

### MISSISSIPPI COMMUNITY COLLEGE BOARD

Professional Licensure & State Authorization Program Determination Disclosure

Dro	gram	Title
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**CIP Number** 

**Reviewer College** 

#### **Date**

In April 2022, the Mississippi community colleges agreed to collaborate, where applicable, to reduce duplication of effort and to ensure system-wide compliance with federal requirements and the National Council for State Authorization Reciprocity Agreement (NC-SARA).

#### **Federal Requirements**

U.S. Department of Education regulation, 34 CFR 668.43 (a) (5) requires an institution to disclose whether programs leading to professional licensure or certification, regardless of modality, meet each state's educational requirements. Specifically, the regulation requires the following:

- A list of all states for which the program's curriculum meets state educational requirements for professional licensure or certification,
- A list of all states for which the program's curriculum **does not meet** state educational requirements for professional licensure or certification, and
- A list of all states for which the institution has not made a determination of whether the curriculum meets educational requirements.

### **NC-SARA Requirements**

The community colleges of Mississippi are members of the NC-SARA. NC-SARA is an agreement between member U.S. states, territories, and districts, which allows institutions to offer distance programs and on the ground courses within member state borders. Recent changes to the NC-SARA manual (Section 5.2) concerning professional licensure programs have changed to align with federal regulations. NC-SARA participating institutions must provide licensing board contact information to the students or applicants when unable to make a determination. The following forms will demonstrate the determinations for each state and territory. For the states and territories marked **Does Not Meet** or **Has Not Made a Determination**, additional information is available.

#### DISCLAIMER

The Mississippi Community College Board (MCCB) hosts general disclosure information on behalf of the community colleges. The program information was provided by the reviewer college, and the MCCB cannot guarantee the completeness and accuracy of the information. While a program may originally meet the educational requirements for licensure, changes in requirements could impact the program's ability to meet any new educational requirements. Students seeking employment should familiarize themselves with the specific licensure or certification requirements of a state before enrolling in a program, and contact the appropriate licensing agency in the state of future employment to determine requirements and ensure program compatibility.

## **National Professional Licensure Disclosure Template**

Mississippi Community College Board

Use this form to denote each of the states and territories for which the **national licensure examination (i.e. nursing)** leads to professional licensure. For any states and/or territories not selected, an individual State Professional Licensure Disclosure Template will need to be completed.

## **Program**

CIP

### **CIP Number**

State/Territory	Leads to Licensure	State/Territory	Leads to Licensure	State/Territory	Leads to Licensure
Alabama		Kentucky		Ohio	
Alaska		Louisiana		Oklahoma	
American Samoa		Maine		Oregon	
Arizona		Maryland		Pennsylvania	
Arkansas		Massachusetts		Puerto Rico	
California		Michigan		Rhode Island	
Colorado		Minnesota		South Carolina	
Connecticut		Mississippi		South Dakota	
Delaware		Missouri		Tennessee	
District of Columbia		Montana		Texas	
Florida		Nebraska		U.S. Virgin Islands	
Georgia		Nevada		Utah	
Guam		New Hampshire		Vermont	
Hawaii		New Jersey		Virginia	
Idaho		New Mexico		Washington	
Illinois		New York		West Virginia	
Indiana		North Carolina		Wisconsin	
lowa		North Dakota		Wyoming	
Kansas		Northern Mariana Islands			

# Licensing Board Information

**Board Name** 

**Address** 

City, State, and Zip

**Phone Number** 

Website

## **Reviewer Information**

Name

**Email** 

College

**Date of Review** 

**Reviewer Comments**