



MISSISSIPPI INSTITUTIONS OF HIGHER LEARNING  
OFFICE OF ACADEMIC AND STUDENT AFFAIRS  
Nursing Education

The Board of Trustees of Mississippi Institutions of Higher Learning (IHL) is empowered and required to establish rules and regulations and promulgate uniform standards for accreditation of schools of nursing in the state of Mississippi in accordance with (a) and (b), Miss. Code (2008 Supp.) §37-129-1, et seq. Schools of nursing located at institutions outside of the state of Mississippi must be approved by the Mississippi Institutions of Higher Learning Office of Academic Affairs Nursing Education to place students in any type of clinical learning placement setting in Mississippi to ensure out-of-state and online colleges/universities programs are equivalent to in-state nursing programs.

**A Nursing Education Program Outside Mississippi Desiring to Conduct Clinical Learning Experiences in Mississippi shall be:**

- Fully approved/accredited by the state board of nursing in the state where the nursing education program originates.
- The institution shall be regionally accredited.
- The nursing program shall be nationally accredited by ACEN®, CCNE, or NLN-CNEA.
- Prelicensure programs must have an NCLEX-RN® examination pass rate of at least 80% for the current three-year period.
- Post-licensure APRN programs must have a certification pass rate of at least 80% for the current three-year period.
- The credentials of nursing faculty with oversight of student(s) in the program in Mississippi shall have a minimum of a graduate degree in nursing from a regionally accredited institution.
- All nursing faculty with oversight of student(s) in the program in Mississippi shall have a current, unencumbered MS or NLC license.

**Instructions**

1. Review the Mississippi Institutions of Higher Learning (IHL) Mississippi Nursing Degree Programs Accreditation Standards and Mississippi Nursing Degree Programs Accreditation Standards Procedure Manual (June 15, 2023).  
[http://www.mississippi.edu/nursing/downloads/nursing\\_standards\\_230615.pdf](http://www.mississippi.edu/nursing/downloads/nursing_standards_230615.pdf)  
[http://www.mississippi.edu/nursing/downloads/procedure\\_manual\\_230615.pdf](http://www.mississippi.edu/nursing/downloads/procedure_manual_230615.pdf)

2. Submit the completed application and required documents with the required payment.

**Address for mailing checks/submitting documents:**

Mississippi Institutions of Higher Learning  
Academic and Student Affairs Nursing Education  
3825 Ridgewood Road  
Jackson, MS 39211

Make checks payable to IHL Nursing Education

**Email submitting documents:**

[mtemple@mississippi.edu](mailto:mtemple@mississippi.edu)

**Review**

The review of a completed application may take up to three (3) months. IHL Nursing Education will notify programs in writing of any outstanding questions or documentation needed to complete the process.

**Fees (Total Enrollment from Latest Fall IPEDS Reporting)**

|                                      |                       |       |
|--------------------------------------|-----------------------|-------|
| Initial Application Fee for Approval | \$100 Application Fee |       |
|                                      | <u>Enrolled FTE</u>   |       |
|                                      | Under 2,500           | \$250 |
|                                      | 2,500-9,999           | \$500 |
| Annual Fee                           | 10,000 or more        | \$750 |
|                                      | <u>Enrolled FTE</u>   |       |
|                                      | Under 2,500           | \$150 |
|                                      | 2,500-9,999           | \$200 |
| Renewal Every 5 years                | 10,000 or more        | \$250 |
|                                      | <u>Enrolled FTE</u>   |       |
|                                      | Under 2,500           | \$150 |
|                                      | 2,500-9,999           | \$200 |
|                                      | 10,000 or more        | \$250 |

**\*\*Prelicensure programs must utilize Placement Pro for clinical placements in MS**  
<https://mhanet.org/Online/MCQW/Workforce.aspx?3219162cf452=4#3219162cf452>

**\*\*Approval for clinical nursing learning placements located in Mississippi must be renewed annually by July 1<sup>st</sup>. However, during the fifth year of initial approval and during any subsequent renewal cycle, the out-of-state institution must apply for approval to continue for a period up to five (5) years.**

**Initial Application Questions**

1. Indicate if NC-SARA participant  
Yes ☐ No ☐
2. Indicate placing more than 10 students from a program  
simultaneously at one site  
Yes ☐ No ☐
3. Name of Educational Institution
4. Name of Nursing Program
5. Degree(s) Awarded at Completion of Program of Study in which Nursing Program is  
seeking approval  
DNP ☐ MSN ☐ BSN ☐ ASN/ADN ☐
6. Description of Program Degree Option(s) Seeking Approval

