

Mississippi Secretary of State

700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME Mississippi Community College Board		CONTACT PERSON Kell Smith	TELEPHONE NUMBER 601-432-6518	
ADDRESS 3825 Ridgewood Road		CITY Jackson	STATE MS	ZIP 39211
EMAIL info@mccb.edu	SUBMIT DATE 10/23/23	Name or number of rule(s): MS Community College Board Policy 8.2 - Standards for Quality and Accountability		

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: At its October meeting, the Mississippi Community College Board (MCCB) voted to amend the board policy pertaining to standards for quality and accountability. The changes are to update old references of SACS to the current SACSCOC acronym and to update the maximum allowable absences chart to reflect courses that vary from the traditional 18-week term.

Specific legal authority authorizing the promulgation of rule: Source: *Miss. Code Ann. §37-4-3*.

List all rules repealed, amended, or suspended by the proposed rule: Mississippi Community College Board Policy 8.2.

ORAL PROCEEDING:

☐ An oral proceeding is scheduled for this rule on Date: _____ Time: _____ Place: _____

☒ Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

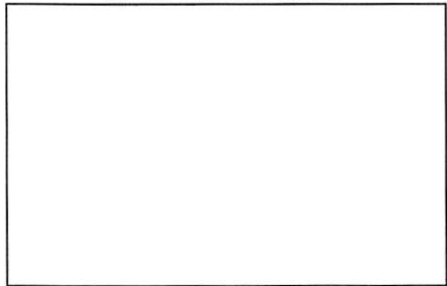
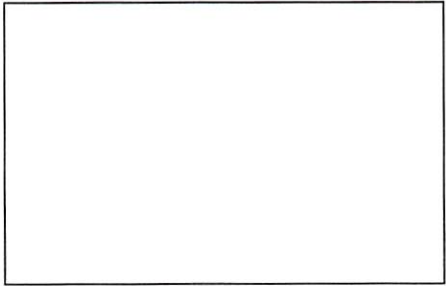
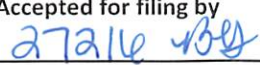
ECONOMIC IMPACT STATEMENT:

☒ Economic impact statement not required for this rule. ☐ Concise summary of economic impact statement attached.

TEMPORARY RULES	PROPOSED ACTION ON RULES	FINAL ACTION ON RULES
_____ Original filing _____ Renewal of effectiveness To be in effect in _____ days Effective date: _____ Immediately upon filing. _____ Other (specify): _____	Action proposed: _____ New rule(s) ☒ Amendment to existing rule(s) _____ Repeal of existing rule(s) _____ Adoption by reference Proposed final effective date: ☒ 30 days after filing _____ Other (specify): _____	Date Proposed Rule Filed: _____ Action taken: _____ Adopted with no changes in text _____ Adopted with changes _____ Adopted by reference _____ Withdrawn _____ Repeal adopted as proposed Effective date: _____ 30 days after filing _____ Other (specify): _____

Printed name and Title of person authorized to file rules: Kell Smith, Executive Director

Signature of person authorized to file rules: 

OFFICIAL FILING STAMP	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP	OFFICIAL FILING STAMP
		
Accepted for filing by _____	Accepted for filing by 	Accepted for filing by _____

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.