**Mississippi Secretary of State**
125 South Congress St., P. O. Box 136, Jackson, MS 39205-0136

SOS APA Form 001

## ADMINISTRATIVE PROCEDURES NOTICE FILING

| AGENCY NAME | | CONTACT PERSON | TELEPHONE NUMBER | |
|---|---|---|---|---|
| Mississippi Department of Education | | Brett Robinson | 601-359-3463 | |
| ADDRESS | | CITY | STATE | ZIP |
| 359 North West Street | | Jackson | MS | 39205 |
| EMAIL | SUBMIT DATE | Name or number of rule(s): | | |
| brobinson@mdek12.org | 6/20/24 | Title 7: Education K-12<br>Part 214: 2024 Sophomore College and Career Readiness Curriculum for Early College High Schools | | |

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: Amend Title 7: Education K-12 Part 214: 2024 Sophomore College and Career Readiness Curriculum for Early College High Schools

Specific legal authority authorizing the promulgation of rule: Source Code: Miss. Code Ann. §§ 37-1-3 and 37-31-103

List all rules repealed, amended, or suspended by the proposed rule: N/A

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

_____ Original filing
_____ Renewal of effectiveness
To be in effect in _____ days
Effective date:
_____ Immediately upon filing
_____ Other (specify): _____

### PROPOSED ACTION ON RULES

**Action proposed:**
_____ New rule(s)
__X__ Amendment to existing rule(s)
_____ Repeal of existing rule(s)
_____ Adoption by reference
**Proposed final effective date:**
__X__ 30 days after filing
_____ Other (specify): _____

### FINAL ACTION ON RULES

**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: Brett Robinson, State CTE Director

Signature of person authorized to file rules: Brett Robinson

**OFFICIAL FILING STAMP**

**Accepted for filing by**

**DO NOT WRITE BELOW THIS LINE**
**OFFICIAL FILING STAMP**

FILED
JUN 20 2024
MISSISSIPPI
SECRETARY OF STATE

**Accepted for filing by**
2754 MC

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**Accepted for filing by**

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