**INCLUDE FOR ALL DEGREES SELECTED**

7. Physical Address of Educational Institution
8. Physical Address of Nursing Program
9. Web Address
10. Type of Ownership (for-profit or not-for-profit organization)
11. Mailing Address of Educational Institution if Different from Above
12. Mailing Address of Nursing Program if Different from Above
13. Name of Contact Person submitting application
14. Title of Contact Person submitting application
15. Email of Contact Person submitting application
16. Phone Number of Contact Person submitting application
17. Name of Dean of nursing
18. Credentials of Dean of nursing
19. College/University Higher Education Accrediting Body and Expiration Date
20. Name of Regional Accrediting Body and Expiration Date
21. Program Approval by the Board of Nursing in the state of legal domicile

22. List all states where the program option(s) is located

23. National Nursing Accrediting Body

24. For prelicensure program option(s), provide the NCLEX-RN® examination pass rate for the current three-year period (REFER TO PROCEDURE MANUAL FOR CALCULATION OF 3-YEAR PASS RATE)

CY 2020\_\_\_\_; CY 2021 \_\_\_\_; CY 2022 \_\_\_\_; **3- Year Period** \_\_\_\_

25. For APRN program option(s), provide the APRN certification pass rate for the current three-year period

CY 2019\_\_\_\_; CY 2020 \_\_\_\_; CY 2021 \_\_\_\_; **3- Year Period** \_\_\_\_

Total number of students who graduated from the degree program option(s)AY 2022/2023 by program option:

Describe the Mode of Education for the Program Degree Option(s) Requested in Mississippi

- Face-to-face didactic ☐
- Online didactic ☐
- Combination of face-to-face and online didactic ☐
- Skills lab ☐
- Virtual Simulation ☐
- Face-to-face Simulation ☐
- Faculty supervised clinical learning experiences ☐
- Preceptorship clinical learning experiences ☐
- Other (Identify) ☐

30. Describe the evaluation process of students in practice/clinical settings that are proposed to take place in Mississippi
31. Describe any type of compensation to be provided to the preceptor and/or facility by the institution, school of nursing, and/or student(s)
32. What is the number of Mississippi residents currently enrolled in the degree program option(s)
33. Specify the anticipated number of students for the calendar year that will be placed in MS
34. Prelicensure programs option(s) provide copy of PlacementPro Subscription Receipt  
**PROVIDE COPY**
35. Provide a copy of the Signed Verification Form (page 8)

**Complete the Spreadsheet of Clinical Notification in Mississippi annually with renewal.**

As per Mississippi Nursing Degree Programs Mississippi Institutions of Higher Learning Accreditation Standards, I attest to the following statements:

| Initial | Statement of Verification   |
|---------|---|
|         | Preceptor(s) are academically prepared at or beyond the level for which the preceptor service is rendered (preceptors for prelicensure students may be prepared at or beyond the level of licensure). |
|         | Preceptor(s) have a minimum of one year of experience as a registered nurse.  |
|         | Preceptor(s) hold a current unencumbered RN license to practice in Mississippi.   |
|         | Post-licensure students participating in clinical experiences in Mississippi have a current unencumbered license to practice in the state or NLC license.   |
|         | All students participating in clinical experiences in Mississippi have a current criminal history background check on file at the SON.  |
|         | All nursing faculty with oversight of student(s) in the program in Mississippi have a current, unencumbered MS or NLC license.  |
|         | The faculty-to-student ratio for all students in preceptorship is no more than 15 to 1 (undergraduate and non-APRN).  |
|         | The faculty-to-student ratio for all students in APRN clinical course preceptorship is no more than 8 to 1.   |
|         | All nursing faculty with oversight of student(s) in the program in Mississippi have a minimum of one year of clinical experience as a registered nurse.   |
|         | Simulation hours in prelicensure courses do not exceed 25% hours substitution of traditional clinical hours.  |
|         | The credentials of nursing faculty with oversight of student(s) in the program in Mississippi shall have a minimum of a graduate degree in nursing from a regionally accredited institution.          |
|         | Preceptors utilized in MS receive a formal orientation to the role.   |
|         | Clinical Affiliation Agreements/Contracts are in place with the clinical agency/agencies and are current.   |

\_\_\_\_\_  
School of Nursing

\_\_\_\_\_  
Name of Nurse Administrator

\_\_\_\_\_  
Signature of Nurse Administrator