larger screenshot of the “add to cart” button located at the bottom of the application summary.

to Home Page” button at the bottom of the Cart page. At the home page select the “Initial Application” on the menu. Select the profession type and method for your temporary permit.

If you are applying for an ADVANCED PRACTICE LICENSE for the first time and want a temporary permit, you’ll need to click “Add to Cart” button, review the fee(s), and then select the “Back to Home Page” button at the Cart. At the home page select the “Initial Application” on the menu. Select the profession type and method for your temporary permit.

Once you’ve completed your application(s) and you are at the “cart” page you’ll want to select the “checkout” button to pay the application(s) fee(s).



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When you get the below cart feature, you should see the license you are renewing in the table with a renewal fee. Please be advised if you have an APRN as well as a RN, you’ll have two renewal fees (one for the RN and the other for the APRN) listed under your RN license.

Menu

Licensing Home Page

Logout

Cart

The list below shows all the items in your cart. To pay for the items, click the **checkout** button. Use the **update** and **remove** buttons to modify your cart.

STOP! PLEASE READ:

If you are REINSTATING an exempt, inactive or expired LPN, RN or RNA license, you’ll need to click “Add to Cart” button, review the fee(s), and then select the “Back to Home Page” button at the bottom of the Cart page. At the home page select the “Initial Application” on the menu. Select the profession type and method for your temporary permit.

If you are applying for an ADVANCED PRACTICE LICENSE for the first time and want a temporary permit, you’ll need to click “Add to Cart” button, review the fee(s), and then select the “Back to Home Page” button at the Cart. At the home page select the “Initial Application” on the menu. Select the profession type and method for your temporary permit.

Once you’ve completed your application(s) and you are at the “cart” page you’ll want to select the “checkout” button to pay the application(s) fee(s).

Licensee	Token	Description	Fee Amount		
bob doe	142576464	Renewal for license 14-1234567-021 - Nursing/Registered Nurse		Update	Remove
		Renewal Fee	\$55.00		
		Renewal Fee	\$55.00		
		Total	\$110.00		



Once you select checkout you will get the page below with a summary of the renewal fee(s) needing to be paid. The one below is for a RN renewal only.

Select the method of payment (either an e-check or credit (debit) card), then click the “Pay Online” button.

Menu
Licensing Home Page
Logout

Application Fees

The accepted payment method is electronic check or credit/debit card (VISA, MasterCard, Discover or American Express.) KanPay will add a small fee for processing your online payment. The fee rate is 2.5% of the total charge for credit card transactions and \$1.25 for each electronic check (ACH) transaction. It will show on your Payment Results page after the charge transaction is completed, but it does not get sent to the Kansas State Board of Nursing. Upon completion of the online application process, you will receive a confirmation screen. Without the confirmation number, it is possible the online application did not complete. You may contact Kansas.gov at 1-800-452-6727 for assistance. The Kansas State Board of Nursing reserves the right to assess you a \$30 service fee for all chargebacks and returns.

License Number	Description	Fee Amount
14-1234567-021	Renewal Fee	\$55.00

Pay by Credit Card
 Pay by E-Check

Pay Online

Once you select checkout you’ll get the page below with summary of renewal fees needing to be paid. The one below is a RN and APRN renewal.

Select method of payment (either e-check or credit (debit) card), then click the “pay online” button.

Menu
Licensing Home Page
Logout

Application Fees

The accepted payment method is electronic check or credit/debit card (VISA, MasterCard, Discover or American Express.) KanPay will add a small fee for processing your online payment. The fee rate is 2.5% of the total charge for credit card transactions and \$1.25 for each electronic check (ACH) transaction. It will show on your Payment Results page after the charge transaction is completed, but it does not get sent to the Kansas State Board of Nursing. Upon completion of the online application process, you will receive a confirmation screen. Without the confirmation number, it is possible the online application did not complete. You may contact Kansas.gov at 1-800-452-6727 for assistance. The Kansas State Board of Nursing reserves the right to assess you a \$30 service fee for all chargebacks and returns.

License Number	Description	Fee Amount
14-1234567-021	Renewal Fee	\$55.00
14-1234567-021	Renewal Fee	\$55.00

Pay by Credit Card
 Pay by E-Check

Pay Online

Fill in all the required fields for making payment (be sure input the address to where your credit card billing statement is mailed) then click "continue" button at bottom of page. (see examples of both options below, credit/debit card and check)

Payment Via Credit/Debit Card:

Kansas KanPay The Payment Portal Help Center Contact

Payment Information for KSBN License

Payment Via Credit/Debit Card

* Indicates a required field.

Name and Address

* Name:
(as shown on credit card)

* Address: This is the billing address for the credit card you are using for payment.

Secondary Address:

* City:

* State/Province: Choose One

* Zip Code:
(i.e. 00000-0000)

* Country: United States

Account Information

Card Type: Select ...

* Card Number:

* Expiration Date: (01)Jan 2016

Contact Information

* Phone Number:
(i.e. 000-000-0000)

* E-mail Address:

Payment Via Check:



Help Center Contact

Payment Information for KSBN License

Payment Via Check

* Indicates a required field.

