



Coordinating Commission for Postsecondary Education
P.O. Box 95005, Lincoln, Nebraska 68509-5005
Phone: (402) 471-2847 Fax: (402) 471-2886

AFFIRMATION OF INTENT TO OFFER ONLINE COURSES IN NEBRASKA — NO PHYSICAL PRESENCE IN THE STATE

The undersigned, an authorized representative of _____,
(Name of Postsecondary Institution)

hereby affirms that said institution plans to deliver postsecondary education courses in Nebraska for college credit through online internet delivery means and that said institution will maintain no physical presence in the state through arrangements for “established sites” in the state where the institution offers one or more courses on an established schedule to students. (Established sites do not include the personal residence or work place of individual students.) Neb. Rev. Stats. §85-1103.11

_____ Name of authorized representative	_____ Position with institution
_____ Signature of authorized representative	_____ Date
Telephone _____	Fax Number _____

- Notes:
1. This form may be used by out of state institutions to affirm compliance with Nebraska statutes regarding out of state institutions delivering postsecondary education courses and programs in the state for college credit.
 2. For information on state professional licensing requirements contact the Nebraska Department of Health and Human Services, Division of Credentialing at 402-471-4923.
 3. For information on establishing a new private institution in Nebraska, contact the Coordinating Commission for Postsecondary Education at 402-471-2847.
 4. For information on the legal requirements for incorporation in the state, contact the Secretary of State’s Office, Corporate Division at 402-471-4079.
 5. For information on regulations for online private career schools in the state, contact the Department of Education at 402-471-4825.