

About this Form

This form is for students whose provided location is a state other than Michigan and are seeking admission to a program that could potentially lead to licensure. Please see the disclosure related to the educational requirements for professional licensure and certification at https://home.schoolcraft.edu/college-policies/state-by-state-licensure-disclosure.

Please Read Carefully:

Effective July 1, 2024, a new federal regulation (34 C.F.R. 668.14(b)(32)) prohibits Schoolcraft College from enrolling a student in a program that claims to meet the educational requirements for a specific professional license or certification in their state if the program doesn't meet the state's educational requirements for licensure at the time of initial enrollment.

Key Points:

- For the purposes of this policy, a student's location at initial enrollment is determined by the student as
 their address listed in the address field on the student's admission application or through a change of
 address request.
- Based on your chosen program and your location, federal regulations might prohibit Schoolcraft College from enrolling you in this program.

Options:

- You may still enroll at Schoolcraft College if you plan to seek licensure and employment in Michigan or a state where the educational requirements are met.
- Based on the program you applied for you must:
 - 1. Disclose which state you plan to work in for professional licensure upon graduation.
 - 2. Acknowledge that Schoolcraft College has informed you that your chosen program does not meet the educational requirements for licensure in your current state.
 - 3. Confirm that you will seek employment in a state where the requirements are met.

Action Required:

- 1. Complete the Student Attestation form <u>only if you have plans to seek licensure and employment in Michigan or in another state where the educational requirements for licensure are met.</u>
- 2. Submit this completed form to the Admission's Office. You may submit these documents by:
 - a. Uploading in Supplemental Items in your Admissions Application
 - b. Email the form to admissions@schoolcraft.edu
 - c. Deliver to the Admissions and Welcome Center in the McDowell Student Center, Room 140.

Questions?

New students should contact the Admission's Office regarding the admissions process at 734-462-4683 or admissions@schoolcraft.edu.



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Staff Name:

Student in	lioillia	.1011.								
Student Name:				Student D Birth:	ate of					
Email Ad	Email Address:				Phone Nu	mber:				
Student A			t below and provide the	requested informa	ation or initia	al/sign as indi	cated.			
1. M	y locatio	on prior to requ	uesting enrollment is:							
2. M		m of choice (i.	e., the program to which	I am seeking enrol	lment)					
3. Iv	vant to b	oecome licens	ed in the following field:							
	ertify th ate:	at I plan to see	ek licensure and employ	ment in the followir	ng					
	5.	-	ge that Schoolcraft Colle blicable educational requ	_		. •				
	6.	I acknowledge that completion of this Student Attestation does not guarantee me admission to my program of choice.								
	7.	College misr	nderstand that by submitting this attestation I am waiving my ability to claim that Schoolcraft llege misrepresented or failed to disclose to me accurate information about my ability to seek ofessional licensure in my location at initial enrollment.							
	8.	8. I certify under penalty of perjury that the foregoing is true and correct.								
Student Name (Please Print):					Date:					
Student Signature:										
For Office Use Only:										
After pro	cessing	g, enter the S	Student's Schoolcraft	ID Number and i	mage the d	document in	Feith.			
Student Sc	choolcra	ft ID Number:								
					Date					

Processed: