

**TENNESSEE HIGHER EDUCATION COMMISSION
DIVISION OF POSTSECONDARY STATE AUTHORIZATION**

EXEMPTION DETERMINATION REQUEST

A completed application must be submitted for each proposed location or program. Staff assistance with completing this application is available at THEC.RCD@tn.gov. Any requests for additional information regarding this application will be sent via email to the contact person listed below.

The Tennessee Higher Education Commission ("THEC") staff will review an Exemption Determination Request ("EDR") and, upon finding that the exemption is justified by statute or rule, notify the institution of such. If Commission staff requires additional information, Commission staff will defer the EDR by requesting such information and providing the institution two (2) opportunities to correct the deficiencies. Following the second failed attempt to correct deficiencies, the EDR will be denied.

If the request is denied, Commission Staff will make a written determination and provide a date by which the institution may submit a request for further review by the Executive Director.

1. INSTITUTIONAL DATA

Institution Name:

Is Institution Name an Assumed Name?

Yes No (If yes, enter the institution assumed name below):

OPEID No. (for Title IV institutions only) _____

PHYSICAL LOCATION ADDRESS

Address 1: _____

Address 2: _____

City: _____ State: _____ ZIP: _____ County: _____

INSTITUTION CONTACT DATA

Telephone No.: _____

Website: _____

Name of the Institutional Director: _____

Direct Telephone No.: _____ Cell Phone No.: _____

Email: _____

CONTACT PERSON FOR THIS APPLICATION

Name: _____

Title: _____ Email: _____

Direct Telephone No.: _____ Cell Phone No.: _____

2. EXEMPTION AUTHORITY CITATION SELECTION

Select the appropriate exemption authority. Unless stated otherwise, select all that apply. Note that you are expected to provide appropriate evidence of all authorities selected. Detailed information on each exemption authority citation is available [HERE](#).

- a. Tenn. Code Ann § 49-7-2004(a)(1)
- b. Tenn. Code Ann § 49-7-2004(a)(2)
- c. Tenn. Code Ann § 49-7-2004(a)(3)
- d. Tenn. Code Ann § 49-7-2004(a)(4)
- e. Tenn. Code Ann § 49-7-2004(a)(5)
- f. Tenn. Code Ann § 49-7-2004(a)(6) (Do not select any other option.)
- g. Tenn. Code Ann § 49-7-2004(a)(7)
- h. Tenn. Code Ann § 49-7-2004(a)(8)
- i. Tenn. Code Ann § 49-7-2004(a)(9)
- j. Tenn. Code Ann § 49-7-2004(a)(10)
- k. Tenn. Code Ann § 49-7-2004(a)(11)
- l. Tenn. Code Ann § 49-7-2004(a)(12)
- m. Rule 1540-01-02-.05(1)(a)1.
- n. Rule 1540-01-02-.05(1)(a)2.
- o. Rule 1540-01-02-.05(1)(a)3.
- p. Rule 1540-01-02-.05(1)(a)4.
- q. Rule 1540-01-02-.05(1)(a)5.
- r. Rule 1540-01-02-.05(1)(c)
- s. Rule 1540-01-02-.05(1)(d)
- t. Rule 1540-01-02-.05(1)(e)
- u. Rule 1540-01-02-.05(1)(f)
- v. Rule 1540-01-02-.05(1)(g)
- w. Rule 1540-01-02-.05(1)(h)

3. EXEMPTION AUTHORITY DOCUMENTATION

If Section 2.f. was selected above, proceed to Section 4; otherwise, explain how the institution or program qualifies for any selected exemption by:

- a. Attaching a narrative as Attachment 3.1. The narrative should explain in detail how the program or institution meets the specific requirements of the selected exemption authority citations.
- b. Attaching documentation supporting the requested exemption such as: copies of all institutional materials; brochures; advertisements; state charter or business license; and contracts with employers. Attach the supporting documentation as Attachment 3.2.

4. EXEMPTION AUTHORITY T.C.A. § 49-7-2004(a)(6)

- a. If Section 2.f. above was selected, indicate whether the physical location listed above is:
- The primary campus
 - A branch, satellite or extension campus located in the same state where the primary campus is domiciled.
 - A branch, satellite or extension campus located in a state other than the state where the primary campus is domiciled, but has been located in the state where the branch, satellite or extension campus is presently located for at least twenty (20) consecutive years. The primary campus is located in the state of _____.
- b. **Exemption Letter** – Has THEC previously issued an exemption letter for the specific physical location for which the exemption is sought?
- Yes (If yes, attach the letter as Attachment 4.b.and complete Section 4.f.)
 - No (If no, complete Section 4.c. through 4.f.)
- c. **State Domicile** – Provide documentation as Attachment 4.c. indicating that the primary campus has been domiciled in the same state for at least twenty (20) consecutive years and continues to have its primary campus domiciled in that state.
- d. **Not-For-Profit** – Provide documentation as Attachment 4.d. indicating that the primary campus is chartered as a not-for-profit entity in its place of domicile and has continuously been so chartered for at least twenty (20) consecutive years.
- e. **Accreditation** – Provide documentation as Attachment 4.e. indicating that the campus is accredited by an accrediting agency recognized by the U. S. Department of Education (“ED”) and the primary campus has been accredited by a recognized accreditor for at least twenty (20) consecutive years.
- f. **Financial Standards** –Provide documentation as Attachment 4.f. indicating that the institution maintains financial standards deemed acceptable by the accreditor to maintain accreditation or maintains financial standards deemed acceptable by ED for the purpose of being a Title IV eligible institution.

AFFIRMATION OF THE CONTACT FOR THIS REQUEST

I affirm the following are true:

- I have completed or reviewed this form in its entirety.
- The information contained in the attached documents is accurate.

Signature: _____

Name: _____

Title: _____

Date: _____

FEE PAYMENT

To pay fees by credit card or debit card, create an invoice at the [Create Invoice and Payment Receipt](#) link and complete the payment process. Per [Rule 1540-01-02-.07\(1\)\(d\)](#), an "application submitted without the appropriate fee will be considered incomplete and will not be reviewed until all applicable fees are received." Note there is a convenience fee charged by the third party vendor for paying by credit or debit card.

APPLICATION SUBMISSION

Submit the application and supporting documentation via email to THEC.RCD@tn.gov.

KEEP A COMPLETE COPY OF THE APPLICATION PACKAGE FOR THE INSTITUTIONAL FILES.