



SOUTH DAKOTA BOARD OF NURSING

4305 S. Louise Ave., Suite 201 | Sioux Falls, SD 57106-3115
605-362-2760 | <https://www.sdbon.org/>

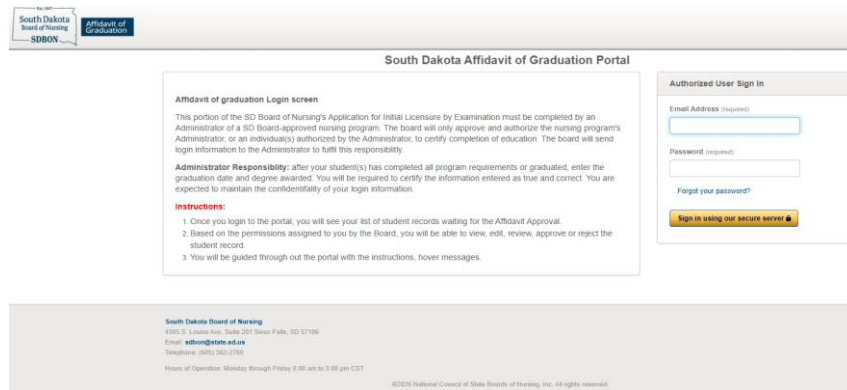
Affidavit of Graduation Portal: How to Approve & Certify Completion of Education

Your verification of an applicant’s completion of nursing education is an important step for the Board in determining if an applicant is qualified to sit for the NCLEX exam and to be issued a license.

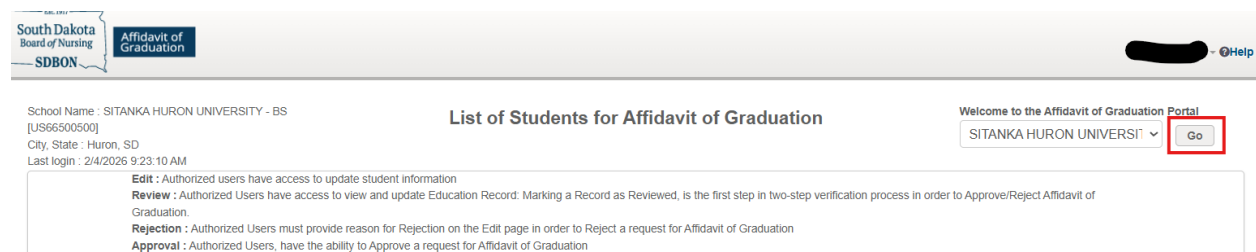
AOG Portal Account

After creating your Affidavit of Graduation (AOG) portal account, you will receive an email when a graduate from your nursing program has applied to the Board and has selected your nursing program.

The email you receive will include a link to access the AOG Portal. You may also access the portal from the Board’s website, <https://www.sdbon.org/education/AOG.asp>.



After logging in to the Portal, you will be presented with your program’s list of graduates. Choose your program in the upper right-hand corner; then select **Go**



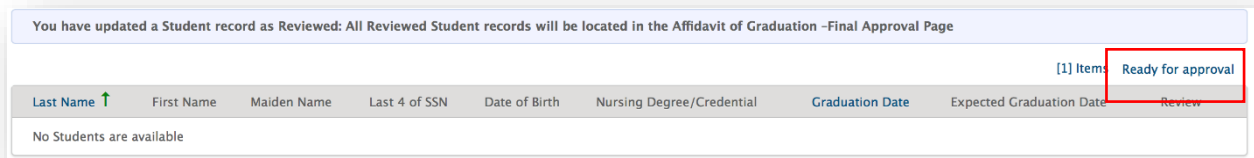
Steps to Verify Completion of Education

1. Mark the **Review** box for each applicant; then click **Mark as Review**.

Last Name ↑	First Name	Maiden Name	Last 4 of SSN	Date of Birth	Nursing Degree/Credential	Graduation Date	Expected Graduation Date	[0] Items Ready for approval
WERMERS	BRYAN		6789	01/01/2000	Baccalaureate Degree-Nursing (BSN)	12/13/2025		Review <input checked="" type="checkbox"/>
WERMERS	ALEXA		7890	01/01/2001	Baccalaureate Degree-Nursing (BSN)	12/01/2025		Review <input checked="" type="checkbox"/>
WERMERS	EMERSON		8912	01/01/2002	Baccalaureate Degree-Nursing (BSN)	12/13/2025		Review <input checked="" type="checkbox"/>



2. After an applicant has been *Marked as Reviewed*, select **Ready for approval**.



3. For Final Approval, select **Approve** to certify the completion of all program requirements.
4. Next, mark the **Attestation Statement** to certify that the applicant(s) completed all of the requirements for the degree or certificate of your nursing education program.
5. Click **Submit Approval** to complete the certification of the applicant's education.

Last Name ↑	First Name	Maiden Name	Last 4 of SSN	Date of Birth	Nursing Degree/Credential	Graduation Date	Expected Graduation Date	<input checked="" type="checkbox"/> Approve
WERMERS	BRYAN		6789	01/01/2000	Baccalaureate Degree-Nursing (BSN)	12/13/2025		<input checked="" type="checkbox"/>
WERMERS	ALEXA		7890	01/01/2001	Baccalaureate Degree-Nursing (BSN)	12/01/2025		<input checked="" type="checkbox"/>
WERMERS	EMERSON		8912	01/01/2002	Baccalaureate Degree-Nursing (BSN)	12/13/2025		<input checked="" type="checkbox"/>

Attestation Statement I certify that all requirements for a degree or certificate for the program of nursing were completed by the individual(s) listed above.

6. The applicant's licensure record will now reflect that their education has been verified as completed. The Board will review all other application requirements, then make the new graduate eligible to sit for their licensure exam.

Please feel free to contact the Board office with any questions on this process.