SOS APA Form 001

Mississippi Secretary of State

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME		CONTACT PERSON	TELEPHONE NUMBER	
MS Postsecondary Education Financial Assistance Board		Jennifer Rogers	601-432-6791	
ADDRESS		CITY	STATE	ZIP
3825 Ridgewood Road		Jackson	MS	39211
EMAIL	SUBMIT DATE	Name or number of rule(s): Title 10: Education Institutions and Agencies, Part 675: Graduate and Professional Degree Forgivable Loan Rules and Regulations		
jrogers@mississippi.edu	April 28, 2015			

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: To promulgate the rules and regulations for the Graduate and Professional Degree Forgivable Loan (STSC) as required by law.

Specific legal authority authorizing the promulgation of rule: *Miss. Code Ann.* § 37-106-65

List all rules repealed, amended, or suspended by the proposed rule: N/A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

X 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:** March 27, 2015 **Action taken:** X Adopted with no changes in text ____ Adopted with changes ____ Adopted by reference ____ Withdrawn X Repeal adopted as proposed **Effective date:** ____ 30 days after filing ____ Other (specify): ____

Printed name and Title of person authorized to file rules: Jennifer Rogers
Signature of person authorized to file rules: Jennifer Rogers 4/28/15

DO NOT WRITE BELOW THIS LINE

OFFICIAL FILING STAMP	OFFICIAL FILING STAMP	OFFICIAL FILING STAMP
		FILED APR 28 2015 MISSISSIPPI SECRETARY OF STATE
Accepted for filing by	Accepted for filing by	Accepted for filing by #21248

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