



## Application for Religious Exemption from Licensure

The statute which authorizes licensure also provides for exemptions from licensure for institutions which offer postsecondary degree activity in a program of study whose objective is to offer a degree in theology, divinity, religious education or for career preparation in a religious vocation. (G.S. 116-15).

**Instructions:** In order to demonstrate that the programs at your institution qualify for exemption, please fill out this application and submit with it all supporting documentation to the University of North Carolina General Administration at the address above to the attention of Kaity McNeill.

**Name of Applicant Institution:**

**Date:**

**Complete Mailing Address (include city, state, & zip code):**

**Website (if applicable):**

**Phone Number:**

**Accreditation (if applicable):**

**List of Programs to be Considered for Exemption (attach additional pages if necessary):**

Program Name (Example: Master of Divinity in Old Testament Theology)	Expected Start Date	Projected Enrollment

**Checklist of Exhibits:**

- Exhibit A:** Articles of Incorporation, including amendments. Institutions that have previously approved for program exemption do not need to resubmit the Articles of Incorporation.
- Exhibit B:** A copy of the institution’s Student Catalogue describing each program of study for which the institution is seeking exemption.
- Exhibit C:** Copies of the diplomas or certificates for each proposed degree program.
- Exhibit D:** Any other information or documentation you believe helps show that the programs the institution is seeking licensure for are religious programs which (1) are degrees in theology, divinity, or religious education, or (2) are offered for career preparation in a religious vocation.

**Required Public Notices:**

1. **Exemption Statement:** The Policies of the Board of Governors requires all institutions conferred exemption with respect to religious education to prominently display the exemption statement in all relevant institutional publications. The statement should read:

*Degree programs of study offered by [Name of Institution] have been declared exempt from the requirements for licensure, under provisions of North Carolina General Statutes Section (G.S.) 116-15 (d) for exemption from licensure with respect to religious education. Exemption from licensure is not based upon assessment of program quality under established licensing standards.*

2. **Student Complaints:** The Licensure Division of the University of North Carolina General Administration serves as the official state entity to receive complaints concerning post-secondary institutions that are authorized to operate in North Carolina. **Your institution is required to provide information to students concerning the following student complaint process for the state of North Carolina:**

If students are unable to resolve a complaint through the institution's grievance procedures, they may review the Student Complaint Policy, complete the Student Complaint Form (PDF) located on the State Authorization webpage at <https://www.northcarolina.edu/stateauthorization>, and submit the complaint to [studentcomplaint@northcarolina.edu](mailto:studentcomplaint@northcarolina.edu) or to the following mailing address:

North Carolina Post-Secondary Education Complaints  
c/o Student Complaints  
University of North Carolina General Administration  
910 Raleigh Road, Chapel Hill, NC 27515-2688

**Application Certification:**

*I hereby certify that \_\_\_\_\_ is in compliance with Section 400.4.1.1 of the Policies of the Board of Governors of the University of North Carolina with respect to religious exemption from licensure. The required public notices will remain prominently displayed in relevant institutional publications, including the student catalog. I understand that upon failure to obtain exemption from licensure as required by these policies, or failure to fulfill any obligation attendant to exemption from licensure under these policies, the President may request that the Attorney General of North Carolina take appropriate action against the institution and seek other appropriate remedies.*

**Name of Authorized Institution Official:**

**Title of Authorized Institution Official:**

**Email Address:**

**Contact Number:**

**Signature of Authorized Institution Official:**