

BOARD OF TRUSTEES OF STATE
INSTITUTIONS OF HIGHER LEARNING
STATE OF MISSISSIPPI

Request for Faculty Exception

The Request for Faculty Exception form should be submitted to the Director of Nursing Education before the beginning of the **fall** and **spring** semesters and include **new** and **continuing** faculty exception(s).
Fax to Attention: Janette S. McCrory (601) 432-6978 or email to jmccrory@mississippi.edu.

Complete the following:

Name of school _____

Fall_____ Spring _____ Year_____ Total Number of Faculty FTE's _____

Continuing faculty exception(s) information-

Name	Grad Program	Degree Start Date	Completion Date	% of FTE

Newly requested faculty exception(s) information-

Name	Grad Program	Degree Start Date	Completion Date	% of FTE

I understand that as administrator of the unit in nursing I am responsible for having the following information for each faculty exception available on site at all times:

- Verification of enrollment in a graduate nursing program for new faculty exceptions.
- Current copy of college transcript for continuing faculty exceptions.
- Verification of unencumbered RN licensure in MS OR a valid license from another compact state.
- Verification of a satisfactory criminal background check.

Signature of Dean/Director _____ Date _____