Name and Address

* Name:
(as shown on bank account)

* Address:

Secondary Address:

* City:

* State/Province: Choose One

* Zip Code:
(i.e. 00000-0000)

* Country: United States

Account Information

Sample Check - U.S. Account (lower left corner)



The Bank Routing # is 9 digits between the ① & ② symbols. The check # should match the # in the upper right corner. The Checking Account # is usually to the left of ③. If check # is left of account #, ignore check #.

Note: These three sets of numbers may appear in a different order on your check.

* Routing Number:

* Verify Routing Number:

* Account Number:

* Verify Account Number:

* Account Type: Checking

Contact Information

* Phone Number:
(i.e. 000-000-0000)

* E-mail Address:

Once you click “continue” you’ll get the below payment information page, **you are not done**, to double check (highlighted areas) card, expiration of card, e-mail and amount being charged to your card. If ok then you’ll click “I Agree/Submit Payment”. If you do not do this step the application stays in the cart and will not push to the Kansas State Board of Nursing for processing.

Payment Information for Test Application

Payment is NOT complete until you select “I Agree/Submit Payment” at the bottom of this page.

Please review the information below. If there are changes you need to make, select the “Make Changes” button to edit the information. After verifying all the information is correct, select the “I Agree / Submit Payment” button to proceed.

Your reference number is b4688428484088a

Name and Address

Name: bob doe
(as shown on credit card)

Address: 800 SW Jackson
City: topeka
State/Province: Kansas
Zip Code: 66612
Country: United States

Account Information

Card Type: Visa Card
Card Number: *****1111
Expiration Date: 01/2018

Contact Information

Phone Number: 735-298-2240
E-mail Address: chella.roe@ksbn.state.ks.us

← If you need to make changes, click here.

Cost Information

SKU	ID	Description	Quantity
RENEWAL FEE		Renewal Fee	1

Total Order Amount: \$68.60

I understand that the above amount will be charged to my credit card, and that my credit card billing statement will show this amount as paid to “Kansas.gov KanPay Pmt”.
Kansas.gov reserves the right to assess you a \$15 service fee for all chargebacks and returns.

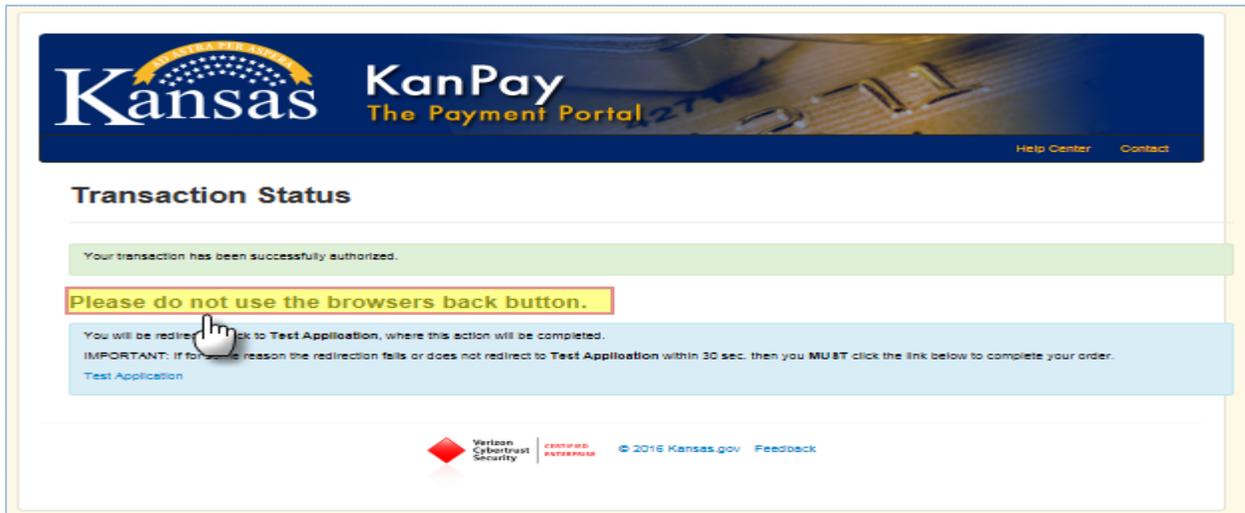
Please be patient once you have hit the “I Agree / Submit Payment” button, it may take up to 80 seconds before your order is completed. Upon completion you will be returned to the “Test Application”.

NOTICE:

For Customers with Debit Blocks: Please note our Originator ID has changed. Please contact your financial institution and ask them to allow debits from Originator ID 1522077581. Failure to allow debits by this Originator ID could cause your ACH debit to fail. Please contact our Help Center with any questions: helpcenter@link.org

Your reference number is b4688428484088a

Then you'll get the below window asking you to not use the browsers back button, if you do you will not receive your confirmation of payment.



When the payment has processed you'll receive the below page which you want to **print** (take a picture of, save to your computer or something so you have a record of your transaction) and retain for your records and as proof of payment.

