

Attestation of Licensure and Employment Plans

Directions: You are being asked to sign this Attestation because you are located in a state in which Georgia College & State University's program of study in _____, does not meet the requirements for you to obtain a license in _____, or sit for a license exam in _____. Under the rules set forth under Title IV of the Higher Education Act, Georgia College & State University cannot enroll you in _____ unless you sign an attestation that you intend to seek employment in a state in which Georgia College & State University's program will meet the requirements to allow you to obtain a license in the field of the program of study or allow you to sit for a license exam in that field.

You are not required to sign this Attestation. You may instead seek to enroll in another program at another college or university that does meet the professional licensure requirements for your state in this field. Or you may choose to enroll in a different program within Georgia College & State University.

If you do decide to sign this Attestation, read its content carefully as you will be attesting to its truth and the University will be relying on it to comply with its obligations under the law. If you have any questions, please contact the GCSU Academic Affairs at academic.affairs@gcsu.edu for further information. See our information page at <https://www.gcsu.edu/distance-education/state-authorization> for additional resources.

I, _____, understand that the _____ program does not meet educational requirements for professional or occupational licensure, or Georgia College & State University is not aware whether the program meets educational requirements for professional or occupational licensure, as a(n) _____ in _____, where I am currently located. I acknowledge that the educational activities of _____ may not qualify me for licensure in _____.

I attest that I plan to seek licensure and employment in _____ after completing the program. Georgia College & State University cannot guarantee that I will qualify for licensure in _____ after completing the program, as laws, educational requirements, and additional requirements (e.g. work experience, background checks, etc.) are subject to change. I acknowledge that I should contact any state where I may be interested in becoming licensed upon graduation to ensure I fully understand my licensure, certification, and employment options in that state.

I understand that the most reliable information on licensure and certification comes directly from the applicable state licensure board or agency/entity.

I submit this attestation voluntarily and knowingly.

Student Signature _____ Date _____